COVID GUIDANCE TO SUPPORT THE SAFE OPERATION OF ELC SETTINGS: CHECKLIST OF MITIGATIONS THAT SHOULD BE APPLIED IN LEVEL 0 AND BELOW

Mitigation	ELC settings	Childminding settings	School-aged childcare settings
Staying vigilant and responding to COVID-19 symptoms	It is essential that people do not attend a setting if symptomatic. Everyone who develops symptoms of COVID-19 must self-isolate straight away, stay at home and arrange a test via the appropriate method.	As ELC plus - Where a childminder is symptomatic, or a household member has symptoms, they should close their setting and should follow advice to self-isolate and book a test.	
	Staff should be supported to follow up to date health protection advice on household or self-isolation and <u>Test and Protect procedures</u> if they or someone in their household exhibits COVID-19 symptoms, or if they have been identified by NHS contact tracers as a close contact of someone with the virus.		
Physical distancing	In level 0: 2 metre physical distancing between adults FROM 9 AUGUST- Beyond level 0: At least 1 metre physical distancing. Settings can continue with 2 metre distancing arrangements that work well and do not limit capacity.	As ELC plus - Primary school age children should remain physically distanced from staff where possible . It is important however for children to feel secure and receive warmth and physical contact that is appropriate to their needs. Staff will need to be close to the children at times, particularly young children, and should feel confident to do so. Secondary age children should maintain the appropriate physical distance from adults in the setting.	

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	Staff should be reminded that the		
	requirement to physically distance		
	applies at all times, including		
	during breaks and before and after		
	sessions and traveling to and from the setting.		
	the setting.		
	Children are not required to		
	physically distance from each		
	other, or from adults.		
Moving within	Circulation of children and staff and	•	s of the setting's indoor spaces
settings	should be considered to avoid bottle	<u> </u>	
Peripatetic staff	FROM 19 JULY - No restrictions on the use of peripatetic or agency staff but staff must not work across		
	two premises if there is an outbreak		
Face coverings	Face coverings must be worn by ad	2	As ELC plus –
	maintain the appropriate physical dis corridor and communal areas).	stance from other adults (e.g. in	To align with the advice within the guidance for schools, face coverings should also be worn by
	Eace coverings should be strongly e	ancouraged when parents/carers	children over 12 (unless exempt)
	Face coverings should be strongly encouraged when parents/carers are drop-off and pick-up their children. Face coverings are not required when working directly with children.		when moving around the setting and in communal areas.
			and in communal areas.
	However, staff who wish to wear a face covering in these		
	circumstances should be supported		
Hand hygiene	Ensure all staff and children frequently wash their hands with soap and water for 20 seconds.		
	Handwashing should take place: on arrival at the setting; before and after eating; after toileting; at		
	regular intervals throughout the day; when moving between different areas.		
Cough etiquette	Use a tissue or elbow to cough or sneeze into, dispose of tissues appropriately and ensure that bins are		
	emptied regularly of waste.		
Enhanced cleaning	Encourage children to use a tissue or elbow to cough into. Buildings should be checked if they have been closed or unused, including water quality sampling.		
	Dunungs should be checked if they have been closed of unused, including water quality sampling.		

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	At least twice daily cleaning and disinfection of frequently touched objects and hard surfaces.		
	Surfaces in dining or snack areas should be wiped down and disinfected in between use by each g of children.		
	All crockery and equipment used in the provision of meals and snacks for children should be cleaned with general-purpose detergent and dried thoroughly before being stored for re-use.		
Cleaning of staff areas should be an integral part of the overall cleaning strategy. Staff sl own cup/cutlery and ensure these are cleaned straight after use.			
	Toys and equipment that children access should be cleaned daily or, if groups of children change durin the day, on a sessional basis. Water and playdough should be replaced daily or, if groups of children change during the day, on a sessional basis.		
	If soft furnishings (such as throws and bedding) have been used by a child who shows symptoms of COVID, they should be removed and laundered as quickly as possible.		
Sharing of resources between home and setting	Children should be discouraged from bringing toys from home to the setting. However, settings can share resources (such as story bags) between setting and home – unless there is a positive case in the home or an outbreak in the setting.		
Ventilation	All settings must ensure the opening of doors and windows to increase natural ventilation where it is practical, safe and secure to do so, while maintaining appropriate internal temperatures.		
	Mechanical ventilation should be used where this is not possible, ideally set to full fresh air.		
	Where settings have a CO2 monitor these should be used to assess settings.		
Visits by parents	FROM 3 JULY - Visits by AS ELC for indoors. As ELC parents/carers permitted to support As ELC		

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	children (e.g. during their transition	For childminding settings with	
	to a new setting) but limited to	under 12 children the maximum	
		outdoors is 6 households. For	
	day when indoors. Up to 10	childminding settings with over 12	
	households can visit at a time and	children, this can increase to 10 households when outdoors.	
	per day, provided they remain outdoors and the visit is planned in	nousenoids when outdoors.	
	advance.		
	Where virtual arrangements for		
	parental engagement are already		
	in place and working well, these		
	should continue to be used;		
	Parents should be encouraged to		
	take part in the universal testing		
	offer prior to entering the setting;		
	The number of visitors from the		
	same household should be kept to		
	a minimum (no more than two and		
	ideally one); The number of staff meeting with		
	parents/carers in each visit should		
	also be kept to a minimum; and		
	Visits by parents must not take		
	place if there is a positive case in		
	the home or an outbreak in the		
	setting.		
Pick up and drop	Ensure large gatherings of people are avoided and physical distancing is maintained. Advice to wear		
off	face coverings, stagger timings etc.		
Visits by specialist	FROM 19 JULY - No restrictions on visits by specialist staff (e.g. allied health professionals, local		
staff	authority officers or inspectors).		

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Cohorting/limiting	FROM 19 JULY - Settings must apply proportionate, risk-based approaches to limiting contacts,		
contacts between children	managing children within groups. However, the only restriction on group size is registration capacity.		
Limiting contacts	Staff members should work with the same groups wherever possible. When agreeing staff working		
between staff	patterns, settings are encouraged to maintain as much consistency as possible in the staff who work in close proximity, especially in areas where physical distancing is more challenging.		
Blended placements	FROM 19 JULY - All blended placements can go ahead but if there is an outbreak within the child's cohort arrangement in either of the settings that the child attends, blended placements must be suspended.		
Outdoor learning	Provision should maximise opportunities for outdoor play and experiences.		
Dance, music, singing and drama	Singing is permitted indoors and outdoors.		
Asymptomatic Testing programme	Staff and settings are encouraged to participate and to report their results.	Childminders are able to take part in routine asymptomatic at home testing using lateral flow devices (LFD), that is available to everyone in Scotland.	As ELC
PPE	 Use of PPE should be based on a clear assessment of risk and need for an individual child or young person, such as personal care where staff come into contact with blood and body fluids In cases of suspected COVID-19, the following use of PPE may be considered: A fluid-resistant surgical mask if 2 metre physical distancing cannot be maintained. Where the child needs direct personal care, gloves and aprons, fluid-resistant surgical mask and eye protection (goggles or a visor) should be worn by staff. Gloves and aprons should be used when cleaning the areas where the child has been. Where the use of PPE is risk assessed as being required, staff should be trained in how to put on and take off PPE (as required by Health and Safety Regulations), and suitable waste facilities provided. 		
Notification of positive cases	 Setting must contact their local health protection team immediately if there is: any suspicion that there may be an outbreak of cases, i.e. two or more confirmed cases in 14 days; 		

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	 or an increase in the background rate of absence due to suspected or confirmed cases of COVID- 19. Setting must also notify the Care Inspectorate in the event of a suspected case and all confirmed cases of COVID. 		
Risk Assessments	Risk assessments remain a legal requirement – must be conducted and reviewed when circumstances change. Setting-level risk assessments are expected to consider all risks identified in respect of COVID-19		
Communication with parents/carers			