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To all registered childcare providers and childminders

Thank you for everything that you are continuing to do to for children, families and your staff. This notice provides an update on the following issues:

1. ELC Covid safety guidance suite
2. Testing and Vaccination Communications Toolkit
3. LFD Kits: Orders and Deliveries
4. Fact-sheet on the self-isolation policy for contacts of positive Covid cases aged under 5 (Annex A)
5. Publication of the Coronavirus (Recovery and Reform) (Scotland) Bill

1. ELC Covid safety guidance suite: no changes to existing guidance

As you are aware, we developed and published updated Covid safety guidance for ELC settings, school age childcare and childminding services in December to support providers in dealing with the Omicron variant. This focused on strengthening measures to limit contacts, including through:

- use of groupings in indoor settings, wherever that is possible;
- 'virtual' visits being the norm for meetings with parents;
- minimising contacts by peripatetic and agency staff; and,
- encouraging settings to exercise caution in arranging day visits.

This guidance was then updated again on 7 January when the new self-isolation rules came into effect. In light of the number of cases among younger children, and the operational challenges for providers associated with frequent guidance changes, **we are not making changes to the ELC guidance suite at this stage**. The Covid safety guidance for schools was, however, updated on 1 February to revert to the requirements as they existed pre-Omicron. We are working with the Advisory Sub-Group on Education and Children's Issues to keep the suite of ELC Covid guidance under close review and we will keep you updated on any changes.

The existing ELC guidance already recognises that managers and head teachers understand their settings best and that you are well placed to judge whether you can accommodate some greater flexibility in the application of the guidance, based on your assessments of risk and an understanding of the specific needs of your children, families, staff and settings.

2. Testing and Vaccination Communications Toolkit

We are grateful to providers and service managers for your support in sharing information about COVID-19 vaccination with staff and for giving staff time off work to get their vaccine

and to recover when that it is needed. We also grateful for your support in encouraging staff to test regularly and record their results.

The feedback we've received from stakeholders across the childcare sector suggests that it would be helpful to create a **toolkit of materials** that can be used within settings or on social media channels. We have now developed materials that can be utilised via local communications channels to extend the reach of nationwide campaigns promoting testing and vaccination. There are posters in the toolkit that can be displayed in your setting, a speaking note that can be used at staff events and sample newsletter content.

We would be grateful if you would consider using these materials to continue encouraging colleagues to take up the vaccine, including booster jabs, as well as regular LFD testing and reporting of results on the online portal. The toolkit can be accessed [here](#).

3. LFD kits: orders and deliveries

Settings can continue to place orders for delivery in line with the usual arrangements. The link to reorder test kits, settings requiring their 8-digit Unique Organisation Number (UON), and orders requiring to be made by 5pm on Tuesdays to be delivered the following week, is here:- [Apply for coronavirus test kits - GOV.UK \(test-for-coronavirus.service.gov.uk\)](https://test-for-coronavirus.service.gov.uk).

If settings run out of test kits and do not expect a delivery to be made in time, or do not know their UON which is required for ordering, they should contact NSS colleagues who will try to arrange a delivery from our contingency stock or provide the UON. Settings can continue to contact the NSS Helpline 0800 008 6587 or email nss.Covid19TestingSupport@nhs.scot.

4. Fact-sheet on the self-isolation policy for contacts aged 0-5

In response to feedback from providers, we have prepared a fact-sheet on the self-isolation policy for contacts of positive Covid cases who are aged 0-5. Please see this attached at **Annex A**.

5. Publication of the Coronavirus (Recovery and Reform) (Scotland) Bill

We are pleased to confirm that the Coronavirus (Recovery and Reform) (Scotland) Bill was introduced to the Scottish Parliament on Tuesday 25 January and published on Wednesday 26 January. This [news release](#) links to the Bill text together with accompanying documents, impact assessments and other relevant information.

The Bill follows the public consultation "*Covid recovery: a consultation on public health, public services and justice system reforms*" held between 17 August and 9 November 2021. A consultation analysis report has been published at the webpage linked above, as have responses where consent was given to publish the response.

I would like to draw your attention to the education provisions in Part 2 of the Bill, which apply to all early learning and childcare settings (including childminding and school age childcare settings) and provide powers that are similar to those that were in the UK Coronavirus Act 2020. Part 2 Chapter 2 also makes minor changes to the Schools (Consultation) (Scotland) Act 2010, primarily related to public meetings.

The Bill is not about the current Covid response, but looking to the position from September 2022 and beyond.

The Scottish Parliament's Committees are likely to confirm their scrutiny proposals in the coming weeks, including a call for evidence at Stage 1 that I would encourage you to respond to if you wish.

I would like once again to thank you for everything that you are doing for children and families at this time.



ELEANOR PASSMORE
Deputy Director, Early Learning & Childcare

ANNEX A

Self-isolation policy for COVID contacts aged 0-5: fact-sheet on the change that applies from 6 January 2022

The change in self-isolation policy for children under 5 who are close contacts:

Children under 5 who are close contacts, including of someone in their own household e.g. their mum or dad, do not need to self-isolate. They also do not need to take a PCR test (unless they develop symptoms) or take daily LFD tests. They are recommended to take a one-off LFD test once they are identified as a contact, but they do not need to take any further tests after this unless they develop symptoms.

If the child under 5 has symptoms or develops symptoms, then they should book a PCR test: [Coronavirus \(COVID-19\): Get a PCR test if you have symptoms | NHS inform](#)

Any parent who has tested positive and is isolating should not leave isolation in order to travel with children to childcare. Children should only attend childcare if an adult who is not isolating is able to accompany them.

The rationale for the change which means that 0-5 year-old children are exempt from self-isolation if they have been in contact with a COVID case (when previously all Omicron contacts had to self-isolate, including young children):

This guidance is a return to the same guidance that was put in place in early August 2021, when rules on isolation were first relaxed in Scotland following the success of the vaccination programme in reducing the health harms of COVID-19 by reducing the risk of severe illness after infection. The balance had shifted in favour of reducing some of the more harmful measures being used to control the spread of COVID including isolation of children away from places of education and learning.

When Omicron emerged in November 2021 the rules were temporarily tightened again including for Under 5s who were household contacts. This was because we did not know what risk Omicron posed to the population of Scotland; the balance had potentially shifted back. These additional restrictions were a precaution while we learned more about this new strain of the virus. We now know that although the Omicron variant is more transmissible than previous variants of COVID-19, it remains a mild infection in the vast majority of children and is also less likely than Delta to cause severe illness in the adult population, particularly when adults have received the booster vaccine. Coverage of the booster vaccine is very high in Scotland. We now feel able to return to the previous measures.

Children are a particularly low risk group. Although they have fluctuated, rates of infection in the under 5s have been relatively lower than in other age groups. This is true both in the Office of National Statistics (ONS) survey data, which takes a sample of people and tests them for COVID-19, and in the data gathered from under 5s who come forward for tests. This is important because relying on testing data alone would not provide a good measure. In addition, COVID-19 is a mild or asymptomatic infection in the vast majority of children. The primary aim of isolating child contacts is to protect vulnerable adults, who are now well protected through both vaccinations, and now due to the milder impact of the predominant COVID strain circulating. From a wider harms perspective, we know that

repeated periods of self-isolation can be detrimental to children’s development and can affect learning and speech and language development, and lead to mental health problems as well as higher levels of obesity.

The rationale for not requiring children under 5 to take a test when they are a COVID contact:

Lateral Flow Device (LFD) kits have become easier to use – these now only require a nasal swab and take 15/20 minutes to provide a result. It is recommended that children under 5 take an LFD test when they have been in contact with a COVID-19 case as a precaution. However, it may not always be practical for a young child to do a test and in some cases, the experience could be distressing for a very young child, so testing is not a requirement. LFD tests are good at detecting infections, especially when infections are common in the community as they currently are.

If a child aged under 5 does show any symptoms of COVID they should book a PCR test: [Coronavirus \(COVID-19\): Get a PCR test if you have symptoms | NHS inform](#).

Low level of risk for COVID transmission in childcare settings:

The risk of transmission is low within childcare settings. A recently published analysis that pooled together high-quality studies on transmission of COVID-19 in educational settings found that transmission occurred to less than 1% of contacts in educational settings. The study also found that levels of infections within education settings (day-care, nursery and schools) broadly reflect levels of community infection. Throughout the pandemic we have seen higher numbers of cases present in ELC settings when community transmission is high, but there is no evidence of increased or disproportionate transmission within these settings when compared to the wider community.

The effect of Omicron variant on children:

While evidence is still emerging, all the indications so far are that Omicron remains a mild or asymptomatic infection in the very large majority of children. Although more children are being admitted to hospital with COVID-19, or having a COVID-19 infection identified at the point of admission, this is due to the larger number of cases and the general increase in child admissions during winter, not due to any increase in severity. In Scotland the proportion of cases in children that require hospital level care remains steady, indicating that infections are no more severe.

The Royal College of Paediatricians and Child Health (RCPCH) have issued a statement to reinforce this message that paediatricians are not reporting Omicron to be a more serious or severe disease in children and young people in the UK. [RCPCH comments on reports of increased admissions of under 5s in hospital with COVID-19 | RCPCH](#)

Guidance on funded childminders accepting close contacts aged under 5:

The Scottish Childminding Association had previously approached the Scottish Government about whether funded childminders should be expected to accept close contacts aged under 5 without first requiring them to return a negative test before attending the setting. The following clarification of the Scottish Government guidance to support the safe operation of childminding settings may be helpful.

The national policy is that close contacts aged under 5 should be encouraged, but are not required, to take an LFD test following identification as a close contact and can continue to attend childcare settings provided they do not develop any symptoms of Covid-19. This reflects the lower risks of infection and transmission in this age group, the fact that younger children may find it harder to tolerate testing and the significant and sustained educational harms that can result from self-isolation.

The Advisory Sub-Group on Education and Children's Issues reviewed the policy at its meeting on [21 September](#). The Sub-Group agreed to maintain the current advice on contacts and self-isolation for asymptomatic under 5s in ELC but to undertake a regular review of evidence on this issue.

However, the Covid-19 Safety [Guidance for Childminders](#) also makes clear that childminders must regularly risk assess their settings, and may therefore review, on a case by case basis, the risks associated with accepting a close contact aged under 5 without requiring them to have negative LFD tests. If the individual circumstances highlight a heightened risk this may provide a rationale for asking that the child takes an LFD test.