

DFE childcare provision reopening FAQs

1. **Do I have to reopen my provision on 1 June?**

No. The government has confirmed that it is “asking” providers to open on 1 June (assuming scientific advice confirms it is safe to do so), but it is not a requirement.

2. **Are early years providers expected to keep children two metres apart from each other?**

No. The Department for Education has confirmed that it does not expect providers to keep all children two metres away from each other, or to care for children while remaining two metres away, as this is simply not possible. Its guidance states: “We know that, unlike older children and adults, early years and primary age children cannot be expected to remain 2m apart from each other and staff.”

It has said that it is asking providers to try and minimise the risk of transmission by keeping children in smaller groups, and minimising the interactions between these groups

3. **What does the government mean by “small groups” and how will this work in practice?**

The DFE guidance on reopening nurseries that: “For pre-school children in early years’ settings, the staff to child ratios within Early Years Foundation Stage continue to apply, and recommended using these to group children”.

It adds that: “Where settings can keep children and young people in those small groups 2m away from each other, they should do so. While in general groups should be kept apart, brief, transitory, contact such as passing in a corridor is low risk”.

4. **What steps should we take to minimise the risk of infection transmission?**

The DFE guidance on protective measures outlines steps providers can take to deal with direct transmission (e.g. via coughing and sneezing) and indirect transmission (e.g. through touching contaminated surfaces).

The key steps the government says providers should take to reduce the risk of transmitting an infection are:

- Minimising contact with unwell individuals, and ensuring anyone who has coronavirus symptoms themselves or who lives with some displaying symptoms, does not attend the nursery provision.
- Washing hands thoroughly and frequently for 20 seconds with soap and water, or alcohol hand rub or hand sanitiser.
- Catching coughs and sneezes in a tissue, and putting the tissue in a bin straight away.
- Cleaning frequently-touched surfaces.
- Minimising contact between groups of children.

Additional guidance from the DFE includes:

- Considering which activities are suitable to deliver, and which could take place outdoors.
- Staggering drop-off and collection times.
- Planning drop-off and pick-up protocols “that minimise adult to adult contact”.

- Considering how play equipment is used, “ensuring it is appropriately cleaned between groups of children using it, and that multiple groups do not use it simultaneously”.
- Removing unnecessary items from the learning environment and minimising the use of soft toys and furnishings as far as possible, as well as toys that are hard to clean.

5. [Do we need to wear personal protective equipment \(PPE\)?](#)

The government guidance states that: “Wearing a face covering or face mask in schools or other education settings is not recommended” and that: “Schools and other education or childcare settings should ... not require staff, children and learners to wear face coverings.”

It adds that: “Children, young people and students whose care routinely already involves the use of PPE due to their intimate care needs should continue to receive their care in the same way”.

The guidance also states that if a child develops coronavirus symptoms while at a setting, a “fluid-resistant surgical face mask should be worn by the supervising adult” and that “disposable gloves, a disposable apron and a fluid-resistant surgical face mask should be worn” during any contact with the symptomatic child.

It adds that: “If a risk assessment determines that there is a risk of splashing to the eyes, for example from coughing, spitting, or vomiting, then eye protection should also be worn.”

With regard to obtaining PPE, the guidance states that: “Education, childcare and children’s social care settings and providers should use their local supply chains to obtain PPE.

6. [What should be done if a child or member of staff falls ill at a setting?](#)

The DFE states that: “If anyone becomes unwell with a new, continuous cough or a high temperature in an education or childcare setting, they must be sent home”, and advised to follow government guidance (i.e. to self-isolate for seven days, while all members of their household self-isolate for 14 days).

If it is a child who has fallen ill, the guidance states that they should be moved to a room where they can be isolated behind a closed door with appropriate adult supervision while awaiting collection. The guidance adds that: “Ideally, a window should be opened for ventilation”. If moving to a separate room is not possible, the child should be moved to an area at least two metres away from other people.

The guidance also states that: “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).”

If a member of staff has helped an unwell child, the guidance states that they should wash their hands thoroughly for 20 seconds afterwards, but that they are not required to go home unless they develop symptoms themselves or the child subsequently tests positive for coronavirus. If the member of staff does develop symptoms, they are able to access a free coronavirus test.

The guidance adds that: “Cleaning the affected area with normal household disinfectant after someone with symptoms has left will reduce the risk of passing the infection on to other people.”

If a child or staff member is seriously ill, 999 should be called.

7. **What happens if someone at the setting tests positive for coronavirus?**

The government has confirmed that all staff and children at a childcare setting will have access to a coronavirus test if they display symptoms of the virus.

In the case of children, guidance states that: “To access testing parents will be able to use the 111 online coronavirus service if their child is 5 or over [and] will be able to call 111 if their child is aged under 5.”

If either a child or member of staff tests positive, the rest of their ‘group’ at the setting “should be sent home and advised to self-isolate for 14 days”. However, the guidance states that the household members of those in that group do not need to self-isolate unless the children or staff member who they live with develops symptoms themselves.

The guidance adds that: “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”.

It also states that “in some cases, a larger number of other children may be asked to self-isolate at home as a precautionary measure” but that “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”

8. **If more parents want their children to return to the setting than can be safely cared for, how do I/we prioritise?**

The guidance on reopening states that providers should “discuss options with their local authority or trust” and that solutions may involve children attending a nearby setting, though it notes that this should be “on a consistent basis”.

The guidance also advises that “if necessary, settings have the flexibility to focus first on continuing to provide places for priority groups” and suggests that early years’ settings prioritise three- and four-year-olds, followed by younger age groups.

The Alliance additionally advises that you may want to prioritise places based on the needs of the child (for example, prioritising a child who is not officially defined as vulnerable but could be considered to be) and/or the needs of their parents (for example, prioritising a parent who is working and cannot work from home)

9. **Are members of staff who have underlying health conditions expected to return to work?**

Government guidance states that staff members who are clinically vulnerable – for example, those with diabetes, or who have mild-to-moderate asthma – should be supported to observe social distancing by carrying out roles that can be done from home, such as session planning. If this is not possible, they should be offered roles that allow them to stay two metres away from other people wherever possible. If this isn’t possible, then providers “must carefully assess and discuss with them whether this involves an acceptable level of risk”.

Staff members who are clinically extremely vulnerable – such as those with specific cancers or with severe respiratory conditions such as cystic fibrosis – are not expected to attend work. The guidance states that staff in this category “should work from home where possible”.

10. **Can staff who live with someone who is vulnerable attend the setting?**

The guidance on reopening states that staff who live with someone who is clinically vulnerable (but not clinically extremely vulnerable), including those who are pregnant, can attend their education or childcare setting.

However, staff who live with someone who is clinically extremely vulnerable should “only attend an education or childcare setting if stringent social distancing can be adhered to.

11. [Can children who have underlying health conditions attend the setting?](#)

The Department for Education states that “few if any children” will fall into the category of clinically vulnerable, but that “parents should follow medical advice if their child is in this category”.

Children who have been classed as clinical extremely vulnerable are not expected to attend settings.

12. [Can children who live with someone who is vulnerable attend the setting?](#)

Children who live with someone who is clinically vulnerable, but not clinically extremely vulnerable, can attend their setting.

Children who live with someone who is clinically extremely vulnerable should only attend their setting “if they are able to understand and follow social distancing instructions” which “may not be possible for very young children and older children without the capacity to adhere to the instructions on social distancing.

13. [Do temporary changes to the EYFS still apply after 1 June?](#)

As it stands, yes. On 24 April, the government brought into force changes to how the EYFS applies during the coronavirus outbreak, including asking early years’ providers to use “reasonable endeavours” to learning and development requirements, instead of this being something they ‘must do’.

Department for Education guidance states that the changes to how the EYFS applies will last “until government stipulates otherwise” It adds the end date of changes is currently 25 September 2020, but this will be reviewed on a monthly basis and may be brought forward “for instance, if government advice on self-isolation and social distancing is amended.

14. [Will Ofsted inspections be restarting as of 1 June?](#)

No, not as it stands. The Department for Education guidance on reopening states: “There are no changes to the previously announced expectations on assessment and accountability. No examinations or assessments will take place this term and Ofsted will continue to pause routine inspection.”

Urgent inspections “where specific concerns have been raised” will continue to take place.