



What to do if a child or adult is displaying symptoms, or is a confirmed case, of coronavirus (COVID-19) in an early years setting

This guidance is for:

- early years providers registered with Ofsted
- childminders registered with childminder agencies

It explains the actions you need to take if:

- a child in your care has symptoms of coronavirus
- your setting has a confirmed case

Settings should make sure they follow the [actions for early years and childcare providers during the coronavirus \(COVID-19\) outbreak](#). This guidance includes the [system of controls](#) which sets out the protective measures all settings should be following.

Child displaying symptoms of coronavirus (COVID-19)

1. Contact their parents or carers

A child must be sent home to isolate if they become unwell with any one or more of:

- a new, continuous cough
- a high temperature
- a loss of, or change in, their normal sense of taste or smell (anosmia)

The child should start isolating and get a test. The child and their household should follow the [stay at home guidance for households with possible or confirmed coronavirus \(COVID-19\)](#).

You should call the parents or carers to collect the child and take them home. Any siblings attending the early years setting will also need to be sent home at the same time.

You should advise the parent or carer that all household members will need to isolate, including siblings in other settings, and refer them to the [guidance for households with possible or confirmed coronavirus \(COVID-19\) infection](#).

Side effects of children receiving a routine vaccination or teething

Vaccines may cause a mild fever in children. This is a common and expected reaction, and isolation is not required unless coronavirus (COVID-19) is suspected.

Whilst teething can cause some known side effects such as flushed cheeks and sore gums, [NHS guidelines](#) state that fever is not a symptom of teething.

Parents and carers should monitor side effects from a vaccination or teething, and if they are concerned about their child's health, they should seek advice from their GP or NHS 111.

If coronavirus (COVID-19) is suspected, settings should follow the advice in the [system of controls](#).

2. Isolate the child showing symptoms

While the child is awaiting collection, move them to an isolated room with appropriate adult supervision. If it is safe to do so, open a window 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.

Since it's unlikely that staff caring for a young child while they are awaiting collection will be able to maintain a 2 metre distance, they should wear suitable personal protective equipment (PPE). See the guidance on [safe working in education, childcare and children's social care settings](#) for more information on the use of PPE.

If the child needs 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.

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.

3. Ask the parents or carers to arrange a test for the child

When parents or carers pick up the child, advise them to get the child [tested to see if they have coronavirus \(COVID-19\)](#). They should notify you of the results.

4. Clean and disinfect all surfaces they have been in contact with

Once the child has left the premises, thoroughly disinfect and clean all surfaces and contact points they came into contact with using standard cleaning products. This includes the bathroom if used.

Staff and other children who have had contact with the child who has symptoms must wash their hands thoroughly for 20 seconds.

Staff displaying symptoms of coronavirus (COVID-19)

If a staff member develops symptoms of coronavirus (COVID-19) whilst at work, you must send them home to self-isolate and advise them to get a test as soon as possible. They should begin isolating and follow the [guidance for households with possible or confirmed coronavirus \(COVID-19\) infection](#). The isolation period includes the day the symptoms started (or the day the test was taken if they do not have symptoms), and the next 10 full days. If any of the individual's household members also attend the setting they will also need to be sent home at the same time.

Once the staff member has left the premises, thoroughly disinfect and clean all surfaces and contact points they came into contact with using standard cleaning products. This includes the bathroom if used.

If a staff member develops symptoms of coronavirus (COVID-19) while at home, they should not attend work and should notify their setting immediately. You should advise them to arrange to have a [test to check if they have coronavirus \(COVID-19\)](#) and let you know the results. Education and childcare workers are [prioritised for testing](#).

Child or staff members who test positive for coronavirus (COVID-19)

When to contact your local health protection team

Contact your [local health protection team](#) if:

- the number of cases exceeds 2 within 14 days
- you have taken the action outlined but are still seeing more cases
- you are thinking you might need to close because of the number of people affected
- a child or staff member in your setting has been admitted to hospital
- you are getting significant interest from local media

Your local health protection team will advise you on the next steps.

1. Contact the child or staff member who has tested positive

You need to find out if they attended your setting during the infectious period. The infectious period is 2 days before their symptoms started (or their test date if they did not show any symptoms) to at least 10 days after.

Confirm that they must not attend your setting for at least 10 full days from the day after the start of their symptoms or test date if they did not have any symptoms.

If they did not attend your setting during the infectious period, you do not need to take any further action.

2. Identify close contacts of the child or staff member who has tested positive

If they did attend your setting during the infectious period, you need to identify potential contacts during this period following the guidance for contacts of people with confirmed coronavirus (COVID 19) infection who do not live with the person

'A contact' is a person who has been close to someone who has tested positive for COVID-19 with a [polymerase chain reaction \(PCR\) test](#). You can be a contact anytime from 2 days before the person who tested positive developed their symptoms, and up to 10 days after, as this is when they can pass the infection on to others.

A contact can be:

- anyone who lives in the same household as someone with COVID-19 symptoms or who has tested positive for COVID-19
- anyone who has had any of the following types of contact with someone who has tested positive for COVID-19 with a PCR test:
 - face-to-face contact including being coughed on or having a face-to-face conversation within one metre
 - skin-to-skin physical contact for any length of time
 - been within one metre for one minute or longer without face-to-face contact
 - been within 2 metres of someone for more than 15 minutes (either as a one-off contact, or added up together over one day)
 - travelled in the same vehicle or a plane

If you need further guidance and support, contact the PHE advice service on **0800 046 8687 and select option 1**. You will be put through to a team of advisors who will inform you what action is needed based on the latest public health advice, and will work through a risk assessment to identify close contacts.

Childminders

This advice applies where a childminder usually looks after children in their own home and a member of the childminder's household has tested positive for coronavirus (COVID-19).

A childminder cannot care for children in their home because all household members must self-isolate.

The childminder's household must self-isolate. Their isolation period includes the day that the first person in their household started displaying [symptoms](#) (or the day their test was taken if they did not have symptoms, whether this was a Lateral Flow Device (LFD) or Polymerase Chain Reaction (PCR) test, and the next 10 full days. They should follow the [guidance for households with possible or confirmed coronavirus \(COVID-19\) infection](#).

All children who attended the childminder's home during the child's infectious period would be considered contacts on the basis that social distancing is assumed not possible.

Where the childminder has tested positive for coronavirus (COVID-19), it is assumed that social distancing between the childminder and the children is not possible. All children who attended the setting during the childminder's infectious period would be considered close contacts and asked to isolate.

Early years settings

All children who had shared a group/room with the confirmed case during their infectious period would be considered contacts on the basis that social distancing is assumed not possible.

Identify potential contacts during the infectious period by:

- using attendance records to see who shared a group/room with the child or staff member who has tested positive
- asking the staff member who has tested positive which children or other staff members they have had [contact](#) with whilst in the setting
- asking other staff members if they have been in contact with the child or staff member who has tested positive

3. Inform close contacts they need to self-isolate

Contact parents and carers of children and any staff who have been identified as close contacts of a positive case. Let parents and carers know that their child:

- must self-isolate for 10 days from the date of the last contact with the child or staff member who has tested positive - the isolation period includes the date of last contact and the next 10 full days
- needs to follow the [guidance for contacts of people with confirmed coronavirus \(COVID-19\) infection who do not live with the person](#)
- does not need to get tested unless they have or develop symptoms themselves

4. Report all confirmed, positive cases of coronavirus (COVID-19)

You must notify Ofsted of any confirmed cases in the setting (either child or staff member). You should also tell them if you have to close your setting as a result.

Report as soon as you can, and in any case within 14 days. Please read the [guidance on reporting incidents](#) to ensure all of the information required is included.

5. Share information with parents and carers

Contact other parents, carers and staff to let them know there has been a confirmed case of coronavirus (COVID-19) in your setting and the actions you are taking. You should advise them:

- close contacts have been identified and asked to self-isolate
- the setting remains open to all other children (normal opening hours apply)

You must not share the names of people with coronavirus (COVID-19) unless essential to protect others.

Charging parents and carers if they are unable to take up their child's place

You should continue to be fair and balanced in dealings with parents or carers; and must continue to avoid unfair charging practices. You should refer to:

- the [open letter to the early years' sector](#) published by the Competitions and Markets Authority (CMA)
- the CMA's [detailed advice](#) to the sector which explains how consumer protection law applies during the coronavirus (COVID-19) pandemic
- the CMA's [broader advice](#) on cancellations and refunds for consumer contracts affected by coronavirus (COVID-19) health restrictions

The general principle is that providers should not charge parents or carers for services that cannot be provided. If there is a barrier to accessing childcare, based on government guidance or the law, you should not charge the parents or carers for this period. For example, [from 28 September people in England are required by law to self-isolate](#) if they test positive for coronavirus or are contacted by NHS Test and Trace. If a child is self-isolating having been contacted by NHS Test and Trace, you should not charge the parent or carer for this period.

Preparing to welcome back children and staff members who have been self-isolating

Children and staff members who have been self-isolating after testing positive for coronavirus (COVID-19)

The child or staff member who tested positive for coronavirus (COVID-19) can return to their normal routine and stop self-isolating after 10 days from the onset of their symptoms if their symptoms have gone or if they continue to have only a residual cough or anosmia. This is because a cough or anosmia can last for several weeks once the infection has gone.

If they still have a high temperature after 10 days or are otherwise unwell, they are advised to stay at home and seek medical advice.

You 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.

In most cases, settings and parents and carers will agree that a child with symptoms should not attend the setting, given the potential risk to others. If a parent or carer insists on a child attending the setting, the setting can take the decision to refuse the child if, in their reasonable judgement, it is

necessary to protect their children and staff from possible infection with coronavirus (COVID-19). Any such decision would need to be carefully considered in the light of all the circumstances and current public health advice.

Children and staff members who have been self-isolating after being identified as a close contact of a positive case of coronavirus (COVID-19)

If the child or staff member remains well and does not show signs of coronavirus (COVID-19) symptoms, they can return to their normal routine at the end of the isolation period.

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