

Early Years Providers STAGE 3 REQUIREMENTS

Providers who have been closed in Stage 2 and will be opening in Stage 3 are required to complete a Benefit Risk Assessment Check List (Appendix 2) and COVID Risk Assessment (Appendix 3) This must be agreed with the SEYT to ensure it is safe and they can demonstrate they can ensure the children and staff can operate safely meeting the PH guidelines before opening. The Risk Assessment must be completed by you and not left blank. Providers cannot submit the example risk assessment, please ensure the risk assessment provided fits in with your own provision and processes. The second column should be personalised to your own provision. The third column must include the RAG rating – Red, Amber and Green and make sure the level of risk you believe each potential risk to have is completed. This column cannot be left blank, it will be returned to you to complete if you send it through incomplete. Please ensure you put your name on the top of each documents.

Providers who have been open in Stage 2 are required to update their risk assessments.

Public Health Advice on COVID-19 for staff, families & others

Stay home if you are unwell

- Ensure staff and students with any flu-like symptoms do not attend your provision, by making this information clear and available to all. The symptoms to be aware of are included below. For clarity, whenever symptoms are referred to in this document, it is this list which should be referenced:
 - Fever (high temperature, rigors, chills, can't get warm)
 - Dry cough (continuous new cough)
 - Difficulty breathing, shortness of breath, chest tightness
 - Sore throat
 - New muscle aches and pains for no obvious reason
 - Tiredness, new and severe fatigue (recent onset)
 - Headache (sinus pain, pain around eyes)
 - Conjunctivitis (itchy, watery, painful or pink eye(s))
 - Loss of taste or smell
 - Diarrhoea
 - Vomiting
 - Children and over 80s – loose stool, mild fever, not themselves with a cough presenting later
 - A rash on skin or discolouration of fingers or toes (seek urgent medical advice)

- Chest pain or pressure, shortness of breath, chest tightness (phone emergency services 999)
- Loss of speech or movement (phone emergency services 999)
- Symptomatic individuals should isolate on their own until they have received the results of their COVID-19 test. Young children will require a parent or carer to isolate with them. The rest of the household can carry on their activities as normal, assuming they have no contact with the symptomatic individual or parent/carers isolating with the child.
- Anyone developing symptoms at your provision should be sent home immediately. Asymptomatic siblings of a symptomatic child do not need to be sent home.

Symptoms

| Symptoms | Isolate the child and contact parents/carers to collect child as soon as possible | Parents/carers to contact the Helpline | Seek urgent medical advice, call 999 |
|---|---|--|--------------------------------------|
| Fever > 38°C (high temperature, rigors, chills, can't get warm) | ✓ | ✓ | |
| Dry cough (continuous new cough) | ✓ | ✓ | |
| Difficulty breathing, shortness of breath, chest tightness | ✓ | ✓ | |
| Loss of taste or smell | ✓ | ✓ | |
| Runny nose | * | * | |
| Sore throat | ✓ | ✓ | |
| New muscle aches and pains for no obvious reason | ✓ | ✓ | |
| Tiredness, new and severe fatigue (recent onset) | ✓ | ✓ | |
| Unusual headache (sinus pain, pain around eyes) | ✓ | ✓ | |
| Diarrhoea | ✓ | ✓ | |
| Vomiting | ✓ | ✓ | |
| Conjunctivitis (itchy, watery, painful or pink eye(s)) | ✓ | ✓ | |
| Children and over 80s – loose stool, mild fever, not themselves with a cough presenting later | ✓ | ✓ | |
| A rash on skin or discolouration of fingers or toes (seek urgent medical advice *only if this is present alongside other symptoms) | ✓ | ✓ | ✓* |
| Chest pain or pressure, shortness of breath, chest tightness (phone emergency services 999) | ✓ | X | ✓ |
| Loss of speech or movement (phone emergency services 999) | ✓ | X | ✓ |

*Children, irrespective of their age, presenting with a runny nose and no other symptoms, please phone parents/carers as soon as possible and assess:

- Contact with a diagnosed case of COVID-19 in the past 14 days
- Household members presenting any of the symptoms listed above

- History of travel – individual or any household member – in the past 14 days
(Acknowledging this is unlikely during a period of lockdown)

If a positive answer is given to any for the 3 questions, child must be sent home and parent/carer requested to contact the helpline.

- A child or staff member who is symptomatic but has had a negative test should not return to your provision until all symptoms have cleared. This is to stop the spread of other bacteria and infection. More information about symptoms is available at the following link <https://COVID19.gov.gg/guidance/symptoms>
- During the January 2021 lockdown, Public Health have emphasised that everyone is treated individually and, therefore, people may receive differing advice in respect of self-isolation requirements, based on their very specific circumstances. For this reason it is important that staff teams refrain from speculating and adapting individualised Public Health advice. Please ensure that your staff appreciate the need for us all to follow the specific advice given to each person closely.
- To support our understanding, Public Health have clarified the key points below:
 - Anyone who starts to experience any symptoms no matter how mild, must self-isolate immediately and call the clinical hotline on 01481 756938 or 01481 756969 so a test can be arranged. You must self-isolate until these symptoms are gone and can stop isolating once you have been tested for COVID-19 and the result of that test was negative.
 - Contacts of a confirmed case must self—isolate for 14 days, irrespective of receiving a negative test result.
 - If a member of staff is isolating with their family, the contact will be tested on day 13 and the whole family can leave self-isolation when the contact receives the result of a negative swab.
 - Individuals who have been swabbed as part of a wider cohort can leave isolation upon receipt of a negative swab.
 - If an individual receives a negative swab from a wider cohort test but is confident they are a close contact of a case, i.e. they work with the case and have worked in very close proximity (under 2 metres) to them since they became symptomatic, they should stay in isolation and the Public Health Contact Tracing Team will be in touch with them as soon as possible. (Please note that this only applies to adults as children will find it difficult to determine if they are a close contact).
- Enable good hygienic practices with the promotion of, for example, frequent hand washing and respiratory hygiene (catch it, bin it, kill it);
Crucially, settings should ensure staff and children with symptoms do not attend your provision, by making this information clear and available to all. Providers should help to reinforce this message in their communications to make sure parents understand this.
- Shielded and clinically vulnerable people are those considered to be at a higher risk of severe illness from coronavirus. During this stage they should not attend any educational settings.
- Staff with serious underlying health conditions should rigorously follow guidance for the clinically vulnerable. Staff with other conditions that mean they are at increased risk of serious illness should work from home. It is important that leaders continue to support staff

to understand how best to manage their health conditions in periods of adjustment due to an outbreak of coronavirus.

- If anyone becomes unwell with any symptoms they should not attend the setting. If they develop any of these symptoms whilst at the setting, they must be sent home and advised to phone the Coronavirus helpline on 01481 756938 & 01481 756969, for advice & guidance and to follow the COVID-19 Guidance available at <https://COVID19.gov.gg/support/protect>
- If a child is awaiting collection, they should be moved away from all other children with a practitioner for example it would not be appropriate for younger children to be alone without adult supervision. 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. And inform the parents that an expedient collection is required.
- 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.
If they need clinical advice, they (or the practitioner, parent or guardian) should go online to <https://COVID19.gov.gg/guidance> If you have **any clinical questions** regarding the coronavirus please call 01481 756938 or 01481 756969 24 hours a day). In an emergency, call 999 if they are seriously ill or injured or their life is at risk. Do not visit the GP, pharmacy or a hospital.
- If a member of staff has helped someone who was taken unwell with a new, continuous cough or a high temperature, they do not need to go home unless they develop symptoms themselves. They should wash their hands thoroughly for 20 seconds after any contact with someone who is unwell. If they feel their clothes have been contaminated by someone coughing or sneezing on them they should change these and wash the contaminated clothing on a cycle of at least 60 °C, and tumble dry if possible.
- In most cases, closure of the educational setting will not be needed but this will be a local decision based on various factors such as establishment size and risk of further spread, Public Health will be able to advise on these cases.

What to do if we have a confirmed case of COVID-19 in our Provision

- Public Health and the SEYT will coordinate with you to ensure you can follow the guidelines found in the following document:
 - **Guidance 'Decontamination of non-clinical areas' (Appendix 1)**
For further information on all aspects of the Coronavirus go to www.gov.gg/coronavirus

Managing the Risks of Exposure to COVID-19

Physical distancing

Physical distancing is not required and it has always been acknowledged that physical distancing is not possible between children and children and between the key person and children. However, we do need to have regard to people's personal space so please consider the following:

- Continue to use your outdoor learning space as much as possible
- Continue to ensure good ventilation, open windows and try and get air flowing through the environments

Bubbles

You are not required to operate with bubbles in Stage 3

Shared Staff facilities

Continue to monitor the health of you and your staff for key symptoms of COVID-19.

Direct all staff (whether they are at the workplace or not) to report to you if:

- They are experiencing any symptoms
- They have been, or have potentially been, exposed to a person who has been diagnosed with COVID-19 or is suspected to have COVID-19 (even if the person who is suspected to have COVID-19 has not yet been tested), or
- They have undertaken, or are planning to undertake, any travel.
- Stop staff working if they are displaying symptoms.
- Stop staff who have contracted COVID-19 from returning to the workplace until they have been retested and they have received a negative result.
- If you do start to experience any symptoms, no matter how mild, please contact the Clinical Helpline by calling 01481 756938 or 01481 756969

Providers should continue to enforce a policy of

- Anyone with respiratory symptoms, no matter how mild, should not attend. This applies to staff and children
- Frequent hand washing in between activities, on arrival and exit of the premises, before and after meals and after using the toilet
- Clean and disinfect regularly touched objects and surfaces more often than usual using your standard cleaning products
- Supervise young children to ensure they wash their hands for 20 seconds more often than usual with soap and water or hand sanitiser and catch coughs and sneezes in tissues and dispose of them immediately and wash their hands straight away.
- Consider playing outdoors as much as possible, weather permitting.

Environmental cleaning

Please ensure you remain vigilant with high standards of cleaning as required by our Quality Standards. Continue to ensure you have 'snuffle stations' in each room with a close bin for staff to hygienically dispose of waste and rubbish, such as used tissues, immediately after use. Hand washing facilities or alcohol-based hand sanitiser should be available for staff to use after they dispose of their waste.

The following is the mandatory minimum cleaning requirement as formally directed by Public Health Services:

- **twice daily** cleaning of areas (with particular attention to door handles, handrails, light switches, reception desks, toilet flushes and taps) and all other communal areas where surfaces can easily become contaminated. Standard cleaning products should be used for these tasks.

- **Only if a case of COVID-19 is detected within the Providers environment, or if instructed to do so by Public Health or The States Early Years Team**, a single thorough decontamination of these areas and surfaces must be undertaken (this can be done in place of the second cleaning round specified above, ideally at the end of the day). This means using a chlorine solution of a 1000ppm (e.g. Chlor-Clean) or other disinfection products currently in use (Oxivir Plus is approved for this purpose). If you have any queries, please contact the States Early Years Team, who will liaise with Public Health Services, Infection Control Team or Environmental Health for further guidance.

Workforce Hygiene

Staff must practice good hygiene. Staff must wash their hands with soap and running water for at least 20 seconds. Hand washing should be done when they arrive and before they leave the premises, before and after eating and after going to the toilet. Other hygiene measures should include:

- Covering coughs and sneezes with an elbow or a tissue
- Immediately disposing of tissues in a bin with a lid
- Using alcohol-based hand sanitisers with at least 60% ethanol or 70% isopropanol as the active ingredient
- Cleaning and disinfecting surfaces and shared equipment after use
- Reporting and staying home if experiencing any symptoms.

Personal protective equipment (PPE) including face coverings

During the most recent period of lockdown, the wearing of face coverings in some public places became mandatory, with some exceptions. Advice provided by Public Health on the use of face coverings in Education Provision in the Bailiwick, is available here [Face Coverings](#)

In summary, face coverings are recommended indoors for adults in communal areas.

Communicating with Staff

Continue to allow staff to express their views and raise work health and safety issues that may arise directly or indirectly because of COVID-19. You must take the views of staff into account when making decisions and advise staff of your decision. Staff are most likely to know about the risks of their work. Involving them will help build commitment to this process and any changes.

Consultation does not require consensus or agreement but you must allow your staff to be part of the decision making process for COVID-19 related matters.

Staff must know:

- When to stay away from the workplace
- What action to take if they become unwell
- What symptoms to be concerned about.

You should remind staff they have a duty to take reasonable care for their own health and safety and to not adversely affect the health and safety of others.

You should provide staff with a point of contact to discuss their concerns, and access to support services.

If you require further support or advice to support staff back into work please contact the SEYT.

Requirements for Parents

Parents must continue to ensure the following when using Early Years Providers:

Keep safe

- Stay home if you or your child are sick. Children who arrive at an Early Years Provider with any COVID 19 symptoms will be sent home.
- Ensure any parent informs the Provider if they have travelled off island. 14 day self-isolation will be required before returning to work or attending the provision.

If your child is attending their EY Provision

Good hygiene matters, if appropriate;

- Remind your child that they are expected to follow good hygiene practices - wash and dry hands regularly, cough into their elbow, don't touch their face, and use hand sanitiser.

Additional Advice to Leaders & Managers

- Keep your knowledge of the COVID-19 situation up-to-date. Follow advice from the States Early Years Team
- Ensure you understand your business and its hazards and risks. Risk assessments are a useful tool to help identify hazards and risks, as well as providing strategies to help manage them. Where you have risk assessments in place, they may need to be reviewed to ensure they are up to date.
- Make sure your workplace is properly resourced to manage risks during a COVID-19 outbreak, Use your risk assessment to support this.
- Review your policies, procedures and reporting process to ensure they remain current for any incidents, hazards and other issues that arise during this time. Update these materials if necessary.
- Ensure these are communicated clearly and processes are being followed.
- Consult with staff and ensure there is a means for them to raise any concerns about the steps you are taking to manage the risks.

Support Services

Additional [help & support](#) from a range of services and charities is available for everyone to access as they need.

Appendix 1

Guidance – Decontamination of non-clinical areas

What you NEED to know

1. cleaning an area with normal household disinfectant after someone with suspected coronavirus (COVID-19) has left will reduce the risk of passing the infection on to other people
2. if an area can be kept closed and secure for 72 hours, wait until this time has passed for cleaning as the amount of virus living on surfaces will have reduced significantly by 72 hours
3. wherever possible, wear disposable or washing-up gloves and plastic disposable aprons for cleaning. These should be double-bagged, then stored securely for 72 hours then thrown away in the regular rubbish after cleaning is finished
4. using a disposable cloth, first clean hard surfaces with warm soapy water. Then disinfect these surfaces with the cleaning products you normally use. Pay particular attention to frequently touched areas and surfaces, such as bathrooms, grab-rails in corridors and stairwells and door handles
5. if an area has been heavily contaminated, such as with visible bodily fluids, from a person with coronavirus (COVID-19), consider using protection for the eyes, mouth and nose, as well as wearing gloves and an apron
6. wash hands regularly with soap and water for 20 seconds, and after removing gloves, aprons and other protection used while cleaning

Principles of cleaning after the case has left the setting or area

Personal protective equipment (PPE)

The minimum PPE to be worn for cleaning an area where a person with possible or confirmed coronavirus (COVID-19) is disposable gloves and an apron. Hands should be washed with soap and water for 20 seconds after all PPE has been removed.

If a risk assessment of the setting indicates that a higher level of virus may be present (for example, where unwell individuals have slept such as a hotel room) or there is visible contamination with body fluids, then the need for additional PPE to protect the cleaner's eyes, mouth and nose might be necessary.

Cleaning and disinfection

Communal areas where a symptomatic individual has passed through and spent minimal time, such as corridors, but which are not visibly contaminated with body fluids can be cleaned thoroughly as normal.

All surfaces that the symptomatic person has come into contact with must be cleaned and disinfected, including:

- objects which are visibly contaminated with body fluids

- all potentially contaminated high-contact areas such as bathrooms, door handles, telephones, grab-rails in corridors and stairwells

Use disposable cloths or paper roll and disposable mop heads, to clean all hard surfaces, floors, chairs, door handles and sanitary fittings, following one of the options below:

- use either a combined detergent disinfectant solution at a dilution of 1,000 parts per million available chlorine

Or

- a household detergent followed by disinfection (1000 ppm av.cl.). Follow manufacturer's instructions for dilution, application and contact times for all detergents and disinfectants

Or

- if an alternative disinfectant is used within the organization, this should be checked and ensure that it is effective against enveloped viruses

Avoid creating splashes and spray when cleaning.

Any cloths and mop heads used must be disposed of and should be put into waste bags as outlined below.

When items cannot be cleaned using detergents or laundered, for example, upholstered furniture and mattresses, steam cleaning should be used.

Any items that are heavily contaminated with body fluids and cannot be cleaned by washing should be disposed of.

If possible keep an area closed off and secure for 72 hours. After this time the amount of virus contamination will have decreased substantially and you can clean as normal with your usual products.

Laundry

Wash items in accordance with the manufacturer's instructions. Use the warmest water setting and if possible tumble-dry items or ensure they are completely dry. Dirty laundry that has been in contact with an unwell person can be washed with other people's items.

Do not shake dirty laundry, this minimizes the possibility of dispersing virus through the air.

Clean and disinfect anything used for transporting laundry with your usual products, in line with the cleaning guidance above.

Waste

Waste from possible cases and cleaning of areas where possible cases have been (including disposable cloths and tissues):

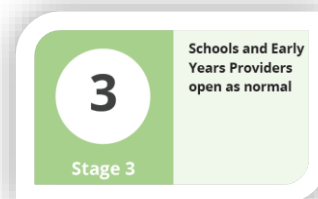
1. Should be put in a plastic rubbish bag and tied when full.
2. The plastic bag should then be placed in a second bin bag and tied.
3. It should be put in a suitable and secure place and marked for storage until the individual's test results are known.

Waste should be stored safely and kept away from children. You should not put your waste in communal waste areas until negative test results are known or the waste has been stored for at least 72 hours.

- if the individual tests negative, this can be put in with the normal waste
- if the individual tests positive, then store it for at least 72 hours and put in with the normal waste

If storage for at least 72 hours is not appropriate, arrange for collection as a Category B infectious waste - Please contact Public Health Services or Environmental Health for advice on 725241.

APPENDIX 2 – Benefit-Risk Assessment checklist for Stage 3 CHILDMINDERS



Detailed below is a summary of key requirements for opening in Stage 3 if previously closed. Please contact the States Early Years Team with any questions or requests for support.

| NAME OF PROVIDER | | | | |
|--|------------|-----------|----------------|-------------|
| Preparing to open | Yes | No | ACTIONS | DATE |
| You have completed your risk assessment for Stage 3 | | | | |
| You read and understood the guidance for EY Providers | | | | |
| Clear communications with parents/carers <ul style="list-style-type: none"> Parents understand that children must not attend your provision if they are unwell Updated information including emergency contact details have been checked and updated Ensure you have a procedure for contacting parents immediately, if you, the childminder are unwell with COVID-19 symptoms during a session and the children need to be collected immediately. | | | | |
| Ensure outdoor areas are safe and risk assessments up to date | | | | |
| Ensure you have planned for using your outdoor area. | | | | |
| Entry to your home | Yes | No | ACTIONS | DATE |
| Contact tracing registers are easily accessible and record date/time/name of those coming on site | | | | |
| Handwashing | Yes | No | ACTIONS | DATE |
| You and children regularly wash hands - on arriving, every bathroom break and before and after meals. | | | | |
| You supervise children to regularly wash hands either with soap and water or use of hand sanitiser. | | | | |
| Food hygiene | Yes | No | ACTIONS | DATE |

| | | | | |
|--|------------|-----------|----------------|-------------|
| Tables are cleaned and disinfected after use. | | | | |
| Food is supplied according to public health guidance, and food handlers adhere to standard hygiene practices. | | | | |
| Cleaning | Yes | No | ACTIONS | DATE |
| High-touch surfaces (e.g. play gyms, tables, chairs, doorknobs, light switches, remotes, handles, desks, toilets, sinks) are regularly cleaned daily | | | | |
| Appropriate cleaning supplies are maintained and stored safely out of reach of children. | | | | |
| Disinfect and clean all surfaces daily, including sleep furniture. | | | | |
| Teaching and Learning | Yes | No | ACTIONS | DATE |
| All staff continue to meet the needs of individual children and their learning and development, wellbeing and emotional development must be a priority | | | | |
| Additional Public Health Measures | Yes | No | ACTIONS | DATE |
| Ensure the sufficient supply of hand sanitiser, soap and appropriate cleaning products. | | | | |
| Indoor and outdoor space is utilised | | | | |
| Enhanced cleaning routine is in place and completed daily. | | | | |

APPENDIX 3 Stage 3 COVID Risk Assessment for Childminders who have been closed during Stage 2

This risk assessment template will help you identify potential risks associated with coronavirus (COVID-19). Our main aim is to make childcare settings as safe as possible for children, staff and families, so we've come up with some areas for you to look at to help you assess risk in your settings, based on guidance.

This example is designed to help early year's providers, carry out a risk assessment. **You MUST write your own risk assessment, taking into account the needs of your particular childcare setting and the families you work with. Please add to column 2 and write in column 3 the level of risk including the level of risk e.g. green/yellow/red**

- Take a whole setting approach and consider the risks and the measures you plan to put in place from a child's point of view, as well as from staff and parents' points of view.
- Regularly reassess the risks in light of updates to government guidance and any changes at your setting. For example, reassess if you, a family member (for home-based settings), a staff member, a child in your care, or someone in one of their families with becomes unwell with coronavirus symptoms. Or other changes such as a child leaving or joining your setting or moving to a different developmental stage, for example crawling or walking.
- Make a note of what's working well and what people (adults or children) are struggling with. Be confident to introduce new routines and any changes needed to keep you, your family and the children and families you work with safe.

Please TYPE the Colour for your rating e.g. RED – As this will help those of us who are coloured blind to read and understand your document – thank you.

STAGE 3 COVID-19 Risk assessment for childminders if they have been Closed in Stage 2

| | | |
|------------------|---|-------|
| Name of Provider | Assessment carried out by: | Date: |
| Review Date: | <p>Red – high risk</p> <p>Yellow – medium risk</p> <p>Green - little or no risk</p> | |

| Focus | Who will this affect, and which areas are affected? | Measures to be taken | Risks and level of risks |
|-------|--|--|--------------------------|
| | | | |
| | Play and Learning in the childminding setting Children Childminders own children | <ul style="list-style-type: none"> Ensure children wash hands regularly, throughout the day, as well as before eating, after coughing or sneezing. | |
| | Health and Wellbeing of the children in our childminded setting Children | <ul style="list-style-type: none"> It is our duty as childminders to ensure that the wellbeing of our children in our care is paramount. We will support the children by gently introducing songs and rhymes pertaining to hand washing, sneezing and coughing. We will support them in accordance with their level of understanding. | |

| | | | |
|--|---|---|--|
| | <p>Childminders own children</p> | <ul style="list-style-type: none"> • We will in line with EYFS, PSED, continue to teach children about self-care and hygiene including safe hand washing, and sneezing and coughing into a tissue. • We will have the 'Catch it, Kill it, Bin it' poster in our setting displayed at the level a child can see. • Children will be supported in every way possible and in partnership with parents. | |
| | <p>What to do if a child begins to display signs and symptoms of COVID 19</p> <p>(see https://COVID19.gov.gg/)</p> <p>Children Childminders own Children</p> | <ul style="list-style-type: none"> • If we suspect that a child is beginning to display signs and symptoms of COVID 19 we will (where possible) <ul style="list-style-type: none"> ➤ Isolate the children (without scaring them) by going into another room away from the other children (if possible). ➤ If a child begins displaying any symptoms, we will contact parents immediately to come and take their child home. ➤ Whilst awaiting for a parent to pick up their child, we will take them to another room or place them at least two metres away from the other children. We will also open a window to allow for ventilation of the room. ➤ Any use of the bathroom by the 'poorly' child will be disinfected and cleaned accordingly before anyone else can use the bathroom. ➤ Hand washing procedures will also be enacted. ➤ Mask, gloves and disposable apron will be used at this time while comforting the poorly child until the parent arrives. Hand washing to take place within seconds of the child leaving and disinfecting procedures to be enacted. ➤ We will clean the area thoroughly and if possible should be left unattended for at least 72 hours. However, this might not be possible so a deep clean is essential. ➤ Should the childminder or anyone else in the setting fall ill as a result and TESTS positive the setting will close with immediate effect. ➤ Any child who tests positive for COVID-19 should not return to the setting until they have been classed as recovered by | |

| | | | |
|--|---|--|--|
| | | <p>Public Health. This will be a minimum of 10 days from the initial diagnosis.</p> <p>➤ If there is a confirmed case the contact tracing team will require the details of every child and adult within that setting. The Contact tracing team will determine who are close contacts and isolate these individuals. The States Early Years Team will work closely with Public health to ensure the safety of all within the setting.</p> <p>In the event we are unsure and require professional clinical advice we will call the COVID helpline and 999 if immediate health assistance is required.</p> | |
| Personal Protective Equipment | Childminder, Children and Parents | <ul style="list-style-type: none"> • Wearing a face covering in the childminding setting is not required. We will continue using gloves and aprons as appropriate in the event of nappy changing, cleaning bodily fluids and so forth. Maintained, for example on public transport or in some shops as the law applies. • PPE is only needed in a very small number of cases including: <ul style="list-style-type: none"> ➤ If a child or baby becomes unwell with symptoms of coronavirus while in their setting and needs direct personal care until they can return home. A fluid-resistant surgical face covering should be worn by the supervising adult if a distance of 1 metres cannot be maintained. ➤ If contact with the child or young person is necessary, then disposable gloves, a disposable apron and a fluid-resistant surgical face covering should be worn by the supervising adult. ➤ If a risk assessment determines that there is a risk of splashing to the eyes, for example from coughing, spitting, or vomiting, then eye protection should also be worn | |
| Cleaning of the setting indoor and outdoor | Undertake regular cleaning throughout the setting both indoors and outdoors | <ul style="list-style-type: none"> • We will clean AND disinfect frequently touched surfaces throughout the day to limit infection transmission. • We will clean and disinfect tables, chairs, resources, equipment, doorknobs, light switches, countertops, handles, toilets, taps, and sinks. | |

| | | | |
|-------------------|---|---|--|
| | Applies to Parents, Children, Visitors and childminder and assistants | <ul style="list-style-type: none"> • Will only wear one pair of disposable gloves for cleaning and dispose of them correctly. The same gloves will not be worn throughout the day. • We will ensure that all adults, children, and visitors to the setting wash hands regularly with soap and water for 20 seconds, and after removing gloves, aprons and other protection used while cleaning. • We will vacuum and spray any carpet areas on a weekly basis. | |
| Cleaning REVIEWS: | Cleaning of electronics TV Mobile Phones Telephone Keyboards Computers Children electrical toys | <ul style="list-style-type: none"> • It is essentially that we regularly clean our iPad, computers, TV Screens, keyboards, telephones, and remote controls. We will be doing this daily using Dettol spray and reusable wipes. | |