COVID-19 Childcare - Guidance for Childminders

Version History: V4.0 – 8 June 2020

Introduction

1. The first aim of the partial closure of childcare has been to reduce the overall population of children and families moving around local areas, as far as possible, in order to reduce the number of social interactions, and thus flatten the upward curve of the coronavirus outbreak. The second aim was to continue to care for priority children – those who are vulnerable, or whose parents are critical to the COVID-19 response, so that they can continue to work. Due to the huge efforts of people to adhere to social distancing and the success of lockdown measures the transmission rate of coronavirus has decreased. Currently the Northern Ireland Executive is considering the re-opening of childcare but this will depend on the continued progress in the fight against COVID-19 and must be staged in order to minimise the chance of infections increasing again. Please note that this guidance is for childminders. It will be updated regularly and available on https://www.familysupportni.gov.uk/Support/91/covid19-childcare-options-andassociated-guidance. Please consult the FSNI website at regular intervals. Information and support will also be available from the Northern Ireland Childminding Association and Employers for Childcare:

The Northern Ireland Childminding Association is a registered charity and membership organisation to support and develop registered childminding for the benefit of children, families and communities.

https://nicma.org Tel: 028 9181 1015 Email: info@nicma.org

Employers for Childcare is a registered charity aimed at removing the barrier that a lack of affordable, quality childcare presents to working parents. The charity encourages employers to implement family friendly policies in the workplace and also has an advice and information Freephone helpline to employees.

https://www.employersforchildcare.org/

Tel: 028 9267 8200 Freephone: 0800 028 3008

Email: hello@employersforchildcare.org

Information on COVID-19 and children

2. The current evidence suggests that children seem generally less likely to catch the infection and are not more likely than adults to spread infection to other people. Children have rarely been the first within a household to catch the virus when household spread has occurred. Children appear more likely than adults to have mild or no symptoms. Symptoms in children include a cough, fever (temperature of 37.8 or higher), runny nose, sore throat, diarrhoea and vomiting. It is important for parents and childminders to accept that no interpersonal activity is without risk of transmission of infection, but public health advice is that reopening on a phased basis and under certain conditions is now appropriate. Therefore there are a number of measures you will be required to put in place to enable you to operate as safely as possible in the interests of children and the staff who care for them [see below].

Definition of Keyworker

- 3. A definition of keyworker was developed at the start of the COVID-19 pandemic to determine who childcare could safely be provided for. A commitment was given by the Department of Health to keep the definition under review and to revise in line with medical and scientific advice. From 8 June 2020, the Northern Ireland Executive has agreed that the definition will be widened. As a result, childcare will be available for a greater number of parents.
- 4. From 8 June 2020, for the purpose of determining which parents will have access to childcare (childminding, daycare and school-age care), the following definition of keyworker will apply:
 - Health and Social Care. This includes doctors, nurses, midwives, paramedics, social workers, home carers and staff required to maintain our health and social care sector;
 - Education and childcare. This includes pre-school and teaching staff, social workers and those specialist education professionals who will remain active during the Covid-19 response;
 - **Public safety and national security.** This includes civilians and officers in the police (including key contractors), Fire and Rescue Service, prison service and other national security roles;
 - **Transport**. This will include those keeping air, water, road and rail transport modes operating during the Covid-19 response;
 - Utilities, and Communication. This includes staff needed for oil, gas, electricity and water (including sewage) and primary industry supplies to continue during the Covid-19 response, as well as key staff in telecommunications, post and delivery, banking and waste disposal;
 - **Construction and manufacturing**. This included anyone working in these sectors where it is not reasonable for that work to be undertaken from home.

- **Financial Services**. This includes staff needed for essential financial services provision (including but not limited to workers in banks, building societies and financial market infrastructure);
- **Food and other necessary goods**. This includes those involved in food production, processing, distribution and sale, as well as those essential to the provision of other key goods (e.g. hygiene, medical, etc.);
- **Retail**. This includes those workers who have been working throughout the pandemic in food retail, for example, and will now extend to those working in other retail businesses permitted to operate by the Executive from June 2020:
- Other workers essential to delivering key public services such as the National Crime Agency; and
- Key national and local government including those administrative occupations essential to the effective delivery of the Covid-19 response.

Definition of Vulnerable Child

- 5. For the purpose of accessing childcare, the definition of vulnerable child remains unchanged. A vulnerable child is a child currently known to social services, who is:
 - in need;
 - in need of protection (on the child protection register); or
 - Looked after.

The definition includes young carers, disabled children and those with Statements of special educational needs. If you have questions about whether or not a child falls within the definition, these should be addressed to your local Health and Social Care Trust (HSCT) Early Years Team. Vulnerable children can be looked after by Childcare settings and childminders.

A childminder, who is asked to provide care for any vulnerable child [who falls outside of the definition above] who attended their setting prior to COVID-19, should accommodate that child. In addition, childcare should be provided for any vulnerable child [who falls outside of the definition above], if a HSC Trust Early Years Team determines that it is in the child's best interests.

COVID-19 Childcare Sector Support Scheme

6. The Departments of Health and Education put in place a COVID-19 Childcare Sector Support Scheme providing financial support financial for childcare providers (childminders, daycare providers, school-age childcare providers and approved home childcarers). Please see details on: <a href="https://www.familysupportni.gov.uk/Content/uploads/userUploads/Financial%20Asistance%20to%20Childcare%20Providers%20(COVID-19)%20(003)%20(002)%20(002)...%20(002).pdf. In addition, to the offer of

financial support, the Department of Health is also offering indemnity against COVID-19-related incidents to childminders who have been endorsed to remain open or re-open by their local HSCT Early Years Team. If a childminder resumes business without the endorsement of the Early Years Team, they will not eligible to apply for support under the COVID-19 Childcare Sector Support Scheme and will not have indemnification against COVID-19-related incidents provided by the Department of Health. In addition, opening against the advice of the Northern Ireland Executive (as it relates to the re-opening of the economy) may have an impact on insurance cover and registration as a childminder. The Department of Health has powers under the Coronavirus Act 2020¹ to force the closure, subject to it being necessary and proportionate in response to the incidence or transmission of coronavirus.

Childminders Wishing to Resume Business - Process

- 7. If a childminder wishes to resume business, they must first inform the local HSCT Early Years Team of their intention to do so for the children of keyworkers or vulnerable children as defined above. HSCT Early Years Teams can then end the temporary "pause" put on the childminder's registration when they ceased working due to COVID19. From 8 June 2020, the restriction of caring for the children of 2 families at any given time will be relaxed. For 8 June to 30 June 2020, the number will increase to 3 families at the one time. The number will increase again to 4 families at the one time in July and to 5 families in August. This will be subject to medical and scientific advice at every stage. This measure is intended to reduce the risk of transmission between households.
- 8. Parents have been advised to check the Family Support NI website for the latest availability of childminders and daycare providers in their area. To ensure that parents are receiving the latest information, it is crucial that you inform the HSCT Early Years Team who will then inform the Family Support NI website team that you are open and caring for children Parents will then be able to contact you about any vacancies that you may have.

Minimum Standards - Ratios

- 9. Childminders must continue to comply with the Department of Health Minimum Standards as they relate to ratios, that is, with the specified maximum number of children who may be cared for as identified on the Registration Certificate. This number includes their own children under 12 years of age. The ratios are:
 - 1:6 six children under 12, of whom no more than 3 are under compulsory school age;
 - Normally no more than 1 child under a year old.

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¹ http://www.legislation.gov.uk/ukpga/2020/7/contents/enacted

In accordance with the Minimum Standards, where the childminder employs an assistant the same ratios must be met for any additional children, and arrangements must comply with the Trust's registration decisions regarding the ages and total number of children (up to a maximum of 8 at any one time, from no more than 3 households).

Infection Control

- 10. It is acknowledged that childminders have practices already in place in relation to infection control, and must keep up-to-date with current advice on COVID-19. We also encourage childminders and parents to discuss any concerns they have together and agree appropriate safety procedures where these are not specifically contained within any official guidance.
- 11. Childminders should promote and practice effective infection control, including the following:
 - Frequently handwashing with soap and water (or using hand sanitizer where soap and water are not available): The importance of frequent handwashing with soap and water for 20 seconds (or using hand sanitiser where soap and water are not available) and drying thoroughly is emphasised, including:
 - Before and after handling food, feeding a child, or eating;
 - Before and after using the toilet, changing a nappy, or helping a child use the bathroom (also wash the child's hands after helping the child use the bathroom or changing their nappy); After a child or childminder uses the toilet, the lid should be put down first before flushing. Afterwards the childminder should always wash their own and the child's hands;
 - Ensure there is always extra cleaning of the toilets, taps and door handles;
 - o If using a shared soap dispenser it is a good idea to clean after use;
 - After helping a child wipe their nose or mouth or tending to a cut or sore;
 - After playing in play areas;
 - Before and after giving medicine to a child;
 - After handling waste baskets or garbage; and
 - o Washing a child's hands on arrival at the setting and before they go home;
 - Ensuring that the surfaces that children and staff are touching, such as toys, books, desks, chairs, doors, sinks, toilets, light switches, bannisters are cleaned more regularly than normal.
 - Encouraging children to use a tissue or elbow to cough or sneeze and use bins for tissue waste ('catch it, bin it, kill it').
 - Ensuring that help is available for children and young people who have trouble cleaning their hands independently.
 - Limiting close contact with others as much as possible, acknowledging that this is not possible if working with babies, toddlers and younger children.
 - Where possible the child should be put into the care of the childminder at the door of the childminder's house.

- The childminder should avoid touching their own face, and where it is age appropriate discourage the children to do the same.
- Where possible, ensuring all spaces are well ventilated using natural ventilation (opening windows) or ventilation units.
- Ensuring that doors are propped open only if they are not fire doors, and where it is safe to do so (bearing in mind fire safety and safeguarding), to limit use of door handles and aid ventilation.
- Safely using cleaners and disinfectants on surfaces and objects, which includes:
 - Consideration of the hazards of the cleaners and disinfectants available for use:
 - In accordance with public health advice, removing all soft toys, and any toys that are hard to clean, such as those with intricate parts; and, where practicable, removing soft furnishings, for example pillows, bean bags and rugs.
 - Wearing gloves; and
 - Ensuring cleaners and disinfectants are used in a manner that does not endanger yourself or children at the setting.

Helping Children and Young People Understand the Public Health Measures in Place

- 12. It should be noted that some children will need additional support to help them understand why the public health measures being recommended by this Guidance are being followed. The use of meaningful symbols and social stories to support children to understand how to follow rules is advised. As far as possible, use innovative methods to inform children, appropriate to their age, on how they can help prevent the spread of COVID-19, including:
 - Frequent hand washing;
 - As far as possible, avoiding close and direct contact with other children;
 - Telling the childminder as soon as possible if they feel sick;
 - Promoting good coughing and sneezing etiquette (cover coughs and sneezes with a tissue or sleeve; not hands);
 - Discouraging children from sharing food, drinking cups, eating utensils, towels, toothbrushes, etc.

Drop Off, Pick Up

- 13. When children are being dropped off and picked up by their parents, the following steps should be considered:
 - tell children and parents not to enter your home if they are displaying any symptoms of coronavirus (COVID-19) (following the COVID-19: guidance for households with possible coronavirus (COVID-19) infection is available at: https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance;

- tell parents that only one parent should attend to drop off or collect their child. Parents and carers should not be allowed into your home unless this is essential, and children should be collected at the door if possible.
- stagger drop off and collection times as much as possible and tell parents the process for doing so.

Children with symptoms of coronavirus

- 14. A childminder must have in place a clear plan for dealing with children who become ill.
 - Children should not attend if they have symptoms or are self-isolating due to symptoms in their household.
 - A plan should be put in place for sharing information and guidelines with parents and guardians that includes:
 - A system to check with parents and guardians daily on the status of their children when children are dropped off;
 - Ensuring that up-to-date email addresses and home, work, and mobile phone numbers from parents and guardians of children so that they can be reached at all times and testing that they can be reached;
 - Communicating with parents and guardians that children should stay at home if they are sick, have been in contact with someone who has tested positive for Covid-19, or if someone in the household has symptoms (cough, fever, shortness of breath, or has a loss of, or change in, their normal sense of taste or smell);
 - Ask parents and guardians to check their children every day before coming to the childminder's home and to keep their children at home if their temperature is high, that is, if they feel hot to touch on the chest or back - they do not need to measure the child's temperature.);
 - Requiring parents to advise the childminder if they, their child or any other family member with whom they live or have had contact has tested positive for COVID-19; and
 - Know how to notify the HSC Trust Early Years Team and Public Health Agency if any child or parent who has been in the childminder's home has a COVID-19 infection.

If a Child Becomes Sick while in the childminder's home

- 15. If a child becomes sick in the childminder's home, regardless of whether they display symptoms of COVID19 (high temperature 37.8 degrees, or has a loss of, or change in, their normal sense of taste or smell (anosmia), and/or a new continuous cough):
 - · Contact the parents or guardians immediately;
 - While the child is awaiting collection, they should be moved to a room where they can be isolated behind a closed door, if possible and it is safe to do,

- depending on the age of the child and with appropriate adult supervision if required. Ideally, a window should be opened for ventilation. If it is not possible to isolate them, move them to an area which is at least 2 metres away from other people in the home.
- PPE should be worn by a childminder caring for the child while they await collection if a distance of 2 metres cannot be maintained (such as for a very young child or a child with complex needs).
- If direct care is required, such as nappy changing, while waiting for the child to be collected, you should wear PPE - a mask, plastic apron and gloves;
- If they need to go to the bathroom while waiting to be collected, they should use a separate bathroom if possible. The bathroom should be cleaned and disinfected using standard cleaning products before being used by anyone else.
- In an emergency, call 999 if they are seriously ill or injured or their life is at risk. Do **not visit the GP**, **pharmacy**, **urgent care centre or a hospital**.

Confirmed case of coronavirus (COVID-19) in a childminder's home

- 16. When a child develops symptoms compatible with coronavirus (COVID-19), they should be sent home and advised to self-isolate for 14 days and arrange to have a test to see if they have COVID-19 and follow all further medical advice. They can do this by visiting https://www.publichealth.hscni.net/covid-19-coronavirus/testing-and-tracing-covid-19#testing-for-essential-workers. Their fellow household members should self-isolate for 14 days.
- 17. Where the child tests negative, they can return to their setting and the fellow household members can end their self-isolation.
- 18. Where the child tests positive, any children who had been minded along with the child should be sent home and advised to self-isolate for 14 days. The household members of these other children do not need to self-isolate unless the child subsequently develops symptoms. The childminder can arrange to be tested, following the latest guidance available at https://www.publichealth.hscni.net/covid-19-coronavirus/testing-and-tracing-covid-19#testing-for-essential-workers.
- 19. As part of the national test and trace programme, if other cases are detected within the cohort, the Public Health Agency will conduct a rapid investigation and will advise childminders on the most appropriate action to take. More information is available at https://www.publichealth.hscni.net/covid-19-coronavirus/testing-and-tracing-covid-19/contact-tracing.

Personal Protective Equipment (PPE)

- 20. Childminders will not require PPE even if they are not always able to maintain a distance of 2 metres from others. PPE is only needed in a very small number of cases including:
 - children whose care routinely already involves the use of PPE pre-COVID19 due to their particular circumstances and intimate care needs. In these situations they should continue to receive their care in the same way as they did pre-COVID19; and
 - if a child becomes unwell with symptoms of coronavirus (COVID-19) while in the childminder's home and needs direct personal care until they can return home, a face mask, plastic apron and gloves should be worn by the childminder. If there is a risk of splashing to the eyes, for example from coughing, or spitting, then eye protection should also be worn.

Coronavirus Testing

21. Children over the age of 5 years, and members of their households, will have access to testing if they display symptoms of coronavirus (COVID-19). This will enable them to get back into childcare and their parents or carers to get back to work, if the test proves to be negative. Parents will have a number of routes to access testing for them and their children 5 years and over, they should contact their GP. Access to priority testing is already available to all essential workers including childminders. More information is available at: https://www.publichealth.hscni.net/covid-19-coronavirus/testing-and-tracing-covid-19.

Shielded and clinically vulnerable children and young people

22. For the vast majority of children and young people, coronavirus (COVID-19) is a mild illness. Children and young people (0 to 18 years of age) who have been classed as clinically extremely vulnerable due to pre-existing medical conditions have been advised to shield. It is not expected these children will be attending childcare and they should continue to be supported at home as much as possible. Clinically vulnerable (but not clinically extremely vulnerable) children are those considered to be at a higher risk of severe illness from coronavirus (COVID-19). The parents of children in this category should follow medical advice if their child is in this category.

Shielded and clinically vulnerable adults

23. Clinically extremely vulnerable individuals are advised not to work outside the home. We are strongly advising people, including childminders, who are clinically extremely vulnerable (those with serious underlying health conditions which put

them at very high risk of severe illness from coronavirus (COVID-19) and have been advised by their clinician or through a letter) to rigorously follow shielding measures in order to keep themselves safe. Any childminder in this position is advised not to provide childcare.

- 24. If a childminder lives with someone who is clinically vulnerable (but not clinically extremely vulnerable), including those who are pregnant, they can continue to childmind. Likewise, a child who lives with someone who is clinically vulnerable (but not clinically extremely vulnerable), including those who are pregnant, can continue to be childminded.
- 25. If a childminder lives in a household with someone who is extremely clinically vulnerable, as set out in the COVID-19: guidance on shielding and protecting people defined on medical grounds as extremely vulnerable guidance, it is advised they do not childmind. Likewise, a child who lives in a household with someone who is extremely clinically vulnerable should not be childminded. Read COVID-19: guidance on shielding and protecting people defined on medical grounds as extremely vulnerable for more advice.
 https://www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19

Paediatric First Aid Certification

- 26. The Minimum Standards require that childminders must have an up to date paediatric first aid training is present at all times. This requirement remains unchanged. It is acknowledged that face to face Paediatric First Aid Training is not possible currently but successful completion of online Paediatric First Aid Training is available through the Childcare Partnership Training Programme accessible on this link http://childcarepartnerships.hscni.net/training-quality-courses/. This training is acceptable on condition that the participant completes the practical exercise component completed on a face to face basis as soon as it is available. If settings cannot meet the above requirement they must notify the HSCT Early Years Team.
- 27. If a childminder needs to renew their paediatric first aid certificates they also should visit the Childcare Partnership website for information on the online training on offer. If Paediatric First Aid certificate requalification training is prevented for reasons associated directly with coronavirus (COVID-19), or by complying with related government advice, the validity of current certificates can be extended by up to 3 months with the agreement of the HSCT Early Years Team. This applies to certificates expiring on or after 16 March 2020. Childminders must do their best to arrange requalification training at the earliest opportunity.

Inspections of Childminders

28. Trust Early Years Teams may carry out an inspection during COVID-19, where it is considered necessary or appropriate.

Indemnification

29. We understand that childminders will not be covered by insurance in connection with a COVID-19 related incident. The Department of Health will indemnify childminders, who agree to continue to operate in pandemic circumstances. A formal letter of indemnification has already issued from the Department of Health as part of an agreed arrangement with childminders and daycare/school-age childcare providers. Further letters will issue to any childminder who resumes business. At this stage, indemnification covers the period 1 April to 30 June 2020.

Annex A: Resources to help children to learn about coronavirus and how to keep themselves and others safe

- Professional association for children and early years (PACEY): supporting children in your setting
- Dr Dog explains coronavirus
- Busy Bees:
 - 2 metres apart activity (PDF, 2MB)
 - Our hand washing song (PDF, 958KB)
- Bright Horizons: Talking to Children about COVID-19 (novel coronavirus)