

Prevent the spread of COVID-19:

A guide for early childhood education and care services



**Statement by
Martin Graham**
A/Deputy Secretary,
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On 3 April, 2020 the Australian Health Protection Principal Committee (AHPPC) issued a statement about COVID-19 in children and management of early childhood education and care services (ECEC) in relation to community transmission. The AHPPC confirmed ECEC as essential services that should continue at this time, but with risk mitigation measures in place.

The NSW Department of Education is committed to supporting the early childhood education and care sector to identify and implement measures, so the essential work of educating the children in a safe environment can continue.

We acknowledge the unprecedented pressure COVID-19 has placed on all early childhood education and care services to remain open, while dealing with reduced enrolments and fears about the spread of COVID-19 particularly amongst children.

We also recognise the many changes early childhood education and care services have already put into place to ensure the continuity of education and care of children during these unprecedented times. Thank you for making the changes that help to keep services open and keep children, parents and staff well.



**Statement by
Dr Kerry Chant**
NSW Health
Chief Health Officer

COVID-19 is a respiratory illness caused by a new virus. We know that symptoms can include fever, cough, a sore throat or shortness of breath. We know the symptoms can be mild in many and severe in some, particularly the elderly and those with pre-existing health conditions. The virus can spread from person to person, but we know that good hygiene and physical distancing as well as exclusion of people with symptoms from any setting helps prevent infection.

We are aiming to suppress community transmission of COVID-19 to low levels through continued measures such as rapid testing and isolation of people with symptoms of COVID-19, identification of their contacts and placing contacts in isolation, and social distancing and hygiene practices.

There continues to be limited information on the contribution of children to transmission of COVID-19. Reports on COVID-19 in children show that, they are more likely to have a milder illness, and some may not have any symptoms.

Transmission has mainly been from adult to adult and children do not appear to contribute significantly to disease spread. This is different to the role that children play in the spread of other respiratory infections such as influenza (flu).

What is clear, is that when social distancing is combined with good personal hygiene, the spread of a pandemic through the community can be slowed.

Early childhood education and care services should feel confident that increasing social distancing and hygiene practices at their service will certainly help prevent the spread of COVID-19.

Purpose

This document seeks to provide practical guidance for early childhood education and care services in implementing the AHPCC's recommended risk mitigation measures for early childhood education and care services.

It outlines simple and effective ways for educators and other staff to help prevent the spread of COVID-19 and aligns to the policies and procedures on illness and infectious disease documented in the best-practice tool *Staying healthy: Preventing infectious diseases in early childhood education and care services*.

Remember: cover your cough and sneeze to stop the spread of germs

The correct way to prevent the spread of germs that are carried in droplets is by coughing or sneezing into your inner elbow, or by using a tissue to cover your mouth and nose. Put all tissues in the rubbish bin straight away, and clean your hands with either soap and water or an alcohol-based rub.



Prevent the spread

Hygiene measures

The best way to help prevent the spread of COVID-19 is by continuing effective hygiene practices:

- Clean your hands for 20 seconds with soap and water or an alcohol-based hand sanitiser.
- Sneeze or cough into your elbow or a tissue.
- Place used tissues straight into a bin.
- Avoiding touching one's eyes, nose and mouth.
- Don't share food or drink.

Social distancing measures

The more space between people, the harder it is for the virus to spread, so another way to slow the spread of the COVID-19 virus, is to implement physical distancing measures:

- Encourage staff and children to keep their distance from others wherever possible.
- Staff, children or visitors with fever or symptoms of acute respiratory infection (e.g.

cough, sore throat, runny nose, shortness of breath), even with mild symptoms should stay home.

- Staff or children that become ill while they are at the service, should be sent home as soon as possible. While awaiting collection by their carer, ideally, the symptomatic child should be cared for in an area that is separated from other children at the service.
- Cease non-essential activities (like excursions) that involve close personal contact.
- Implement controls to reduce direct contact with others, such as:
 - Barriers to create space at sign-in areas, seated areas etc.
 - Modify shifts and rosters, or pick up and drop off times to reduce peak periods.
 - Support remote learning arrangements while maintaining connections with families keeping their children at home for prolonged periods.

While it's not always possible in an ECEC setting to maintain physical distancing some things that you can do to minimise close contact are:

Learning and office spaces

- Consider the setup of the room and the placement of the activities and limit the number of whole group activities. Children should be spaced out as much as possible. For table activities, set up activities only at each end of the table.
- Mixing of staff and children between rooms should be avoided where possible. It is acknowledged that staff may need to move between rooms to support breaks and, in these situations, staff should be reminded of the importance of hand hygiene.
- Set up more individual activities throughout the room. Rather than having all of your books and blocks on one shelf, set them up in separate areas throughout the room if possible.
- Rather than having group times where everyone is sitting on the mat, consider using informal opportunities to engage with the children/read books/do storytelling with one or two children at a time throughout the day.
- For younger children, particularly consider the rotation of toys more often and increase the frequency of cleaning toys. Sharing of toys that have been placed in mouths should be monitored and avoided.
- Look at the spacing of cots and highchairs, keeping them well apart.
- Mixing of staff and children between rooms should be avoided where possible. It is acknowledged that staff may need to move between rooms to support breaks and, in these situations, staff should be reminded of the importance of hand hygiene.
- Where possible, staff should use separate offices, and separate themselves within existing office space as much as possible.

Mealtimes

- Sharing of food should be actively monitored and discouraged.

- Staff should serve children and avoid allowing children to self-serve from a shared plate.
- Look at your setup when children are eating. Consider having less children at each table and use more tables to allow more space between children.
- If you have limited tables and normally have all children eating at the same time, consider staggered timings of snacks and lunch over a longer period of time.

Outdoor play

- Wherever possible (e.g. weather dependent) and where you have enough staffing for adequate supervision, consider operating an indoor/outdoor program for the full day/session. This naturally provides for more space for the children and the setup of more activities for children to engage in.
- If you are not able to run an indoor/outdoor program, consider spending more time outdoors, consider the placement of activities and the amount of activities in the outdoor space. A greater range of activities will encourage children to spread out more broadly.
- Excursions other than to local parks should be discouraged and public playground equipment should not be used.

Routine care

- Standard precautions are advised when coming into contact with someone for the purpose of providing routine care and/or assistance (for example, the use of gloves for nappy changing, toileting, feeding). Also see National Health and Medical Research Council guidance [*Staying healthy: Preventing infectious diseases in early childhood education and care services*](#).
- Staff must always wash hands with soap and water for 20 seconds or use a hand sanitiser before and after performing routine care.

First aid

- Standard precautions should be adopted when providing first aid, e.g. gloves and apron to use when dealing with blood or body fluids/substances.
- Always wash hands with soap and water or use a hand sanitiser before and after providing first aid.
- Additional Personal Protective Equipment (PPE) (for example, face masks) is not required to provide standard first aid on children or staff who appear to be well. Hand hygiene, good respiratory etiquette (coughing into your elbow or into a tissue and immediately disposing of the tissue) and environmental cleaning are more important for reducing risk.

Early childhood education experts have developed [resources for educators](#) to share with parents and carers to help them engage in learning experiences with their children.

Vaccinations

It is recommended that all staff, children and parents to receive the influenza vaccine. Children under five years old are entitled to a free flu shot.

Flu vaccination reduces your chances of getting influenza, which means it also reduces the risk of you having two potentially serious infections, influenza and COVID-19, at the same time.

People are encouraged to discuss with their GP or other immunisation providers how to organise to get their influenza vaccination with the social distancing requirements and other measures in place to minimise potential exposure to coronavirus. People not eligible for free flu vaccine can consider also get vaccinated through many pharmacies. Children under 5 years can also access the free influenza vaccine through community health centres and local councils that immunise children.

See the [Seasonal influenza immunisation FAQs](#) for more information.

Environmental cleaning

The aim of environmental cleaning is to minimise the number of germs that survive on surfaces in the education and care service.

Some germs can survive in the environment, usually on surfaces such as bench tops, door handles and toys. The length of time a germ can survive on a surface depends on the germ itself, the type of surface it has contaminated, and how often the surface is cleaned. Reducing the number of germs in the environment can break the chain of infection.

If you think a surface may be infected, clean it with a common household disinfectant to kill the virus and protect yourself and others. Clean your hands with an alcohol-based hand rub or wash them with soap and water. Avoid touching your eyes, mouth, or nose.

For more details about when to clean, cleaning with detergent or disinfectants and other special considerations for cleaning, services are encouraged to revisit Section 3.4: Cleaning the education and care service from the [Staying Healthy: Preventing infectious diseases in early childhood education and care services](#).

Employer and business owner obligations

The [SafeWork NSW](#) provides guidance on how businesses and workers can stay safe at work during the COVID-19 pandemic. Under WHS law, all employers or businesses are required to manage the risk of COVID-19 to workers and others in the work environment.

Stay informed

The role that children play in transmission and amplification of COVID-19 remains largely unknown and AHPPC will continue to closely monitor the evidence as it emerges to inform public health policy.

Services should keep up to date with the latest information and facts regarding COVID-19 on the [NSW Health](#) and [NSW Government](#) websites.