

TAMESIDE COVID-19

Resource Pack for Schools, Early Years Childcare Settings and Childminders

VERSION 2

22nd June 2020

ABOUT THE GUIDANCE

This guidance provides links to national guidance and includes Tameside specific information. It pulls together all helpful information for settings including template letters and contact details. This guidance should be used alongside the DfE guidance, Covid-19 Guidance for ['Schools and other educational settings'](#) and ['Planning guide for early years and childcare settings'](#).

The DfE has set out in various guidance documents, what settings should do in the event that a child or an employee becomes unwell/shows symptoms of coronavirus or tests positive for coronavirus. The information below brings the various pieces of guidance together. The extracts outline a number of scenarios that settings may have to deal with as they extend their offer to more children. In addition to these extracts, you will find model template letters which you may find useful as a starting point for communications in these circumstances. These will need to be adapted to meet the specific needs of your setting.

This information has been collated by colleagues in Public Health, Education, Early Years, Health and Safety, Human Resources during the week beginning 15th June 2020. As you are aware, DfE/Government guidance is changing constantly, and so it is strongly advised that in order to have the most up to date information, you should continue to check the relevant website/links for updates on a regular basis.

Please ensure that you replace previous guidance with any updates each time.

VERSION CONTROL

Date	Update	Contributors	Version number
8th June 2020	First draft to include <ul style="list-style-type: none"> • Step by step guidance • Collation of FAQs • Model letter templates • Track and trace information 	Debbie Watson Debbie Watson/ Sarah Exall/ Alison Glover James Mallion	V1
22 nd June 2020	Inclusion for PVI and Childminders Update on track and trace section Addition of Glossary of Terms	Lorraine Hopkins Janet Perry Sharon Scholes Debbie Watson Debbie Watson Charlotte Lee	V2

LOCAL AREA KEY CONTACTS

For COVID-19 queries related to educational settings and PVIs

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Out of hours contact: Covid-19@tameside.gov.uk

Tameside & Glossop Infection Prevention and Control Team:

0161 922 6194 (9-5pm – out of hours please call PHE contact)

Health and Safety:

Alison Glover, Health and Safety Manager

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For any matter related to health and safety please contact healthandsafety@tameside.gov.uk

To notify suspected outbreaks Public Health England North West Health Protection Team

Monday – Friday (09.00 – 17.00)	0344 225 0562
Out of Hours PHE Contact: Public Health England first on call via the Contact People	0151 434 4819

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1. KEY MESSAGES

What are the symptoms?

The main symptoms of COVID-19 are:

- new continuous cough and/or
- fever (temperature of 37.8°C or higher)
- Loss of or change in, normal sense of taste or smell (anosmia)
- Children may also display gastrointestinal symptoms.

What is the mode of transmission?

COVID-19 is passed from person to person mainly by large respiratory droplets and direct contact (close unprotected contact, usually less than one metre). These droplets can be directly inhaled by the person, or can land on surfaces which another person may touch which can lead to infection if they then touch their nose, mouth or eyes.

What is the incubation period?

The incubation period (i.e. time between exposure to the virus and developing symptoms) is between 1 and 14 days (median 5 days).

When is a person infectious?

A person is thought to be infectious 48 hours before symptoms appear, and up to seven days after they start displaying symptoms.

Are children at risk of infection?

Children of all ages can catch the infection but children make up a very small proportion of COVID-19 cases with about 1% of confirmed cases in England aged under 19 years. Children also have a much lower risk of developing symptoms or severe disease.

Can children pass on the infection?

There is some uncertainty about how much asymptomatic or mildly symptomatic children can transmit the disease but the evidence so far from a number of studies suggests children are less likely to pass it on and do not appear to play a major role in transmission. Most children with COVID-19 have caught the infection from adults and not the reverse. This is unlike 'flu.

Why is PPE not recommended for staff and children?

Transmission of Covid-19 is usually through droplets; the mainstay of control measures is minimising contact and thorough hand and respiratory hygiene. When these measures are maintained, and symptomatic persons are excluded, the risk is minimal.

2. MANAGING A POSSIBLE OR CONFIRMED CASE OF COVID-19

If someone in an education or childcare setting shows symptoms of COVID-19	
<p>If a child or staff member is unable to attend setting because they have COVID-19 symptoms.</p>	<p>Anyone who develops symptoms of COVID-19, or whose household member develops symptoms, should immediately self-isolate. They should not attend the setting and should follow the steps below.</p> <ul style="list-style-type: none"> • Parent/Carer or staff member should notify the setting of their absence by phone • Settings should record and keep minimum dataset (see suggested template in Appendix 1): Reason for absence, date of onset of symptoms, symptoms, class etc. • Direct to Stay at home guidance for isolation advice for child/staff member and their households. The person with symptoms should isolate for 7 days starting from the first day of their symptoms and the rest of their household for 14 days. <p>Advise that the child/staff member should get tested via NHS UK or by contacting NHS 119 via telephone if they do not have internet access This would also apply to any parent or household member who develops symptoms. If any staff contact develops symptoms then they can apply for a test via https://www.gov.uk/apply-coronavirus-test-essential-workers.</p> <p>There is no further action required by the setting at this time.</p>
<p>If someone becomes unwell at an educational or childcare setting.</p>	<p>If anyone in an education or childcare setting becomes unwell with a new, continuous cough or a high temperature, or has a loss of, or change in, their normal sense of taste or smell (anosmia), they must be sent home and advised to follow the stay at home guidance: https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance/stay-at-home-guidance-for-households-with-possible-coronavirus-covid-19-infection</p> <p>COVID-19: guidance for households with possible coronavirus infection</p> <ul style="list-style-type: none"> • If you have symptoms of coronavirus (COVID-19), however mild, OR you have received a positive coronavirus (COVID-19) test result, the clear medical advice is to immediately self-isolate at home for at least 7days from when your symptoms started. Do not go to a GP surgery, pharmacy or hospital. You should arrange to have a test to see if you have COVID-19 - go to testing to arrange. • Consider alerting the people that you have had close contact with in the last 48 hours to let them know you have symptoms of coronavirus COVID-19. • Following a positive test result, you will receive a request by text, email or phone to log into the NHS Test and Trace service website and provide information about recent close contacts.

	<ul style="list-style-type: none"> • After 7 days, or longer, if you still have symptoms other than cough or loss of sense of smell/taste, you must continue to self-isolate until you feel better. • You do not need to self-isolate if you only have a cough or loss of sense of smell/taste after 7 days, as these symptoms can last for several weeks after the infection has gone. • If you live with others and you are the first in the household to have symptoms of coronavirus (COVID-19), then you must stay at home for at least 7 days. All other household members who remain well must stay at home and not leave the house for 14 days. The 14-day period starts from the day when the first person in the household became ill. • Staying at home for 14 days will greatly reduce the overall amount of infection that people in your household could pass on to others in the community. • If anyone else in the household starts displaying symptoms, they must stay at home for at least 7 days from when their symptoms appeared, regardless of what day they are on in their original 14-day isolation period. • If you have symptoms, you should stay as far away from other members of your household as possible. It is especially important to stay away from anyone who is clinically vulnerable or clinically extremely vulnerable with whom you continue to share a household. • Reduce the spread of infection in your home by washing your hands regularly for 20 seconds using soap and water, or use hand sanitiser, and cover coughs and sneezes. • If you feel you cannot cope with your symptoms at home, or your condition gets worse, or your symptoms do not get better after 7 days, then use the NHS 111 online coronavirus (COVID-19) service. If you do not have internet access, call NHS 111. For a medical emergency dial 999. • If you develop new coronavirus (COVID-19) symptoms at any point after ending your first period of isolation (self or household) then you must follow the same guidance on self-isolation again.
<p>Considering other children/staff in the assigned group where someone has become unwell.</p>	<ul style="list-style-type: none"> • If a child has become unwell (see below for action required for symptomatic child), at this stage, children in the assigned group can remain on the premises and remain within their assigned group where possible. • A letter should be prepared and sent to the parents of other children within the assigned group. (Please see model templates further below). • If a staff member has become unwell, arrangements should be made to replace the staff member to cover the assigned group.

	<ul style="list-style-type: none"> • A letter should be prepared and sent to the employee and the parents of the children within the assigned group. (Please see model templates further below). <p>All staff and students who are attending an education or childcare setting will have access to a test if they display symptoms of coronavirus, and are encouraged to get tested in this scenario.</p> <p>Advise that the child/staff member should get tested via NHS UK or by contacting NHS 119 via telephone if they do not have internet access This would also apply to any parent or household member who develops symptoms. If any staff contact develops symptoms then they can apply for a test via https://www.gov.uk/apply-coronavirus-test-essential-workers.</p>
<p>If a symptomatic child is awaiting collection.</p> <p>Coronavirus (COVID-19): implementing protective measures in education and childcare settings</p>	<ul style="list-style-type: none"> • If a symptomatic child is awaiting collection, they should be moved if possible, to a room where they can be isolated behind a closed door, 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. • 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. • PPE should be worn by staff 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). Please visit: https://www.gov.uk/government/publications/safe-working-in-education-childcare-and-childrens-social-care/safe-working-in-education-childcare-and-childrens-social-care-settings-including-the-use-of-personal-protective-equipment-ppe • The setting should record and keep the details of the incident in case it is needed for future case or outbreak management (see suggested template in Appendix 1). • 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.
<p>If a member of staff has helped someone with symptoms.</p>	<ul style="list-style-type: none"> • If a member of staff has helped someone with symptoms, they do not need to go home unless they develop symptoms themselves (and in which case, a test is available). If the member of staff comes into close proximity of someone with symptoms, and that person subsequently tests positive, they would not be considered a 'close contact' or need to self-

	<p>isolate as long as they wore appropriate PPE while in contact with that person.</p> <ul style="list-style-type: none"> • They should wash their hands thoroughly for 20 seconds after any contact with someone who is unwell. https://www.gov.uk/government/publications/guidance-for-contacts-of-people-with-possible-or-confirmed-coronavirus-covid-19-infection-who-do-not-live-with-the-person/guidance-for-contacts-of-people-with-possible-or-confirmed-coronavirus-covid-19-infection-who-do-not-live-with-the-person
<p>Cleaning an area after someone with suspected coronavirus (COVID-19) has left.</p> <p>See the COVID-19: cleaning of non-healthcare settings guidance</p>	<ul style="list-style-type: none"> • 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. • Wear disposable gloves and plastic 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. • 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. • If an area has been heavily contaminated, such as with visible bodily fluids, from a person with coronavirus (COVID-19), use protection for the eyes, mouth and nose, as well as wearing gloves and an apron. • Wash hands regularly with soap and water for 20 seconds, and after removing gloves, aprons and other protection used while cleaning.
<p>Use of PPE for cleaning an area when there has been a possible or confirmed coronavirus (COVID-19) case</p> <p>See the COVID-19: cleaning of non-healthcare settings guidance</p> <p>See the COVID-19: guidance on isolation for residential educational settings</p>	<ul style="list-style-type: none"> • 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 boarding school dormitory) 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. • Staff in settings should be trained in the correct use of PPE including wearing a Fluid Resistant Surgical mask (FRSM), to protect themselves against other people's potentially infectious respiratory droplets when within 2 metres, and the

	<p>mask use and supply of masks would need to be equivalent to that in healthcare environments.</p>
<p>What if a child requires first aid? What PPE is recommended?</p>	<p>When giving first aid, where a first aider is in close contact with a child, and it is not possible to maintain a 2 metre or more distance away the use of PPE is recommended.</p> <p>Disposable gloves and a disposable plastic apron are recommended. The use of a fluid repellent surgical face mask is recommended and additional use of disposable eye protection (such as face visor or goggles) should be risk assessed (when there is an anticipated risk of contamination with splashes, droplets of blood or body fluids).</p> <p>All settings have been supplied with a pack of PPE. The first aider should clean their hands thoroughly with soap and water or alcohol sanitiser before putting on and after taking off PPE. In all circumstances where some form of PPE is used, the safe removal of the PPE is a critical consideration to avoid self-contamination. Guidance on putting on and taking off PPE is available via video here - https://www.youtube.com/watch?v=-GncQ_ed-9w&feature=youtu.be.</p>
<p>Cleaning of public areas where a symptomatic individual has passed through and spent minimal time.</p> <p>See the COVID-19: cleaning of non-healthcare settings guidance</p>	<p>Public 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.</p> <p>All surfaces that the symptomatic person has come into contact with must be cleaned and disinfected, including:</p> <ul style="list-style-type: none"> • 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. <p>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:</p> <ul style="list-style-type: none"> • Use either a combined detergent disinfectant solution at a dilution of 1,000 parts per million available chlorine. <li style="text-align: center;">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. <li style="text-align: center;">or • If an alternative disinfectant is used within the organisation,

	<p>this should be checked and ensure that it is effective against enveloped viruses.</p> <p>Avoid creating splashes and spray when cleaning.</p> <p>Any cloths and mop heads used must be disposed of and should be put into waste bags.</p> <p>When items cannot be cleaned using detergents or laundered, for example, upholstered furniture and mattresses, steam cleaning should be used.</p> <p>Any items that are heavily contaminated with body fluids and cannot be cleaned by washing should be disposed of.</p>
<p>Dealing with waste.</p> <p>See the COVID-19: cleaning of non-healthcare settings guidance</p>	<p>Waste from possible cases and cleaning of areas where possible cases have been (including disposable cloths and tissues):</p> <ol style="list-style-type: none"> 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 for 72 hours and then place into the normal waste stream.
<p>Draft communication with parents/employees: to be adjusted to meet the needs of each set of circumstances and each setting.</p>	<p>These are available further down in the document:</p> <ul style="list-style-type: none"> • Template 1: Child from assigned group has symptoms • Template 2: Letter to all parents when a pupil/staff member has tested positive • Template 3: Parent letter to inform them pupil from an assigned group has tested positive • Template 4: Employee letter where employee sent home with symptoms • Template 5: Employee letter where employee tests positive/negative • Template 6: Preventative messages for parents

If there has been a confirmed case of COVID-19 in an education or childcare setting	
<p>Child/employee tests positive.</p> <p>Link to Guidance: Guidance for contacts of people with possible or confirmed coronavirus (COVID-19) infection who do not live with the person</p> <p>COVID-19: guidance for households with possible coronavirus infection guidance</p>	<p>Where the child, young person or staff member tests positive, the rest of their class or assigned group within their childcare or education setting should be sent home and advised to self-isolate for 14 days.</p> <ul style="list-style-type: none"> • The other household members of that wider group do not need to self-isolate unless the child, young person or staff member they live with in that group subsequently develops symptoms. • See guidance for Contacts of people with possible or confirmed coronavirus who do not live with the person. • A letter should be prepared and sent to make the relevant people aware of next steps if any. (Please see model templates further below).
<p>Test and trace – what will happen and what the school should do</p>	<p>If a child who attends or staff member who works at an educational setting tests positive for COVID-19, and this diagnosis has been confirmed, then the school will be contacted by a contact tracer to identify individuals who have been in close contact with the person who has tested positive. They will ask for details of the case so they can confirm if the case has been reported. If the setting/ school becomes aware of a case before being contacted by the test and trace service, please contact the local public health team or your school/ Early Years Local Authority Link Officer for advice.</p> <p>An appropriate member of the leadership team at the setting will be asked to work with the contact tracer to identify direct and close contacts of the case during the 48 hours prior to the child or staff member falling ill. This is likely to be the children in the group and staff member.</p> <p>There are two main types of contact that the contact tracer will seek to identify:</p> <p>Direct contacts without PPE:</p> <ul style="list-style-type: none"> ○ being coughed on, or ○ having a face-to-face conversation within 1 metre, or ○ having unprotected skin-to-skin physical contact, or ○ travel in a small vehicle with the case, or ○ any contact within 1 metre for 1 minute or longer without face-to-face contact <p>Close contact without PPE:</p> <ul style="list-style-type: none"> ○ Extended close contact (between 1 and 2 metres for more than 15 minutes) with a case <p>The contact tracer will be based in the Greater Manchester Contact</p>

Tracing Hub (gmhscp.contacttracing@nhs.net).

Whilst waiting for Greater Manchester Contact Tracing Hub to make contact, the school should:

- a) Identify an appropriate member of the leadership team to work with the contact tracer.
- b) Begin the process of identifying direct and close contacts of the case within the school setting during the 48 hours prior to the child or staff member falling ill or whilst the child or staff member was ill. This is likely to be the classmates and teacher of that class.
- c) Consider the potential number of direct and close contacts and the implications of this for business continuity.
- d) Begin to consider the potential support requirements of those who may be asked to self-isolate, including potential online learning requirements.
- e) Identify any other individuals who may be symptomatic and support them to apply for a test.
- f) Contact your Local Authority Public Health/ Infection Prevention and Control Team or your school/ early years link officer for advice.

Once a discussion has taken place between the school and the contact tracer, all confirmed direct and close contacts will be advised to self-isolate for 14 days starting from the day they were last in contact with the case and should not attend school during that time period.

Further advice can be found via <https://www.nhs.uk/conditions/coronavirus-covid-19/testing-and-tracing/nhs-test-and-trace-if-youve-been-in-contact-with-a-person-who-has-coronavirus/>

Personal and community contacts of the person with the confirmed diagnosis will be contacted separately by the national test and trace service and this will be directly with the person. The school do not need to identify these people.

Contacts will not be tested unless they develop symptoms (contact tracer may provide advice on this). If a contact should develop symptoms, then the parent/carer should arrange for the child to be tested via [NHS UK](#) or by contacting NHS 119 via telephone if they do not have internet access. This would also apply to any parent or household member who develops symptoms. If any staff contact develops symptoms then they can apply for a test via <https://www.gov.uk/apply-coronavirus-test-essential-workers>

	<p>As part of the national test and trace programme, if other cases are detected within the cohort or in the wider setting, Public Health England's local health protection teams will conduct a rapid investigation and will advise schools and other settings on the most appropriate action to take.</p> <p>Where settings are observing guidance on infection prevention and control, which will reduce risk of transmission, closure of the whole setting will not generally be necessary.</p>
<p>Child/Employee tests negative.</p>	<p>When the child or staff member tests negative, they can return to their setting providing they have been well and fever free for 48 hours and the fellow household members can end their self-isolation.</p> <p>Where the employee tests negative the relevant model template can be used to make contact.</p>
<p>Arrangements for management of a possible outbreak</p>	<p>If there are more confirmed cases linked to the setting the local Health Protection Team will investigate and will advise the setting on any other actions that may be required.</p> <p>If a setting has come across two or more confirmed cases, or there is a high reported absence which is suspected to be COVID-19 related, then the local Health Protection Team or the Local Authority Public Health Team should be notified promptly (see front page).</p> <p>However, it is probable that some outbreaks will be identified by either the local health protection team or the local authority public health team and the setting will then be contacted by one of these teams.</p>

3. FREQUENTLY ASKED QUESTIONS

PUBLIC HEALTH

CASES AND CONTACTS

Should a child/staff member come to a setting if a member of their household is unwell?

No. If a member of the child's household is unwell with COVID-19 symptoms then the child/staff member should isolate for 14 days starting from the day the household member(s) became ill. If the child subsequently develops symptoms than they should isolate for 7 days from the date they developed symptoms. See [Stay-at-home-guidance](#). The household member(s) should be tested within 5 days of symptom onset. If all symptomatic household members test negative provided they feel well and they have not had a fever for 48 hours, the child/staff member can return to work or school/ setting.

If I am notified by a parent that their child is ill do I need to exclude the other children in their group?

No, children and staff can attend the setting as normal. The child who is ill should stay at home ([Stay-at-home-guidance](#)) and be advised to get tested if showing symptoms of COVID-19. The whole household will need to self-isolate. If the child has any siblings who attend another setting they should also be self-isolating at home for 14 days. If the child tests positive for COVID-19, direct and proximity contacts should be excluded for 14 days. The setting will be contacted by contact tracers to support with contact identification and provision of advice.

If I am notified by a parent that their child has had a positive test do I need to exclude the other children in their group or notify anybody?

If you haven't already been contacted about the positive case please contact your local public health team via telephone or covid-19@tameside.gov.uk who will investigate with PHE contact tracing team. The setting should be notified by PHE if a child has had a positive test.

Who is considered a contact in a setting?

A person who wore appropriate PPE or maintained appropriate social distancing (over 2 meters) would not be classed as a contact.

A contact is defined as a person who has had contact (see below) at any time from 48 hours before onset of symptoms (or test if asymptomatic) to 7 days after onset of symptoms (or test):

- a person who has had face-to-face contact (within one metre) with someone who has tested positive for coronavirus (COVID-19), including:
 - being coughed on, or
 - having a face-to-face conversation, or
 - having skin-to-skin physical contact, or
 - any contact within one metre for one minute or longer without face-to-face contact.

- a person who has been within 2 metres of someone who has tested positive for coronavirus (COVID-19) for more than 15 minutes.
- a person who has travelled in a small vehicle *with* someone who has tested positive for coronavirus (COVID-19) or in a large vehicle *near* someone who has tested positive for coronavirus (COVID-19).
- people who spend significant time in the same household as a person who has tested positive for coronavirus (COVID-19).

Which contacts need to self-isolate?

Where the child or staff member *tests positive* and they had attended the setting in the 48 hours prior to developing symptoms, direct and close contacts will be identified and advised regarding self-isolation by a contact tracer.

Please note: The other household members of that wider group do not need to self-isolate unless the child or staff member they live with in that group subsequently develops symptoms.

Can the siblings of a child who has been excluded because they are a contact of a case attend the setting?

Yes, other household members of the contact do not need to self-isolate unless the child or staff member they live with in that group subsequently develops symptoms.

A child/parent reports to us that they have had contact with someone with symptoms – what should we do?

There is no action required of the setting. No-one with symptoms should be attending the setting and anyone who develops symptoms while at the setting should be isolated and sent home as soon as possible. Settings should regularly remind parents of the government guidance on staying at home and the importance of a household self-isolating if anyone in the household develops symptoms.

If a child has COVID-19 symptoms, gets tested and tests negative, can they return to the setting even if they still have symptoms?

If the child is NOT a known contact of a confirmed case the child can return to the setting if the result is negative, provided they feel well and they have not had a fever for 48 hours.

If the child is a contact of a confirmed case they must stay off for the 14 day isolation period, even if they test negative. This is because they can develop the infection at any point up to day 14 (the incubation period for COVID-19), so if a child tests negative on day 3 they may still go on to develop the infection.

If a child who was a contact of a confirmed case tests negative, can they return to the setting?

No, the child should complete 14 days of isolation.

If I get confirmed cases does the setting need to close?

The setting does not need to close on public health grounds. Settings will generally only need to close if they have staff shortages due to illness or being identified as contacts. It is expected that only the group of a confirmed case will need to be excluded. If there are a number of confirmed cases across different groups at the same time then the school/ setting may be advised to close by the Health Protection Team in consultation with other partners.

Should settings ask parents to report pupils' temperatures at the start of each day?

Parents, carers and settings do not need to take children's temperatures every morning. Routine testing of an individual's temperature is not a reliable method for identifying coronavirus. Educational and childcare settings should reiterate to parents the need to follow the standard national advice on the kind of symptoms to look out for that might be due to coronavirus, and where to get further advice. If anyone in the household develops a fever, or a new continuous cough, or a loss of, or change in, their normal sense of taste or smell (anosmia), they are advised to follow the [COVID-19: guidance for households with possible coronavirus infection guidance](#) (which states that the ill person should remain in isolation for 7 days and the rest of the household in isolation for 14 days).

TESTING

How can a parent arrange testing?

The parent can arrange for any child to be tested via [NHS UK](#) or by contacting NHS 119 via telephone if they do not have internet access.

Will the setting be informed of any test results?

The setting will be informed if a child or staff member tests positive as part of NHS Test and Trace. The setting will not be informed of any negative results.

How can a staff member get tested?

All education and childcare workers are considered essential workers and can apply for a test if they are symptomatic via <https://www.gov.uk/apply-coronavirus-test-essential-workers>.

Can they be tested if they do not have symptoms?

No. People should only be tested if they have symptoms.

HIGH RISK GROUPS

Can our pregnant members of staff work? What if staff have pregnant household members?

Pregnant women are currently advised to work from home where possible. Education and childcare setting should endeavour to support this, for example, by asking staff to support remote education, carry out lesson planning or other roles which can be done from home.

If they cannot work from home, they should be offered the safest available on-site roles, staying 2 metres away from others wherever possible, although the individual may choose to take on a role that does not allow for this distance if they prefer to do so. If they have to spend time within 2 metres of other people, settings must carefully assess and discuss with them whether this involves an acceptable level of risk.

If a staff member lives with someone who is pregnant, they can work.

Should children or staff who are shielding (classed as clinically extremely vulnerable due to pre-existing medical conditions) attend settings?

No, children and staff who fall into this group should not be attending the setting or work.

Should children or staff who have family in the shielding group be coming to the setting/work?

They should only attend an education or childcare setting if stringent social distancing can be adhered to and, in the case of children, they are able to understand and follow those instructions. This may not be possible for very young children and older children without the capacity to adhere to the instructions on social distancing. If stringent social distancing cannot be adhered to, we do not expect those individuals to attend. They should be supported to learn or work at home. Given the potential risk, if at all possible, settings should support children who have a family member in the shielding group to continue to learn from home.

STAFF

We have staff who are asymptomatic but wish to be tested is this possible?

Currently, only people who are symptomatic can access a test via NHS UK or ringing 119.

We have had a child confirmed as a case and had contact with other staff, including catering staff at lunch, do they need to be excluded?

It depends on the level of contact. Staff would need to be excluded only if they had face to face contact with a case for any length of time, including being coughed on or talked to. This includes exposure within 1 metre for 1 minute or longer OR the staff member had extended close contact (within 2 metres for more than 15 minutes) with the case.

CLEANING

What additional cleaning is necessary following a symptomatic or confirmed case?

It is important to concentrate on regular cleaning of frequently touched items / surfaces. This is likely to be highly effective as high contact surfaces will present the main risk in terms of indirect transmission. So long as regular cleaning is thorough and maintained at all times there is no need for additional cleaning.

- 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.
- Wear disposable gloves and aprons for cleaning.
- 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.
- If an area has been heavily contaminated, such as with visible bodily fluids, use protection for the eyes, mouth and nose, as well as wearing gloves and an apron.
- All the disposable materials should be double-bagged, then stored securely for 72 hours then thrown away in the regular rubbish after cleaning is finished.

- Wash hands regularly with soap and water for 20 seconds, and after removing gloves, aprons and other protection used while cleaning.

Do toilets need to be cleaned after every use?

Toilets are frequently touched surfaces, so they need to be cleaned frequently throughout the day, but not after every use (except if used by a symptomatic person whilst waiting to go home).

Increase the frequency of cleaning toilets to at least five times a day:

- before the setting opens
- after morning snack time
- after lunch
- after afternoon snack
- at the end of day.

Apart from gloves and apron, there is no need for additional PPE.

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 parts per million available chlorine). Follow manufacturer's instructions for dilution, application and contact times for all detergents and disinfectants.

or

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

Avoid creating splashes and spray when cleaning.

All the disposable materials should be double-bagged, then stored securely for 72 hours then thrown away in the regular rubbish after cleaning is finished.

PPE

Why are staff and children not advised to wear PPE?

The majority of staff in education, childcare and children's social care settings will not require PPE beyond what they would normally need for their work. This is because transmission in settings is low and other infection control measures are in place such as:

- Minimising contact with individuals who are unwell by ensuring that those who have coronavirus (COVID-19) symptoms, or who have someone in their household who does, do not attend childcare settings, schools or colleges.
- Cleaning hands more often than usual - wash hands thoroughly for 20 seconds with running water and soap and dry them thoroughly or use alcohol hand rub or sanitiser ensuring that all parts of the hands are covered.
- Ensuring good respiratory hygiene by promoting the 'catch it, bin it, kill it' approach.
- Cleaning frequently touched surfaces often using standard products.

- Minimising contact and mixing by altering, as much as possible, the environment and routines (such as staggered break times).

Is PPE required for tasks involving changing nappies or general care for babies?

Staff should follow their normal practice when changing nappies and caring for babies more generally, provided the child is not showing symptoms of coronavirus. This includes continuing to use the PPE that they would normally wear in these situations, for example aprons and gloves. If a child shows symptoms, they should not attend a childcare setting and should be at home.

What should I do if my PPE stocks are low?

The setting must try and maintain sourcing and purchasing PPE themselves. However, for emergency and urgent needs, please inform your School/ Early Years Local Authority Link Officer, as the Local Authority will be able to monitor and support with emergency packs.

HEALTH AND SAFETY

What should I do if I am unsure about what to consider when planning a wider opening?

If you are unsure about how to plan for a wider opening, your Early Years Local Authority Link Officer will be able to support with a checklist and on audit tool. Furthermore, the Local Authority Health and Safety will be able to support.

Considering BAME groups are 3-4 times likely to be affected by COVID is it safe for / child/ students/staff to return to setting/school/work? If so what additional precautions/risk assessments should setting/schools and colleges take, particularly where they have a high proportion of their workforce in this vulnerable group?

Many settings will be finding they have individual members of staff who have specific vulnerabilities in relation to the transmission of Covid-19. BAME is one of a number of vulnerable groups. For these members of staff some of the control measures you have put in place may not be sufficient. Where this is the case it is necessary for you, along with the staff member's involvement, to complete an individual risk assessment. A template for this can be requested from Health and Safety at healthandsafety@tameside.gov.uk. The document is two pages in total and is very simple to complete, with half of one page consisting of tick boxes for you to select from. It is important to talk to relevant staff and document your discussions and actions through the individual risk assessment process.

Is it worth asking staff to sign to say that they have read the Risk Assessment (like they do for Child Protection training)?

Yes. It is a legal requirement that the findings of risk assessments are shared with staff and you need to be able to evidence that this has been done. A signing sheet is an ideal way.

If we make changes to the risk assessment, do staff need to sign that they have read the changes, and if so do we have to do this every time it changes?

Staff must be made aware of and understand any changes to the risk assessment and you should be able to evidence that this has taken place.

Are there any risks associated with the use of air conditioning systems?

The risk of air conditioning spreading coronavirus is extremely low. The HSE advises: If you use a centralised ventilation system that removes and circulates air to different rooms, it is recommended that you turn off recirculation and use a fresh air supply. You do not need to adjust other types of air conditioning systems. If you're unsure, speak to your heating ventilation and air

conditioning (HVAC) engineers or advisers. Good ventilation is encouraged to help reduce the risk of spreading coronavirus.

What if the cleaners also work in another setting?

We have to accept that some people may have more than one job and we are not in a position to prevent them from working in more than one setting. If you are aware of cases were members of staff work in additional settings you should ensure control measures are in place such as asking the employee to wear clean overalls and washing their hands when coming into your setting.

What are the obligations of the PFI provider within a school?

The PFI provider should co-operate with the school to ensure that the appropriate protective and preventative measures which have been identified in their risk assessment are in place and adhered to.

If low level trim trails or outdoor equipment is utilised by individual bubbles and safe to do so, do they need to be cleaned every time they are used?

Yes, the surfaces of outdoor play equipment and trim trails are high touch point areas and so would require cleaning each time they are used.

How do you clean the pages of a book?

The main area of contact on books will be front and the back covers, these should be wiped down. As an additional precaution books can be in effect quarantined for 72 hours before they are shared with another user.

What if a staff member wants to stay away from work because a member of their household is shielding at home?

The government guidance is that the rest of the household do not need to start shielding themselves, but they should do what they can to support the person in shielding and to carefully follow guidance on social distancing:

<https://www.gov.uk/government/publications/staying-alert-and-safe-social-distancing>

Where an employee receives notification from the government that their child/family/household member falls within the extremely vulnerable group they will need to follow the government guidelines immediately, in particular the guidance below has a section entitled 'living with other people':

<https://www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19>

4. MODEL LETTER TEMPLATES

TEMPLATE 1: Child showing symptoms within assigned group

School/ Setting Name, address

DATE

Dear XXX,

I am writing to inform you that a child within your child's group, has been sent home today/yesterday due to becoming unwell.

DfE guidance says that at this time your child should continue to attend as arranged. Please be assured that the setting is continuing with social distancing measures and cleaning and hygiene arrangements are in place throughout the day.

If a child in your child's group tests positive for COVID 19 you will be notified by the NHS Test and Trace service via text message, email or phone. The setting will contact you and inform you of the next steps. See information below from the national guidance:

- If you have been informed that your child is a contact of a person who has had a positive test result for coronavirus (COVID-19), medical advice is clear: your child must immediately self-isolate at home for 14 days from the date of their last contact with them. There is no requirement for other members of your household to self-isolate unless anyone in your household starts to develop symptoms.
- Your child must not attend the setting.

If your child becomes unwell with a new, continuous cough or a high temperature, or has a loss of, or change in, their normal sense of taste or smell (anosmia), please alert the setting and do not send your child into the setting. Follow the government guidance [COVID-19: guidance for households with possible coronavirus infection guidance](#) and outlined below:

- Your child must stay at home for at least 7 days. All other household members who remain well must stay at home and not leave the house for 14 days. The 14-day period starts from the day when the first person in the house became ill.
- Your child should get tested via NHS UK or by contacting NHS 119 via telephone if you do not have internet access. This also applies to any household member who develops symptoms.
- For anyone else in the household who starts displaying [symptoms](#) , they need to stay at home for at least 7 days from when the symptoms appeared, regardless of what day they are on in the original 14 day isolation period.

If you have any concerns please contact XXX who can discuss further.

TEMPLATE 2: Letters to all parents when a child/staff member has tested positive

School/ Setting Name, address

DATE

Dear XXX,

I am writing to inform you that a child/staff member within the school has tested positive for coronavirus. In line with advice from Public Health England, the setting will now (close/partially close) for a deep clean. (If partially closing) Whilst I understand that you may have concerns with regards to the above, I can assure you that the setting will continue with social distancing measures and cleaning and hygiene arrangements will remain in place throughout the day.

If your child is within the relevant group where there has been a positive test result, we will contact you and inform you of the next steps. Those children outside of the group should continue to attend the setting as normal (if closing outline opening date).

At the setting we will continue to remind children to frequently wash their hands with soap and water for 20 seconds and dry thoroughly, use a tissue or elbow to cough or sneeze and use bins for tissue waste ('catch it, bin it, kill it'), we encourage parents to continue with these reminders.

If your child does become unwell with a new, continuous cough or a high temperature, or has a loss of, or change in, their normal sense of taste or smell (anosmia), please alert the setting and do not send your child into the setting. Follow the government guidance [COVID-19: guidance for households with possible coronavirus infection](#) and outlined below:

- Your child must stay at home for at least 7 days. All other household members who remain well must stay at home and not leave the house for 14 days. The 14-day period starts from the day when the first person in the house became ill.
- For anyone else in the household who starts displaying [symptoms](#), they need to stay at home for at least 7 days from when the symptoms appeared, regardless of what day they are on in the original 14 day isolation period.

If you or your child begins to show the above symptoms we would also encourage you to follow the national guidance. For most people, coronavirus (COVID-19) will be a mild illness. However, if you develop symptoms you must self-isolate at home and arrange to have a test to see if you have COVID-19 – visit [NHS.UK](#) to arrange or contact NHS 119 via telephone if you do not have internet access.

As soon as you start having symptoms, you and anyone in your household must follow the [Stay at Home: Guidance for households with possible or confirmed coronavirus \(COVID-19\)](#).

Please inform the setting of positive results. If you have any concerns please contact XXX who can discuss further.

TEMPLATE 3: Parents of children in a group where child/staff member has tested positive

School/ Setting Name, address

DATE

Dear XXX,

I am writing to inform you that a child/staff member within the setting has tested positive for coronavirus. In line with advice from Public Health England, the setting will now (close/partially close) for a deep clean.

(If partially closing) Whilst I understand that you may have concerns with regards to the above, I can assure you that the setting will continue with social distancing measures and cleaning and hygiene arrangements will remain in place throughout the day.

Your child however, has been in contact with someone who has tested positive for the virus and in line with government guidance, we are asking that you keep your child at home to self-isolate for 14 days and follow the guidance below.

[COVID-19: guidance for households with possible coronavirus infection guidance](#)

You should have been notified by the NHS Test and Trace service via text message, email or phone that your child is a contact. See information below from the national guidance:

- If you have been informed that your child is a contact of a person who has had a positive test result for coronavirus (COVID-19), medical advice is clear: your child must immediately self-isolate at home for 14 days from the date of their last contact with them. There is no requirement for other members of your household to self-isolate unless anyone in your household starts to develop symptoms.
- Your child must not attend the setting.

If you or your child begins to show the above symptoms you must follow the national guidance. For most people, coronavirus (COVID-19) will be a mild illness. However, if you develop symptoms you must self-isolate at home and arrange to have a test to see if you have COVID-19 – visit [NHS.UK](#) to arrange or contact NHS 119 via telephone if you do not have internet access.

Please inform the school of any positive results.

XXX will be in touch with you to discuss XXX returning to the setting and the relevant arrangements toward the end of the isolation period (information about provision of learning materials for home learning can be included here).

Please contact XXX if you have any concerns,

TEMPLATE 4: Employee letter where employee is sent home with symptoms

School/ Setting Name, address

DATE

Dear xxxxx,

I am sorry to hear that you are unwell. As you are aware we requested that you return home on xxxxx in line with government guidance which outlines that if anyone in an education or childcare setting becomes unwell with a new, continuous cough or a high temperature, or has a loss of, or change in, their normal sense of taste or smell (anosmia), they must be sent home and advised to follow the guidance in the link below: <https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance/stay-at-home-guidance-for-households-with-possible-coronavirus-covid-19-infection>

Please make sure that you book a COVID-19 test immediately on NHS.uk/coronavirus or call 119 if you do not have internet access. This is because the test is most accurate in the first 5 days of having symptoms.

Please remember the symptoms are fever, a persistent or new cough, and loss of sense of smell and taste. You should isolate yourself if you have any of the symptoms and only leave your house when going to get your test.

There are various local options in Greater Manchester for getting a test by the national booking system, which you will be directed to including a site at Manchester Airport and the Etihad Stadium premises.

XXXX will be in touch in the next few days, however please do hesitate to contact me if you wish to discuss the above or have any concerns.

TEMPLATE 5: Letter to employee who has tested positive/negative

School/ Setting Name, address

DATE

Dear xxxxx,

Thank you for informing me of your positive/negative test result. I know that this may be a distressing time for you and your family; we are all thinking about you and send our very best wishes.

If employee tests positive

Please remember that you and everyone in your household must continue to follow the government guidance on isolation set out in the [COVID-19: guidance for households with possible coronavirus infection guidance](#), as I outlined in my last letter to you on xxxxxxx.

Please make sure that you rest during this period of isolation and do contact me or (provide any contact details for employee assistance programmes etc.) if needed. I appreciate that this may be a worrying situation for you and if you require any support please do not hesitate to let me know.

You will be contacted shortly by xxxxxx who can discuss next steps and provide any welfare advice and guidance.

If you have any questions please contact me on xxxxxxxxx

If employee tests negative

The government guidance for those who test negative is that you can return to their work setting providing you feel well and have been fever free for 48 hours and fellow household members can end their self-isolation. However I am mindful that you were sent home due to feeling unwell and as such, XXXX will be in contact with you over the next few days to discuss how you are feeling and your return to work.

If you have any further questions please contact xxxxxxx

TEMPLATE 6: Preventative messages for parents

COVID-19 Test & Trace

Dear Parent/Carer

You may be aware that, as part of the ongoing steps being taken to stop the spread of coronavirus, government has launched a test and trace programme. This will include contact tracing for people who test positive for COVID-19 to ensure they are isolating, and to find out who they have come into close contact with who may also need to isolate.

I know this is a difficult time for many of you and your children for various reasons. While the delay of opening the setting for more children may have come as a disappointment, I would like to reassure you that we have worked hard to ensure the necessary safety measures are in place and are ready to welcome our children back just as soon as is safe and sensible to do so. The rise in the 'R number' for the North West region - which identifies if the spread of the virus is under control - means we must all play our part, now more than ever, to protect our families and the setting. This will help ensure we can continue to progress in welcoming back children and return to our more normal ways of life.

Working together to protect our community

It remains vital that we all continue to socially distance ourselves from anyone that we do not live with by keeping 2metres apart. Regular and good handwashing with soap and water is also one of the most effective ways we can prevent the spread of the virus along with good hygiene by catching coughs and sneezes in a tissue and binning it. This will support a reduction in the R number and protect the wellbeing of everyone.

As part of the government programme, testing is now available for everyone who is symptomatic and so I would like to remind you all that should you display any of the below symptoms, you must self-isolate for 7 days (other household members for 14 days from when you started having symptoms) and not leave the house for any reason other than to go for a test.

If symptomatic, you should order a home testing kit or book a drive-through test at one of the regional testing centres immediately at www.nhs.uk/coronavirus or call 119 if you have no internet access.

Symptoms include:

- a high temperature – this means you feel hot to touch on your chest or back (you do not need to measure your temperature)
- a new, continuous cough – this means coughing a lot for more than an hour, or 3 or more coughing episodes in 24 hours (if you usually have a cough, it may be worse than usual)
- loss/change in your normal sense of smell or taste

If you test positive for coronavirus, the NHS test and trace service will send you a text or email alert or call you with instructions of how to share details of people with whom you have had close, recent contact and places you have visited. It is important that you respond as soon as possible so that they can give appropriate advice to those who need it. You will be told to do this online via a secure website or you will be called by one of the NHS contract tracers. If you're contacted by the

NHS Test and Trace service, you will never be asked to provide any passwords, bank account details or pin numbers so please do be alert to any possible bogus calls.

Don't Be A Contact

If you are contacted by the NHS test and trace service because you have been in close contact with someone who has tested positive for coronavirus you must begin self-isolation for 14 days from your last contact with the person who has tested positive. It's really important we all play our part and do this when alerted, even if we don't feel unwell because, if you have been infected, you could become infectious to others at any point up to 14 days.

As some lockdown restrictions have eased and you have more opportunities to get out and about, I'm sure the prospect of having to self-isolate for 14 days is not a welcomed thought. The best way to avoid having to self-isolate and to reduce the chances that you will contract the virus is to take precautions and don't be a contact!

A close contact of someone with confirmed COVID-19, who may be asked to isolate includes:

Household:

- household members
- people who have stayed overnight
- sexual contacts
- those living in shared accommodation
- a household cleaner

Or people who have had the following contact with the infected person:

- face-to-face contact or touching (less than 1m)
- direct contact within 2m for more than 15 minutes
- travelled in the same car/within 2 seats on a plane
- worked with them or been in a 'setting' they have visited (workplace/ GP/ school/ hospital).

While it is not always possible not to be a contact, especially with household members, there are steps that we can continue to take to limit our close contact with other people such as:

- Maintain social distancing by keeping at least 2 meters away from others
- Avoid travelling in the same vehicle as other people from outside your household
- Avoid sitting/standing close to others on public transport (where possible)

I would like to thank everyone for your continued support with home learning and the steps you are taking to keep our community safe. I will of course keep you updated on any news regarding our wider school opening and should you have any questions, please don't hesitate to contact me.

5. NATIONAL GUIDANCE DOCUMENTS

This local guidance document has been based on national PHE, NHS and government guidance. Hyperlinks to key national guidance are displayed here for reference (click on the link to be taken to the relevant guidance/information online).

Social distancing for different groups:

- [Stay at home: guidance for households with possible coronavirus \(COVID-19\) infection](#)
- [Guidance on social distancing for everyone in the UK](#)
- [Guidance on shielding and protecting people who are clinically extremely vulnerable from COVID-19](#)

Guidance for contacts:

- [Guidance for contacts of people with possible or confirmed COVID19](#)

Specific guidance for educational settings:

- [Guidance for schools and other educational settings](#)
- [Planning guide for early years and childcare settings](#)
- [Opening schools and educational settings to more pupils: guidance for parents and carers](#)
- [COVID-19: implementing protective measures in education and childcare settings](#)
- [Safe working in education, childcare and childrens social care settings including the use of PPE](#)
- [Guidance on isolation for residential educational settings](#)

Testing:

- [NHS: Testing for coronavirus](#)

Infection prevention and control:

- [Safe working in education, childcare and childrens social care settings including the use of PPE](#)
- [5 moments for hand hygiene: with how to hand rub and how to handwash](#)
- [Catch it. Bin it. Kill it.](#)

Marketing, Promotion and Communication Material:

- [Coronavirus \(COVID-19\) Resource Centre](#)

APPENDIX 1 - Template to record setting absence

Template to record setting absences

In the event of a COVID-19 outbreak, the table will ensure that important information is recorded in one place and is easily accessible

Date	Name	Group	Reason for absence*	Date of onset of symptoms	Symptoms **	Has the child/staff been assessed by GP, NHS 111 etc? Y/N/NK	Has the child/staff been tested? Y/N/NK	Is the child/staff reporting a positive test result? Y/N/NK	Is the child/staff in hospital? Y/N/NK

Reason for absence*: Ill, Household member ill, Contact of a confirmed/suspected case, Shielding, Other e.g. dental appointments

Symptoms ** T = Temp (≥ 37.8 C), C = Cough, D = Diarrhoea, V = Vomiting, ST = Sore Throat, H = Headache, N = Nausea, LST = Loss of smell/taste, Other

APPENDIX 2 - Glossary of Terms

This appendix is a summary of some of the key words and phrases that are used in the DFE guidance which has been produced to support education and early years childcare settings during the coronavirus outbreak and response. It should be used alongside the up to date DfE and Public Health England guidance where you will find greater detail.

Some of the words and phrases are included because of questions we have received and information we have been asked to clarify.

Terminology	Information from DFE guidance/ LA updates
Attendance	Children in the eligible year groups and priority groups should now be encouraged to attend education and childcare settings. Vulnerable children of all year groups are expected to attend education and childcare settings where it is appropriate for them to do so. Parents will not be fined for non-attendance at this time.
Bereavement	Staff, families and children may have lost loved ones. It is important to be aware of this.
Best endeavours	To identify and take all the steps possible within your power. A higher level of requirements than 'reasonable endeavours' This phrase has been used to lessen the pressure.
Bubbles	Small and consistent groups of children to avoid mixing children and staff. Consistent staff should work with each different group. EYFS ratios apply. Up to 8 children is recommended. No more than 16.
Capping numbers	Limiting the number of children you welcome back. If you can't meet the demands for childcare places then you might have to consider whether a temporary cap on numbers is required and consider how to prioritise children starting with; <ul style="list-style-type: none"> • children of critical workers and vulnerable children • children who are aged three and four particularly those who will be transitioning into reception
Child protection	Take all necessary steps to keep children safe. The safeguarding and welfare sections of the EYFS framework still apply including requirements relating to child protection arrangements. Ensure your child protection policy is up to date. Children with a child protection plan are identified as vulnerable children.
Critical workers	Peoples whose work is critical to the COVID-19 response including; <ul style="list-style-type: none"> • health and social care • education on childcare • key public services • local and national government • food and other necessary goods • public safety and national security • transport • utility's, communication and financial services

Cleaning	Evidence suggests that the virus can exist for up to 72 hours on surfaces. Cleaning practises should be enhanced. Frequent cleaning is highlighted as being particularly important. Guidance has been produced to support cleaning of non-healthcare settings.
Clinically vulnerable	People at a higher risk of severe illness from coronavirus. They can attend settings if the right protective measures are in place.
Clinically extremely vulnerable	These people/ staff and children should not be attending or working. If someone is living with someone who's extremely clinically vulnerable the government guidance is that the rest of the household do not need to shield themselves, but they should do what they can to support the person in shielding and to carefully follow the government guidance on social distancing and protecting extremely vulnerable persons. People in this group should have been contacted to tell them they are clinically extremely vulnerable. See also 'shielding' below.
Communication to parents	This should include <ul style="list-style-type: none"> • your plans for reopening • your plans for staffing • your new protocols e.g. drop off and pick up • what is available to them • what you expect of them
Communication with staff	This should include <ul style="list-style-type: none"> • the availability of staff • to help them to understand any procedures that are new or different • would staff benefit from training for instance taking on and off pp • talk to staff about the support that they will be able to provide children • their health and welfare needs
Contact tracing	Contact tracing is led by public health teams and involves interviewing a patient to identify anyone who they have recently had close contact with. All cases of Confirmed COVID19 (or their contacts) in an educational establishment MUST be reported to Public Health England Greater Manchester Team.
Coronavirus /COVID-19	Coronavirus disease is an infectious disease caused by a newly discovered coronavirus. Most people infected with the coronavirus will experience mild to moderate respiratory illness and recover without requiring special treatment. Older people and those with underlying medical problems are more likely to develop serious illness.
Cross cutting	When a document is signposted from within another document. The DFE are using this technique to try and make navigating all the different guidance simpler and make sure readers have access to all the documents they need to.
DSGL - designated safeguarding lead	Settings must continue to have a practitioner designated to take lead responsibility for safeguarding. This person does not need to be on site if this is not practical as long as they are available to provide support advice and guidance to staff. Settings should consider

	deputising this role so that if the lead practitioner cannot work there is somebody to cover this role.
Disadvantaged children	<p>The Department for Education identifies disadvantaged children ask those who are</p> <ul style="list-style-type: none"> • eligible for free school meals • looked after children • children with parents in the armed forces <p>The early years pupil premium and the 2YO funding is provided to try to close the gap between disadvantaged children and their peers. Who are your disadvantaged children? How can you plan to best support their needs?</p>
DSG - designated schools grant	<p>The main schools budget. The early years block in the DSG includes funding for:</p> <ul style="list-style-type: none"> • the universal 15-hour entitlement • the additional 15 hours for working families • the 15 Hour entitlement for disadvantaged 2-year olds • the Early Years Pupil premium (EYPP) • the Disability Access Fund (DAF).
Dual registration	Some children will be registered with 2 or more early years and childcare settings. Guidance states that wherever possible parents and carers should be encouraged to minimise the number of education and childcare settings their child attends. You will need to work closely with your families to agree how this will work in practice.
EHCP - Education Health and Care Plan	Some children with SEND (Special Educational Needs and Disabilities) may have an Education Health and Care Plan. This formal document describes the child's Special Educational Needs; the anticipated outcomes for the child and the support they need to receive in order to meet those outcomes. The document will also outline any allocated funding and describes any support to be accessed from Health and Social Care colleagues.
Emergency contacts	You may need to update these- for example if existing emergency contacts for children are people who are shielding they would not be able to come and collect them.
EYFS disapplications - Learning and development	<p>Temporary changes to the EYFS requirements:</p> <ul style="list-style-type: none"> • settings should use reasonable endeavours to meet existing learning and development requirements in the EYFS -You should try and give children a broad range of educational and developmental opportunities, but you won't be required to meet these. • No requirement to complete the EYFS profile • No requirement to complete the progress check at age 2
EYFS disapplications - Safeguarding and welfare	<p>Staff qualifications and ratios</p> <ul style="list-style-type: none"> • Ratio requirements stay the same in the majority of cases but during the COVID-19 outbreak exceptions can be made to the qualifications that staff hold in order to be counted in the ratio requirements. Providers should use 'reasonable endeavours' (see below) to meet staff child ratio requirements but this will not

	<p>be a legal requirement.</p> <p>Paediatric first Aid PFA- see below</p> <p>Safeguarding and welfare- see DSGL/child protection</p>
Fire alarm procedures	You will need to consider adjusting fire alarm in procedures for example assembly points to reduce contact and ensure that staff are trained in them.
Floor space	<p>Indoor floor space requirements still apply and should be considered when thinking about how to organise your space. These are:</p> <ul style="list-style-type: none"> • children under two years need 3.5 metres squared per child. • 2 year olds need 2.5 metres squared per child. • children aged three to five years need 2.3 metres squared per child.
Hand washing	An identified infection control (see below). Public Health England has downloadable resources available to support this.
Home learning	Settings are encouraged to continue working with parents to ensure children can learn at home. Resources being promoted by the DfE include the Hungry Little Minds campaign and the BBC's tiny happy people as this focus on language, communication, play, active learning and relationships.
Infection control	<p>A hierarchy of controls that when implemented reduces the risk of transmission. These include</p> <ul style="list-style-type: none"> • Minimalising contact with individuals who are unwell by ensuring that those who have coronavirus symptoms or have someone in their household who does do not attend. • Cleaning hands more often than usual. • Ensuring good respiratory hygiene. • Cleaning frequently touched surfaces often. • Minimalising contact and mixing.
Infection prevention	Preventing the spread of coronavirus involves dealing with direct transmission a range of approaches an action should be employed to do this. See 'infection control' above.
Legionnaire's checks	If your building was closed or has reduced occupancy during the coronavirus (COVID-19) outbreak, water system stagnation can occur due to lack of use, increasing the risks of Legionnaires' disease.
Mental health and wellbeing	A range of support is in place for people who live and work in Tameside.
Ofsted	Routine Ofsted inspections have been suspended. Ofsted inspections triggered by safeguarding concerns will continue. The DfE has asked Ofsted to monitor which providers on the early years register or open or closed.
Outdoor space	Settings should be using outdoor space where that is possible. You should think about how different groups or bubbles can use different outdoor space separately to each other. Equipment needs to be cleaned after use if different groups of children are using it to minimise risk of infection. This should be included in your risk assessment.
Paediatric first aid (PFA)	The requirements regarding Paediatric First Aid (PFA) certification

	<p>have been modified and statutory guidance has been published setting out what this means.</p> <ul style="list-style-type: none"> • where children are aged 0 -24 months at least one person who has current paediatric first aid must be on the premises. • where children are aged 2-5 you should use your best endeavours (see above) to have someone with a full PFA certificate on site. If all steps have been taken and settings cannot meet the PFA requirement they must carry out a risk assessment and ensure that someone with a current first aid at work or emergency first aid certificate is on site at all times. • new entrants will not need to have completed a full PFA course within their first three months in order to be counted in staff to child ratios.
Phased reopening	The return of children and young people to nurseries, schools and colleges in a way that is measured and reduces risk.
Physical distancing	Steps everyone should take to reduce the social interaction between people to help reduce the spread of coronavirus. The World Health Organisation uses this phrase instead of 'social distancing' to highlight that it does not mean that socially we have to disconnect from our loved ones and family.
Physical exercise	Some children may have had limited opportunities for physical activity during lockdown. Physical development is a prime area of learning and should be prioritised when children begin to come back alongside mental health and wellbeing (PSED) and communication and language.
Planning guide DfE	A tool for schools, early years and childcare settings to use as they make their plans for re-opening/wider opening. It has been developed in consultation with a number of schools and early years sector bodies -providers from a variety of different size and type of settings, local authorities and unions. This is subject to change and development.
Personal Protective Equipment (PPE)	<p>Personal Protective Equipment (PPE) is:</p> <ul style="list-style-type: none"> • fluid-resistant surgical face masks • disposable gloves • disposable plastic aprons • eye protection (for example a face visor or goggles) <p>This is not generally needed in settings. In circumstances where a child becomes symptomatic and if that involves a staff member being within two metres of the child personal protective equipment should be used.</p> <p>There is a specific way to put on and take off PPE effectively to make sure that you don't spread any droplets.</p>
Protected characteristics	It is against the law to discriminate against anybody because of their age, disability, gender reassignment, race, religion or belief, sex, sexual orientation, marriage and civil partnership, pregnancy and maternity. These are the protected characteristics and these groups are protected by the Equality Act.
Protective measures	The kind of things that should be put in place i.e. social distancing

	and hygiene measures to make sure that children staff parents and families are safe.
Public Health guidance	The local authority have a Public Health team who are able to give advice. Public Health England exists to protect and improve the nation's health and wellbeing. On their website they have links to coronavirus guidance, a Coronavirus tracking service, a COVID-19 mental health campaign and links to press releases about COVID-19
Ratios	See 'EYFS disapplication's' above.
Re opening	The Government's plan sets out that schools and settings will reopen/ open for more children FROM the 1 st of June. You will need to read the guidance and talk to your teams and families to decide what this will look like for your setting. Every setting is different and should approach this in a way that best meets the needs of children, families and staff.
Re-integration	Children starting back at schools and settings. What information do you need to support this process? You can access transition guidance and resources including a document to support conversations with families as you plan to welcome children back.
Reasonable endeavours	To take reasonable steps to meet the requirements. This will allow greater flexibility to respond to changes.
Resources	There is clear guidance about how resources can be organised and what resources should and should not be available. This is guidance and you should use your own risk assessments to inform how you ultimately resource your learning environment whilst minimising risk.
Respiratory hygiene	Infection prevention measures to decrease transmission- the 'catch it, bin it, kill it' approach. There are resources available to support you to promote this in your setting with parents, staff and children.
Risk assessment	<ul style="list-style-type: none"> You must complete a whole setting risk assessment before opening that directly addresses risks associated with coronavirus so that sensible measures can be put in place to minimise those risks for children and staff. The document 'COVID-19 considerations for early years settings before opening/ wider reopening' may support you with this. You must complete a risk assessment if you cannot meet the paediatric first aid requirements. For children who have any EHC plan attendance is expected where it is determined, following a risk assessment, that their needs can be a safely or more safely met in the setting.
Self-isolation	Staying at home if you or anyone in your household shows Coronavirus symptoms. If you have symptoms or you have received a positive coronavirus test, you should self-isolate at home for at least seven days from when your symptoms started. There is government guidance about staying at home and self-isolating.
SENCO	Settings should consider deputising this role so that if the lead practitioner cannot work there is somebody to cover this role.
Shielding	Staying at home at all times and avoiding any face to face contact to protect yourself. The advice is

	<ul style="list-style-type: none"> do not leave your house do not attend any gatherings strictly avoid contact with someone who is displaying symptoms <p>You are strongly advised to shield if you are clinically extremely vulnerable. See also 'clinically extremely vulnerable' above.</p>
Social distancing	<p>Staying alert and safe. There is guidance from the government that sets out what you must and must not do. Measures are organised into the following categories; protecting different groups of people; staying at home; businesses and venues; visiting public places; public gatherings; going to work; enforcing the law; clinically vulnerable people. Measures will be formally reviewed at the end of May by the government.</p>
Soft furnishing	<p>Guidance states you should consider removing soft furnishing soft toys and toys that are hard to clean. This is to reduce the risk of spread.</p>
Special educational needs and disabilities (SEND)	<p>The SEND Code of practice clearly defines these children. A basic guide is that a child with SEND will require support and input that is additional to and different from that generally given to their mainstream peers. These children will present with developmental differences in at least one area of the Early Years Foundation Stage (EYFS) and should be on your Graduated Response.</p>
Symptoms	<p>The main symptoms of coronavirus are:</p> <ul style="list-style-type: none"> a high temperature a new continuous cough a loss or change to your sense of smell or taste
Temperatures	<p>Anyone who becomes unwell with a high temperature must be sent home and advised to follow the COVID-19 guidance for households with possible coronavirus infection.</p> <p>Parents carried on settings do not need to take children's temperatures every morning routine testing of an individual's temperature is not a reliable method for identifying coronavirus.</p>
Temporary cap	<p>See above 'capping numbers'.</p>
Test and trace programme	<p>The test and trace service:</p> <ul style="list-style-type: none"> Ensures that anyone who develops symptoms of coronavirus (COVID-19) can quickly be tested to find out if they have the virus, and also includes targeted asymptomatic testing. Helps trace close recent contacts of anyone who tests positive for coronavirus and, if necessary, notifies them that they must self-isolate at home to help stop the spread of the virus. <p>https://www.gov.uk/guidance/nhs-test-and-trace-how-it-works</p>
Testing	<p>When settings open to more children, all children, members of their household and staff will have access to testing if they display symptoms of coronavirus. To access testing, parents will be able to use the 111 online coronavirus service. This has now been extended to children under 5.</p>
Transition	<p>See also 're-integration' above.</p> <p>The focus for transition this year, more than ever, for children moving</p>

	back into and between settings will be their emotional and physical well-being rather than their EYFS learning and development stage. We have therefore included an additional document 'Returning to an early years setting/school during COVID-19 – supporting conversations with families' alongside a range of other resources to support transition including resources to support the sharing of information about children with SEND. You can access these on learning leads.
Transitory contact	Brief contact such as passing in a corridor. This is considered low risk for spreading infection.
Transmission rate	This is being monitored by the government and needs to continue to reduce in order for schools and settings to reopen/ open for more children.
Vulnerable children	Vulnerable children during the Coronavirus outbreak are those who <ul style="list-style-type: none"> • Are assessed as being in need (child in need plan, child protection plan or looked after child). • Have an education health and care plan EHC. • Have been assessed as otherwise vulnerable by educational providers or local authorities.
Ventilation	Where possible, all spaces should be well ventilated using natural ventilation e.g. opening windows or using ventilation units.
Wider opening	See 're-opening' above.