

Educational Services

South Ayrshire Local Phasing Delivery Plan – COVID-19 Guidance for Early Years Centres



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Guidance for Early Years Centres/Version 5

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Introduction

On 21st May 2020 the Scottish Government published ‘Scotland’s route map through and out of the crisis’ and ‘Excellence and Equity During COVID-19 Pandemic – a strategic framework for reopening schools, early learning and childcare provision in Scotland’.

This management guidance takes account of recent Scottish Government publications including the updated guidance on 30th October 2020. It is designed to provide information which will assist delivery of early learning and childcare in our Early Years Centres during the COVID-19 pandemic. Moving forward it is key that local authority, private and voluntary services work together, share and develop the best ways of managing within a challenging and changing landscape.

Central to ongoing service delivery is the continued suppression of the virus. Although the prevalence of coronavirus in Scotland continues to evolve, we now know that young children are less likely to be affected by or transmit the virus. Advice from the Advisory Sub-Group on Education and Children’s Issues states:

“Children in the age groups accessing early learning and childcare have a low susceptibility to COVID-19 infection, they also have a low likelihood of onward transmission”

There will continue to be a need to rigorously observe public health guidance and prioritise the safety and wellbeing of children, parents and staff.

This means that early learning and childcare services will be different to how they operated before.

At the heart of the continued recovery of early learning centres will be the importance of relationships that respect the challenges and changes we are facing and clear communication that allows us to share information and respond appropriately.

Our priority is to ensure the safety and wellbeing of children, parents and staff by:

- Enhanced hand hygiene and cleaning practice;
- Limiting children’s contacts;
- Maximising the use of outdoor spaces;
- Physical distancing between adults in the setting including parents at drop-off and pick-up times; and
- Active engagement with Test and Protect.

1. Communication

- 1.1 Centres will operate differently than they have before. It is important that as far as possible new arrangements are communicated in advance to parents. As the situation progresses further, ways of communicating and updating parents will be agreed, particularly where face-to-face contact is reduced. Previously parents have valued the daily contact and staff can agree new ways to build the partnership with parents in line with GDPR.

This will include updating parents on children settling and agreeing Personal Care Plans when children start in the centre.

2. Physical Distancing

- 2.1. It is not possible to implement strict physical distancing between young children or between a young child and their key worker in an early years centre. Alternative, age appropriate public health measures and guidance will be put in place.

The need to limit physical contact or interaction between adults remains essential. The default position for all centres is that staff and any other adults should remain 2m apart. It is important to note that the requirement for 2m distancing reflects precautionary judgements based on current scientific advice. As the current situation evolves this is likely to change and any additional measures in place will be reviewed.

- 2.2. Physical distancing between adults must be implemented in all areas of the centre including playrooms, staff rooms and outside areas. This includes limiting numbers of staff in staff rooms to enable physical distancing. Staff should be mindful of cleaning communal equipment such as handles and kettles after use.
- 2.3. Only authorised visitors e.g. education staff should be in the building. No other visitors or contractors are permitted on site, unless absolutely necessary or in emergencies.

3. Use of Face Coverings

- 3.1 Face coverings are not required when working directly with children, including on the floor or supporting children to move around the building or with toileting, or as a result of being less than 2m distant from children.
- 3.2 Adults must maintain a 2m distance from other adults when working together with groups of children. Face coverings should be worn by adults wherever they cannot maintain a 2m distance from other adults (e.g. in corridor and communal areas).
- 3.3 Face coverings should also be worn by staff and visitors when not working directly with children when 2m distancing cannot be maintained, except where a person is exempt from wearing a face covering.
- 3.4 Face coverings should be strongly encouraged for parents and other visitors to the setting (whether entering the building or otherwise), including parents at drop-off and pick-up.

3.5 Some children may need additional support/reassurances about the reasons for adults wearing face coverings. The use of face coverings could have an impact for children with additional support needs and for children with EAL. These impacts should be carefully considered.

3.6 It is not recommended that children aged 5 and under wear face coverings in an ELC setting. However, anyone (whether a child or adult) wishing to wear a face covering in any part of the setting should be permitted to do so.

4. Drop-Off and Pick-Up

4.1. Parents will be asked to respect physical distancing on arrival and collection. Only one parent is to bring their child to the entrance (younger siblings may be present only if necessary). Staggered and allocated drop off/pick up times may be considered to support physical distancing measures.

4.2. Children will be welcomed by an appointed member of staff who will greet them, sign the child(ren) in and then escort the child to the appropriate playroom. The reverse will happen at point of pick up. Parents will not be in the playroom required to sign their child/ren in or out.

4.3. Where possible to ensure a clear flow the entry and exit route for parents and children should be clearly marked. Parents are not permitted enter the playrooms beyond the entry/exit route.

4.4. Children should wash hands on arrival.

4.5. Face coverings should be strongly encouraged for parents, including at drop-off and pick-up.

5. Ventilation

5.1 All settings must ensure the opening of doors and windows to increase natural ventilation where it is practical, safe and secure to do so, while maintaining appropriate internal temperatures.

5.2 Approaches to help achieve an appropriate balance of ventilation and internal temperature in the colder months may include:

- Partially opening doors and windows to provide ventilation while reducing draughts;
- Opening high level windows in preference to low level windows to reduce draughts; and
- Refreshing the air in spaces by opening windows, vents and external doors at times which avoid user discomfort (e.g. between sessions or when children are outdoors).

5.3 Keeping doors open (with appropriate regard to safety and security) may also help to reduce contact with door and window handles.

6. Risk Assessments

- 6.1 Managers and staff should be familiar with the latest Health Protection Scotland advice ([COVID-19 – guidance for non-healthcare settings](#)). Risk assessments should be in place to reflect the individual setting and the risks associated with coronavirus. Staff should be involved and familiar with the risk assessments in place.
- 6.2 Managers and head teachers should support requests for individual risk assessments and additional protection.
- 6.3 Guidance for people with underlying health conditions is in place to support discussions with managers, or parents and carers.

7. Capacities, Groups and Resources

- 7.1. Reducing the number of interactions that children and staff have is a key part of reducing risk in settings. This will reduce likelihood of direct transmission, and allow for more effective contact tracing through Test and Protect.
- 7.2. Local authority EYCs may operate at up to registered capacity. Centres should limit group sizes in line with guidance (33 children max.) making use of all available space and outdoor areas. Children should not mix or move freely between these groups. Staff cover, for example for lunches, should be limited as much as possible. Centres operating with more than 33 children should use existing partitions, create partitioning within rooms where possible, create areas within the outdoor area and/or explore an additional space available to the EYC. If groups are required to move between areas resources and touch points should be cleaned or changed.
- 7.3. To minimise risks, it is recommended that children access toys and equipment that are easy to clean. Resources such as sand, water and playdough should be used by one group only and changed after each session. Children should be discouraged from bringing toys from home.
- 7.4. EYCs should restrict sharing resources with home. If resources from the setting (for example, story bags) are taken home by a child, these should be quarantined for 72 hours upon return to the setting and must be cleaned before the next usage.

8. Operating Hours and Blended Placements

- 8.1 Term time centres will operate 8.30am – 4.00pm and full year centres will operate 8.00am – 6.00pm.
- 8.2 During this recovery period Managers and Head Teachers may work with staff to implement a shift system that suits the new way of operating. Where staff are in agreement, they may undertake longer shifts/compressed hours to reduce the number of changes of staffing. Staff working longer shifts are entitled to a one-hour break at lunch.

- 8.3 Blended/Split placements (defined as arrangements where children are attending two or more settings), are not encouraged, but may be permitted where necessary to support family childcare arrangements. In most cases this would be a matter for individual families and centres would manage, based on an appropriate risk assessment, in each setting.

9. Curriculum and Learning

- 9.1. Quality of experiences, learning and the wellbeing of children and families remain at the centre of decision-making. The early years curriculum must continue to be delivered in a way that is consistent with Curriculum for Excellence and Realising the Ambition, with a focus on child-led, play-based pedagogy driving practice. High quality childcare experiences must be age appropriate, rights based and child centred.
- 9.2. During the recovery period, staff should be clear on the rationale for the curriculum, in the current context, in how they are planning for literacy, numeracy and health and wellbeing as well as providing a broad general education.
- 9.3. All children will continue to require a profile and a Personal Care Plan. These will, more than ever, provide a focus on personalised learning and next steps. Personal Care Plans should be developed in partnership with parents for setting targets, reflecting GIRFEC wellbeing indicators and the range of children's needs particularly at early stages of return. The refreshed 'All About Me' booklet can be used to support children and families.
- 9.4 Younger primary school children cannot reasonably be expected to remain 2m apart from each other and staff whilst maintaining play-based learning

10. Transitions

- 10.1. The majority of children will have become used to being with their parents and immediate family for an extended period. Even for those who are excited to regain their freedom and see their friends, this is a potential source of anxiety. There will be children who struggle with this separation and experience anxiety while they are in the centre. Training in attachment (Coast Module) may enable staff to support children. Alternatively contact Psychological Services or Central Early Years Team for additional advice.
- 10.2. Transitions for children moving on to school and starting the early years centre will be very important. Normally, we spend much of the summer term continuing to prepare children for their move in to Primary 1 or starting an early years centre. In partnership with parents, centres may provide young children starting a centre with a soft start to support them to settle.
- 10.3. Staff will need to give careful consideration on how to manage children who struggle to separate from their parent and how a parent can safely help settle their child. Wherever possible when a child is settling into the service this should be undertaken in an outdoor area with the parent away from other children.

11. Snack and Lunches

- 11.1. All staff and children must follow hand washing procedures prior to eating.

- 11.2. A keyworker should be the designated food preparation staff member for the day/week and prepare food as required for all children who require it in the early years centre.
- 11.3. The food preparation area should be cleaned paying particular attention to worktops, taps and the hand wash sink(s). Appropriate protective clothing to be worn for food preparation ([Appendix 1](#)).
- 11.4. A free school meal of a packed lunch will be provided for children in the early years centre who attend for a full day. If children bring their own packed lunch from home staff should ensure that this is decanted into a clean bag and then refrigerated.
- 11.5. Food should be plated up for each child by the designated food preparation staff member and brought into the area so each child gets their own individual plate. No buffet style or sharing plates.

12. Hand Washing

- 12.1 This is the single most important practice to prevent the viral transfer from person to person. A strict programme must be adopted to ensure regular hand cleaning for staff and children. This should include handwashing on entering the playroom on arrival or following outdoor play, after using the toilet, after coughing and before eating. Consideration may need to be given to hand sanitiser stations outdoors.
- 12.2 Hand sanitiser must be available in every room and at reception.
- 12.3 Regularly revisit correct handwashing with staff and children and discourage touching eyes, nose or mouth as much as possible with small children.
- 12.4 Antibacterial hand gel is not recommended for children when soap and water is available.

13. Toothbrushing

- 13.1 Toothbrushing can continue where there are adequate facilities to do so. If carried out it must be carefully managed within the updated [Childsmile guidance](#).

14. Personal Hygiene

- 14.1 Staff should ensure that long hair is tied up and that they adopt an extremely high standard of personal handwashing. It is recommended that all jewellery such as rings and bracelets are removed and you change out of your work clothing and shower when you return home.
- 14.2 Health guidelines must be adopted with respect to sneezes, coughs and runny noses:

- Cover your mouth and nose with a tissue or your sleeve (not your hands) when you cough or sneeze;
- Put used tissues in the bin straight away and wash your hands afterwards; and
- Avoid close contact with people who are unwell.

15. Cleaning Equipment

- 15.1 All cleaning should be carried out in accordance with [COVID-19 – guidance for non-healthcare settings](#) and [Infection Prevention and Control in Childcare Settings](#) guidance. Each setting should have an extended cleaning regime in place. This may require a review of current cleaning arrangements to ensure additional cleaning hours are available.
- 15.2 Ensure rigorous cleaning of indoor surfaces, toys and equipment and also outdoor areas and equipment at least twice a day, lunch and end of day and at times of group rotations. Where appropriate some toys like Lego can be put in the dishwasher at the end of the day. There should be no soft furnishings or toys, rugs, cushions, dressing up clothes or low level displays that children can access. Clothing, blankets and bedding should be for individual use and not shared during the session. Where possible children should bring their own clothing for outdoor play.
- 15.3 The use of PPE is appropriate to the task and in line with infection control guidelines. Please see [Appendix 1](#).
- 15.4 Ensure that soap remains available for regular handwashing and hand sanitisers are available in each playroom.
- 15.5 Where possible rooms should be well ventilated and windows open.

16. Singing, Music and Drama

- 16.1 Advice from the Advisory Sub-Group on Education and Children's Issue has specifically considered the question of singing in ELC settings. It has concluded that singing should not happen indoors as an organised, large group activity. However, the Sub-Group recognises that children sing naturally in the course of activities and play, and should not be discouraged from doing so, and that singing can also be used to comfort young children when necessary.

17. PPE

- 17.1 Staff carrying out intimate care should wear an apron, gloves and mask if wished, unless a risk assessment has identified that additional PPE must be used. Normal nappy changing procedures should be followed. Staff should have access to disposable single use gloves for spillage of blood or other body fluids and disposing of dressings or equipment. Local infection control procedures that outline safety and protocols should be stringently followed. This includes procedures for the

disposal of soiled items; laundering of any clothes, towels or linen; and cleaning equipment and resources for children.

- 17.2 No additional PPE measure are required for general use in early learning and childcare settings. Staff should continue to follow existing guidance on the use of PPE. In cases of suspected COVID-19, use of PPE should be based on risk assessment and be mindful of the additional distress and impact on emotional wellbeing that children might experience due to measures introduced such as the use of face coverings.

18. Safeguarding

- 18.1 We all need to be extremely vigilant about children who may have experienced abuse during the lock down. We need to be aware of this as a possibility for all our children, not just the ones we had identified as vulnerable. Normal child protection procedures should be followed.

19. Management of a Suspected Case of COVID-19

- 19.1. If a child displays one of the following:

- New continuous cough;
- High fever (over 37.8 degrees); and/or
- A change or loss in taste or smell (anosmia).

One staff member should take the child to identified isolation room, (windows open and stay 2m apart where possible). Centre to phone the family/emergency contact.

- 19.2. A face mask, gloves and apron should be worn by the supervising adult if a distance of 2m cannot be maintained.
- 19.3. Parents should be advised to contact NHS for guidance on isolation periods (currently 10 days). In principle the child should self-isolate and not return to the centre within the isolation period along with household members. Should symptoms persist child should remain at home and seek guidance from NHS.
- 19.4. When the child has been collected the isolation room should be cleaned.
- 19.5. Staff who begin to feel unwell during the course of the working day should alert their manager immediately and follow COVID-19 protocol, go home and follow government guidance. If you begin to exhibit symptoms at home do not attend the centre and follow [NHS protocol](#).

20. Outbreak Management

- 20.1 If settings have two or more confirmed cases within 14 days or an increase in absence due to suspected cases, they may have an outbreak. If this is the case then please contact the central team. In partnership with the central team the centre will work with the local Health Improvement Team to manage the outbreak.

21. Notifications

- 21.1. Care Inspectorate must be notified through the E-Forms system within 24 hours of any suspected or known case of Covid-19. Please discuss with the central early years team.
- 21.2. Care Inspectorate do not require to be notified if carers or family members of people you provide care for are in self-isolation as a confirmed or suspected case.
- 21.3. Managers must notify the Care Inspectorate in the event of any confirmed or suspected outbreak of an infectious disease, that includes people who use care services. This includes:
- Any confirmed cases of coronavirus COVID-19;
 - Cases where people have been tested and are awaiting the results;
 - Cases where people have been informed they will be tested;
 - Cases where staff are self-isolating;

22. Enhanced and Targeted Protection in Levels 3 and 4

22.1 In addition to the protective measure outlined throughout the core guidance, the following, enhanced protective measures should also be applied for settings within a local area that has been designated as at Protection Level 3 or 4. These measures are in addition to, not instead of, the protective measures set out in the main guidance.

22.2 Protection Level 3 – Enhanced Protective Measures

- Parents should discuss with their GP or clinician whether children with the highest clinical risk should still attend.
- EYCs must ensure individualised risk assessments for staff members with the highest clinical risk are in place and updated appropriately.
- Decisions on appropriate protections should be informed by individual risk assessments, and may include protective measures in the workplace.
- Use of peripatetic staff reviewed to ensure this supports the health and wellbeing of young children.
- Risk assessments should be carried out where staff are working in more than one EYC.

22.3 Protection Level 4 – Enhanced and Targeted Protective Measures

- The current advice is that children on the shielding list should not attend in person. However, there will be further consideration of how individualised risk assessments can be used to maximise attendance, and remove barriers. It is expected that these should be informed by the secondary care (hospital) clinical team caring for the child.
- As in Protection Level 3 EYCs must ensure individualised risk assessments for staff members with the highest clinical risk are in place and updated appropriately.

- Settings should be prepared to engage with enhanced testing responses to COVID-19 outbreaks.
- Settings in areas in Level 4 may be asked to implement additional public health measures that may affect capacity. These may include for example, consistent small cohorts, minimising contact between cohorts and restriction of blended placements. Moving to Level 4 does not automatically require the use of these additional measures.

23. Test and Protect

- 23.1. Managers and staff must be aware of [Test and Protect](#) arrangements should they experience an incidence or outbreak. Test and Protect has a vital role to play alongside other public health measures such as physical distancing and good hand and respiratory hygiene to enable us, together, to maintain low levels of community transmission of COVID-19.
- 23.2. Staff and parents who are smartphone users should be encouraged to download The Protect Scotland contact tracing app to help suppress the spread of COVID-19,
- 23.3. If a member of the staff team has symptoms, they must contact the Education Single Point of Contact (EdSPOC). You can find more information on the COVID-19 Test and Protect [webpage](#).
- 23.4. EYCs must keep records of children, adults and staff attending their settings, and of the composition of any groups. These records will help to ensure rapid response and contact tracing should a positive case occur.
- 23.5. It is essential that people do not attend a setting if symptomatic. People who live in the same household as a person with symptoms must also self-isolate straight away and stay at home. **This includes staff who have had contact with their own children attending another EYC or school.** Only those developing COVID-19 symptoms should be tested. ELC setting staff who opt to undertake asymptomatic testing do not need to self-isolate while awaiting results, as long as not symptoms develop, unless they are a close contact of a symptomatic and confirmed case, in which case they will need to self-isolate.

24. Staff Wellbeing and Professional Learning Support

- 24.1 Scottish Government has worked with Early Years Scotland to develop a new [Team ELC Wellbeing Hub](#), a website which sets out vital information for the sector on maintaining their wellbeing at this difficult time, and creates opportunities for staff to connect with each other.
- 24.2 During the COVID-19 recovery period settings will require to adjust how they provide high quality provision. Further information can be accessed through the [‘Realising the Ambition: Being Me’](#) page on the National Improvement Hub. The principles that underpin that high quality, however, remain unchanged. Best practice will:
- Put the best interests of the child at the heart of decision making;
 - Take a holistic approach to the wellbeing of a child;

- Work with children, young people and their families on ways to improve wellbeing; and
- Advocate preventative work and early intervention to support children, young people and their families.

25. Self-Evaluation

- 25.1 The Care Inspectorate have developed a [self-evaluation tool](#) to support centres during the recovery and re-opening period. There is an expectation that all services will complete the reflective questions as part of their planning for reopening and service operation.

Appendix 1 – Personal Protective Equipment (PPE)

The PPE Guidance given in the table below is relative to COVID-19 protection measures.

This will be updated to reflect government guidance from the government.

Setting	Context	Disposable gloves	Disposable plastic aprons	Face Masks	Additional Guidance
Delivery of service in schools for pupils of key workers	Day to day working with children	No	No	No	https://www.gov.uk/government/publications/coronavirus-covid-19-implementing-social-distancing-in-education-and-childcare-settings/coronavirus-covid-19-implementing-social-distancing-in-education-and-childcare-settings
	Nappy Changing and personal care	Yes	Yes	No	https://hub.careinspectorate.com/media/1558/nappy-changing-guidance-for-early-years-and-childcare-services.pdf
	Snacks & Lunches	No	Yes	No	only if preparing/serving food
	Contact with bodily fluids	Yes	Yes	No	https://hub.careinspectorate.com/media/1538/infection-prevention-and-control-in-childcare-settings.pdf
	Suspected child with COVID-19	No	No	No	https://www.gov.uk/government/publications/coronavirus-covid-19-implementing-social-distancing-in-education-and-childcare-settings/coronavirus-covid-19-implementing-social-distancing-in-education-and-childcare-settings * A face mask, gloves and apron should be worn by the supervising adult if a distance of 2 metres cannot be maintained.

Schools and childcare provision operating with any necessary precautions.