



An Roinn Leanaí
agus Gnóthaí Óige
Department of Children
and Youth Affairs

Principles underpinning practice when reopening early learning and care and school-age childcare services during COVID-19



Principles underpinning practice when reopening early learning and care and school-age childcare services during COVID-19 (v.2.1)

This note sets out central principles that should underpin practice in early learning and care and school-age childcare services during the COVID-19 period. This current version is based on the latest public health advice available (**as of 29 May**), which is subject to ongoing review / updating by the Health Protection Surveillance Centre (HPSC) in the HSE. If the public health advice changes, this note on the Principles Underpinning Practice when Reopening may change.

DCYA is currently developing detailed guidance for service providers, in consultation with the HPSC/HSE and Tusla.

Information on COVID-19 and children

The current evidence suggests that children seem generally less likely to catch the infection and are not more likely than adults to spread infection to other people. Children have rarely been the person who brought COVID-19 into a household when household spread has happened. Children seem more likely than adults to have no symptoms or to have mild disease. Symptoms in children include cough, fever, runny nose, sore throat, diarrhoea and vomiting. It is important for parents and for those who deliver early learning and care and school-age childcare to accept that no interpersonal activity is without risk of transmission of infection, but public health advice is that reopening is appropriate.

A child-centred approach

- Practice will remain child-centred. This means children are at the heart of all policies and practices and involved in decision-making where appropriate.
- A service's primary concern should be children's health and well-being.
- While DCYA will provide guidance for childcare services, including practical examples, it will be for service providers to determine how best to comply with the public health guidance within the regulatory framework.
- There will be no change to the Early Years Regulations. Statutory adult-child ratios and space requirements for different age groups and care categories will be as before.

Social distancing and 'Play-pods'

- Social distancing is not possible between young children. Infection risk is minimised through children remaining within the same 'play-pod' through the day.
- A 'play-pod' comprises a group of children and the adult(s) who remain with that group as keyworker(s). The intention is that the same staff and children stay together each day, through the day, as far as possible.
- The purpose of 'play-pods' is to limit the number of people a child has contact with, to facilitate tracing, and to support close, positive interactions between children and their adult caregivers, like in a key-worker system. This system will also reduce the amount of contact adults have with each other.
- 'Play-pods' develop a cohesive, consistent group of children who feel safe. Children are returning to their setting having been with their parent(s)/guardian(s) for several months, and the 'play-pod' aims to develop a team-like spirit between the children where they help each other while playing and learning together.
- Within a 'play-pod', social distancing is not recommended.
- As far as possible, there should be no contact between two 'play-pods' (children and staff). 'Play-pods' should remain apart in shared spaces (including outdoors) and during drop-off and collection times.

- A large room may contain more than one ‘play-pod’ provided there are partitions that prevent physical contact between the ‘play-pods’, and provided the layout complies with the Early Years Regulations and with fire safety requirements. Particular attention needs to be given to any shared entry or exit points to reduce contact between pods.
- Toys should not be shared between ‘play-pods’.
- Staff from different ‘play-pods’ should maintain social distancing (2 metres). Where two staff are part of one pod, they should social distance as far as is practicable. Children from different play-pods should not play together.
- As far as possible, staff and parents should maintain social distancing (2 metres).
- Where possible, there should be two adults in a ‘play-pod’, to allow breaks without need for floating staff. Services should continue to operate within regulatory adult-child ratios and so pod size (with two adults) will be limited by those ratios.
- In a home setting, a childminder’s family and the children cared for are considered as a single ‘play-pod’ but strong hygiene and other measures should be followed.

Infection Control

- Services should try to minimise and manage risk of infection. Some risk is inevitable but public health advice is that reopening is appropriate.
- Children and adults should not attend if they have symptoms of viral infection.
- Hand hygiene and respiratory hygiene should be practised at all times. Staff should model and support practice by children in an age-appropriate way.
- Personal Protective Equipment (PPE) is not required for children or for staff during their normal interactions with children, except insofar as required by the Early Years Regulations (gloves / aprons for nappy changing; gloves for cleaning). If a child develops symptoms while in the service, the staff member assigned to care for them while they wait for a parent or guardian to pick them up may wear a mask. When not caring for children, adults should follow NPHET advice on use of masks (cloth face coverings).

Indoor and outdoor environments, and capacity

- Settings should ensure that environments remain familiar to children as far as possible.
- Play and learning outdoors should be central to practice every day.
- There is no requirement to reduce capacity in a setting (total number of children). However, a service may need to reduce capacity in some rooms in order to comply with the maximum size of a ‘play-pod’ and to prevent contact between ‘play-pods’.
- Services may also need to consider their staff facilities when deciding on their capacity, to ensure that they can support social distancing between staff.
- A service’s ability to manage entry and exit, via staggered start and finish times and/or use of multiple exits, may also impact capacity.

Promoting effective communications (with staff and parents)

- Maintaining staff safety and welfare is essential.
- Providers should inform staff about new measures put in place and about their roles and responsibilities. Providers should seek to address concerns that staff raise.
- Providers should support staff through instruction and training so they have the knowledge and skills to perform their roles adequately or enhance their practice before opening.
- Services should inform parents/guardians about new measures put in place and about the responsibilities of parents/guardians in supporting measures.
- Services should look at creative ways to continue partnership with parents/guardians, including informing them about their child’s progress.