

# COVID-19 OUR SETTING SYSTEM OF CONTROLS

We aim to provide a relaxed, informal and friendly  
environment where children feel safe and happy.



# What the Guidance says:



## 3. Infection prevention and control

Keeping children and staff safe is our utmost priority. This section of the guidance sets out the public health advice early years settings must follow to minimise the risks of coronavirus (COVID-19) transmission. It also includes the process that settings should follow if anyone develops COVID-19 (coronavirus) symptoms while attending. This guidance has been developed with advice from Public Health England (PHE).

The public health advice in this guidance makes up a PHE-endorsed 'system of controls', building on the hierarchy of protective measures that have been in use throughout the coronavirus (COVID-19) outbreak. When implemented in line with a revised risk assessment, these measures create an inherently safer environment for children and staff where the risk of transmission of infection is substantially reduced.

The system of controls provides a set of principles and if settings follow this advice, they will effectively minimise risks. All elements of the system of controls are essential. All settings must cover them all, but the way different settings implement some of the requirements will differ based on their individual circumstances. Where something is essential for public health reasons, as advised by PHE, we have said 'must'. Where there is a legal requirement we have made that clear. This guidance does not create any new legal obligations.

There cannot be a 'one size fits all' approach where the system of controls describes every scenario. Setting leaders will be best placed to understand the needs of their settings and communities, and to make informed judgments about how to balance delivering high quality care and education with the measures needed to manage risk. The system of controls provides a set of principles to help them do this and, if settings follow this advice, they will effectively minimise risks.



# What the Guidance says:



## 3.1 Risk assessment

Settings must comply with health and safety law, which requires them to assess risks and put in place proportionate control measures.

Settings should thoroughly review their health and safety risk assessment and draw up plans as part of their wider opening. Settings should have active arrangements in place to monitor that the controls are effective, working as planned, and updated appropriately considering any issues identified and changes in public health advice.

For more information on what is required of employers in relation to health and safety risk assessments, please see [annex A of the guidance for schools](#).

## 3.2 How should people who may be at increased risk from coronavirus (COVID-19) be supported?

Some people with particular characteristics may be at comparatively increased risk from coronavirus (COVID-19), as set out in the [COVID-19: review of disparities in risks and outcomes report](#). The reasons are complex and there is ongoing research to understand and translate these findings for individuals in the future. If people with possible risk factors are concerned, we recommend settings discuss their concerns and explain the measures the setting is putting in place to reduce risks. Setting leaders should try as far as practically possible to accommodate additional measures.

People who live with those who have comparatively increased risk from coronavirus (COVID-19) can attend the workplace.

Settings have a legal obligation to protect their employees, and others, from harm and should continue to assess health and safety risks and consider how to meet equalities duties in the usual way. Following the steps in this guidance will mitigate the risks of coronavirus (COVID-19) to children and staff and help settings to meet their legal duties to protect employees and others from harm.

# What the Guidance says:



## **3.3 System of controls: protective measures**

Having assessed their risk, settings should work through the system of controls below, adopting measures in a way that addresses the risk identified in their assessment, works for their setting, and in line with the learning and development needs of children in settings. This should include full educational and care support for those children who have special educational needs and disabilities (SEND).

If settings follow the guidance on the system of controls they will effectively reduce risks in their setting and create an inherently safer environment.

# Prevention must!

**1** Minimise 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 our setting.



**2** Clean hands on entry, before and after play activities and schedule regular hand washing reminders.



**3** Ensure good respiratory hygiene by promoting the 'catch it, bin it, kill it' approach with both staff and children.



**4** Carry out enhanced cleaning, including cleaning frequently touched surfaces often using standard products, as per our risk assessment.



# What the Guidance says: Prevention



## 1. Minimise 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 settings

Ensuring that children, staff and other adults do not come into settings if they have coronavirus (COVID-19) symptoms or have tested positive in the last 7 days and ensuring anyone developing those symptoms during the day is sent home, are essential actions to reduce the risk in settings and further drive down transmission of coronavirus (COVID-19). All settings must follow this process and ensure all staff are aware of it.

If anyone in the 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 [‘Stay at home: guidance for households with possible or confirmed coronavirus \(COVID-19\) infection’](#), which sets out that they must self-isolate for at least 7 days and [should arrange to have a test](#) to see if they have coronavirus (COVID-19). Other members of their household (including any siblings) should self-isolate for 14 days from when the symptomatic person first had symptoms.

If a child is awaiting collection, they should be moved, if possible, to a room where they can be isolated behind a closed door with appropriate adult supervision. Ideally, a window should be opened for ventilation. If it is not possible to isolate them, move them to an area which is at least 2 metres away from other people. If they need to go to the bathroom while waiting to be collected, they should be taken to a separate bathroom if possible. The bathroom should be cleaned and disinfected using standard cleaning products before being used by anyone else.

PPE must 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). More information on PPE use can be found in the [Safe working in education, childcare and children’s social care settings, including the use of personal protective equipment \(PPE\) guidance](#).

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As is usual practice, in an emergency, call 999 if someone is seriously ill or injured or their life is at risk. Anyone with coronavirus (COVID-19) symptoms should not visit the GP, pharmacy, urgent care centre or a hospital.

Any members of staff who have helped someone with symptoms and any children who have been in close contact with them do not need to go home to self-isolate. However, they must self isolate if they develop symptoms themselves (in which case, they should arrange a test), if the symptomatic person subsequently tests positive (see below) or they have been requested to do so by NHS Test and Trace.

Everyone must wash their hands thoroughly for 20 seconds with soap and running water or use hand sanitiser after any contact with someone who is unwell. The area around the person with symptoms must be cleaned with normal household disinfectant after they have left to reduce the risk of passing the infection on to other people. See the [COVID-19: cleaning of non-healthcare settings guidance](#).

Public Health England is clear that routinely taking the temperature of children is not recommended as this is an unreliable method for identifying coronavirus (COVID-19).

# What the Guidance says: Prevention



## 2. Clean hands thoroughly more often than usual

Coronavirus (COVID-19) is an easy virus to kill when it is on the skin. This can be done with soap and running water or hand sanitiser.

Settings must ensure that children clean their hands regularly, including when they arrive at the setting, when they return from breaks, when they change rooms and before and after eating. Regular and thorough hand cleaning is going to be needed for the foreseeable future. Points to consider and implement:

- whether the setting has enough hand washing or hand sanitiser 'stations' available so that all children and staff can clean their hands regularly
- supervision of hand sanitiser use given risks around ingestion. Small children and those with complex needs should continue to be helped to clean their hands properly. Skin friendly skin cleaning wipes can be used as an alternative
- building these routines into setting culture, and helping ensure younger children and those with complex needs understand the need to follow them.

# What the Guidance says: Prevention



## **3. Ensure good respiratory hygiene by promoting the 'catch it, bin it, kill it' approach**

The 'catch it, bin it, kill it' approach continues to be very important, so settings must ensure they have enough tissues and bins available in the setting to support children and staff to implement this routine. As with hand cleaning, settings must ensure younger children are helped to get this right, and all children understand that this is now part of how the setting operates.

Public Health England does not (based on current evidence) recommend the use of face coverings in schools. The evidence will be kept under review. Public Health England advises that for safety reasons, face masks should not be used for children under three. In addition, misuse may inadvertently increase the risk of transmission and there may also be negative effects on communication and thus children's development. Face coverings are required at all times on public transport (for children over the age of 11) or when attending a hospital as a visitor or outpatient.



# What the Guidance says: Prevention



## **4. Introduce enhanced cleaning, including cleaning frequently touched surfaces often using standard products, such as detergents**

Points to consider and implement:

in line with the risk assessment and timetabling of the day, putting in place a cleaning schedule that ensures cleaning is generally enhanced and includes:

- more frequent cleaning of rooms that are used by different groups

- frequently touched surfaces being cleaned more often than normal

different groups don't need to be allocated their own toilets, but toilets will need to be cleaned regularly and children must be encouraged to clean their hands thoroughly after using the toilet

By the end of the summer term, Public Health England will publish revised guidance for cleaning non-healthcare settings to advise on general cleaning required in addition to the current advice on [cleaning when there is a suspected or confirmed case of coronavirus \(COVID-19\)](#).

# Prevention should!

**5.** Minimise contact between groups where possible.



**6** Where necessary, wear appropriate personal protective equipment (PPE).



# What the Guidance says: Prevention



## 5. Minimise contact between individuals where possible

From 20 July, early years settings will not be required to arrange children and staff in small, consistent groups.

Settings should still consider how they can minimise mixing within settings, for example where they use different rooms for different age groups, keeping those groups apart as much as possible.

Removing the groups approach is based on the fact that the overall risk to children from coronavirus (COVID-19) is low. It also recognises that early years settings are typically much smaller than schools. Adopting the system of controls set out here in a robust way will ensure there are proportionate safeguards for children as well as staff and reduce the chance of transmission.

Until 20 July, providers are expected to ensure that there are no more than 16 children in a single group in an early years setting. Providers can have several groups of 16 children if EYFS ratios and EYFS space requirements allow. While 16 children is the maximum in a group, keeping groups to 8 children, while adhering to EYFS ratios, is preferable, so groups are as small as possible.

Reception is subject to school admissions (infant class size) regulations, therefore, until the end of the summer term, schools should follow the primary guidelines for reception which sets a limit of 15 children per group. New guidance has also been published for schools for autumn term from September.

Parents and carers should be encouraged to limit the number of settings their child attends, ideally ensuring their child only attends the same setting consistently. This should also be the same for staff.

# What the Guidance says: Prevention



## **6. Where necessary, wear appropriate personal protective equipment**

The majority of staff in early years settings will not require PPE beyond what they would normally need for their work. PPE is only needed in a very small number of cases, including:

where an individual child becomes ill with coronavirus (COVID-19) symptoms while at a setting, and only then if a distance of 2 metres cannot be maintained

where a child already has routine intimate care needs that involves the use of PPE, in which case the same PPE should continue to be used

Read the guidance on [safe working in education, childcare and children's social care](#) for more information about preventing and controlling infection, how PPE should be used, what type of PPE to use, and how to source it.



# Response to Infection!

**7** Engage with NHS Track and Trace.



**8** Manage confirmed cases of coronavirus (COVID-19) amongst the setting community.



**9** Contain any outbreak by following DfE and / or local health protection team advice and / or Public Health England.

**DfE Helpline: 0800 046 8687**  
**PHE South East: 0344 225 3861**

# What the Guidance says: Response to Infection



## 7. Engage with the NHS Test and Trace process

Settings must ensure they understand the NHS Test and Trace process and how to contact their local [Public Health England health protection team](#). Settings must ensure that staff members and parents/carers understand that they will need to be ready and willing to: [book a test](#) if they are displaying symptoms. Staff and children must not come into the setting if they have symptoms, and must be sent home to self-isolate if they develop them in the setting. All children can be tested, including children under 5, but children under 11 will need to be helped by their parents if using a home testing kit provide details of anyone they have been in close contact with if they were to test positive for coronavirus (COVID-19) or if asked by NHS Test and Trace

[self-isolate](#) if they have been in close contact with someone who tests positive for coronavirus (COVID-19) symptoms or someone who tests positive for coronavirus (COVID-19)

Anyone who displays symptoms of coronavirus (COVID-19) can and should get a test. Tests can be booked online through the NHS website, or ordered by telephone via NHS 119 for those without access to internet. Essential workers, which includes anyone involved in education or childcare, have [priority access to testing](#).

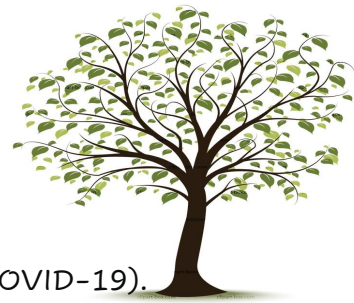
The government will ensure that it is as easy as possible to get a test through a wide range of routes that are locally accessible, fast and convenient. We will release more details on new testing avenues as and when they become available and will work with early years settings so they understand what the quickest and easiest way is to get a test.

Settings should ask parents and staff to inform them immediately of the results of the test:

if someone tests negative, and they feel well and no longer have symptoms similar to coronavirus (COVID-19), they can stop self-isolating. They could still have another virus, such as a cold or flu – in which case it is still best to avoid contact with other people until they are better. Other members of their household can also stop self-isolating.

if someone tests positive, they should follow [Stay at home: guidance for households with possible or confirmed coronavirus \(COVID-19\) infection](#) and must continue to self-isolate for at least 7 days from the onset of their symptoms and then return to the setting only if they do not have symptoms other than cough or loss of sense of smell or taste. This is because a cough or anosmia can last for several weeks once the infection has gone. The 7-day period starts from the day when they first became ill. If they still have a high temperature, they should keep self-isolating until their temperature returns to normal. Other members of their household should continue self-isolating for the full 14 days.

# What the Guidance says: Response to Infection



## 8. Managing confirmed cases of COVID-19 in the setting

Settings must take swift action when they become aware that someone who has attended has tested positive for coronavirus (COVID-19).

Settings should contact the local health protection team. This team will also contact settings directly if they become aware that someone who has tested positive for coronavirus (COVID-19) attended the setting – as identified by NHS Test and Trace.

The local health protection team will work with settings to carry out a rapid risk assessment to confirm who has been in close contact with the person during the period that they were infectious, and ensure they are asked to self-isolate.

The health protection team will work with settings in this situation to guide them through the actions they need to take. Based on the advice from the health protection team, settings should send home those people who have been in close contact with the person who has tested positive, advising them to self-isolate for 14 days since they were last in close contact with that person when they were infectious. Close contact means:

- direct close contacts – face to face contact with an infected individual for any length of time, within 1 metre, including being coughed on, a face to face conversation, or unprotected physical contact (skin to skin)
- proximity contacts – Extended close contact (within 1-2m for more than 15 minutes) with an infected individual
- travelling in a small vehicle, like a car, with an infected person

The health protection team will provide definitive advice on who must be sent home. To support them in doing so, we recommend settings keep a record of:

- children and staff in specific groups/rooms (where applicable)
- close contact that takes places between children and staff in different groups/rooms

This should be a proportionate recording process. Settings do not need to ask staff to keep definitive records in a way that is overly burdensome.

A template letter will be provided to settings, on the advice of the health protection team, to send to parents and staff if needed. Settings must not share the names or details of people with coronavirus (COVID-19) unless essential to protect others.

Household members of those who are sent home do not need to self-isolate themselves unless the child or staff member who is self-isolating subsequently develops symptoms. If someone in a group that has been asked to self-isolate develops symptoms themselves within their 14-day isolation period they should follow [‘Stay at home: guidance for households with possible or confirmed coronavirus \(COVID-19\) infection’](#). They should get a test, and:

- if the test delivers a negative result, they must remain in isolation for the remainder of the 14-day isolation period. This is because they could still develop the coronavirus (COVID-19) within the remaining days
- if the test result is positive, they should inform their setting immediately, and must isolate for at least 7 days from the onset of their symptoms (which could mean the self-isolation ends before or after the original 14-day isolation period). Their household should self-isolate for at least 14 days from when the symptomatic person first had symptoms, following [‘Stay at home: guidance for households with possible or confirmed coronavirus \(COVID-19\) infection’](#)

Settings should not request evidence of negative test results or other medical evidence before admitting children or welcoming them back after a period of self-isolation.

Further guidance is available on [testing and tracing for coronavirus \(COVID-19\)](#).

# What the Guidance says: Response to Infection



## **9. Contain any outbreak by following local health protection team advice**

If settings have two or more confirmed cases within 14 days, or an overall rise in sickness absence where coronavirus (COVID-19) is suspected, settings may have an outbreak, and must contact their local health protection team who will be able to advise if additional action is required.

In some cases, health protection teams may recommend that a larger number of other children self-isolate at home as a precautionary measure – perhaps the whole site or a group. If settings are implementing the controls from this list, addressing the risks they have identified and therefore reducing transmission risks, whole setting closure based on cases within the setting will not generally be necessary, and should not be considered except on the advice of health protection teams.



# Additional Measures!

- Use video conferencing instead of face-to-face meetings.
- Work with parents to ensure our setting is as covid secure as possible.
- Follow our Covid-19 Risk Assessments and procedures.



We are aware that  
any outbreaks will  
be a stressful and  
anxious time for  
everyone.

Speak to Jo or  
Kathrin if you are  
worried or have  
concerns.