



## Guidance for Re-Opening of Preschools and Kindergartens post- COVID19



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## BACKGROUND

UNICEF is actively working with governments to support their efforts in assessing and deciding when and how to re-open preschools and kindergartens. Deciding to partially or fully reopen preschools should be guided by a risk-based approach to maximize the educational, developmental and health benefit for children, teachers, staff, and the wider community, and help prevent a new outbreak of COVID-19 in the community<sup>i</sup>. In a recent framework for reopening schools, UNICEF and partners highlight six key dimensions to consider when planning for re-opening: policy, financing, safe operations, learning, reaching the most marginalized and wellbeing/protection.<sup>ii</sup> WHO has also recently published guidance with helpful considerations for re-opening of schools in general based on careful risk assessment of epidemiological factors and health system capacities, among other issues.<sup>iii</sup>

Preschools and early childhood development (ECD) centers are unique in their educational approach and are among the first to be considered for re-opening. In many countries, high quality remote learning for preschoolers has not been possible, especially for marginalized groups, thus while governments can extend schooling online for older children, decision to re-open kindergartens might come before decisions to reopen primary or secondary schools. Given the role preschools serve in supporting not only children but also the ability of parents to return back to work, the loosening of lockdowns also means young children will need care urgently as their parents return to work.

**This guidance note builds on prior guidance but is specific to preschools and kindergartens, as these institutions are unique in their pedagogical approach and set up specific to young children, and their dual focus on nurturing care and learning. The note outlines key overarching principles as well as practical measures that should be taken into account when re-opening of preschools and kindergartens, specifically for children three years and above<sup>iv</sup>.**

## GUIDING PRINCIPLES FOR RE-OPENING OF PRESCHOOLS and KINDERGARTENS

A set of overarching guiding principles can help decision-makers in planning for and implementing the re-opening of preschools and kindergartens. These principles are anchored in the need to strike the right balance between, on the one hand, supporting effectively the learning and wellbeing of young children, and on the other hand, ensuring the health, hygiene and safety of children staff and the community at large.

- 1. Take time to plan and prepare for re-opening of preschools.** Avoid rushing the re-opening of preschools without a proper plan in place for how different aspects of re-opening will be handled, including learning arrangements, shifts, hygiene protocols etc. A *whole pre-school approach* will be most effective – including communication and support to caregivers, teachers, school administration, community and local government. Training for educators prior to re-opening on what is expected of them and how they can implement adapted curricula, as well as clear communication with parents, are among the key things to consider.
- 2. Take the scare out of protecting children.** Actions to keep children safe are essential but the preschool environments shouldn't start looking like hospitals. The past months have been unsettling for children (all have experienced changes in routines, confusing information, etc.). More than ever, children will need secure, enjoyable, and stimulating environments. Re-opening preschools/kindergartens, thus, entails bringing children back to some level of normalcy and routine as much as possible while ensuring protection in the environment where children play and learn in a reasonable manner.
- 3. Ensure preschools can maintain child-friendly and developmentally appropriate practices.** Keeping children a safe distance apart should not prevent social engagement, hands-on learning, and play that promotes all areas of development. Young children have not changed although

many aspects of our world have. Develop clear plan for ensuring meaningful child-focused play and instructional activities in the context of physical distancing, which would require adaptation of the curriculum and teacher practices that abide by developmental principles.

4. **Establish healthy hygiene behaviors and practices among young children**, including handwashing; covering coughs and sneezes; avoiding touching the face (it's a skill for lifetime). Integrate age appropriate information about the virus in the curriculum, and support children with developing good hygiene practices through daily routines– demonstrate effective handwashing and set aside specific times during the day when children can practice these behaviors.
5. **Capitalize on teachable moments** to help children understand why certain measures are taken in their environment and the role that they play in ensuring their health as well as that of their peers, teachers, families, communities. Explain to children why certain toys are removed, why the windows are open often, what games they can play safely outdoors and why. Find ways to help children feel some control over their environment.
6. **Partner with families to ensure good transition from home confinement to preschool attendance and ensure open ongoing communication.** Parent-staff relationships, even if preschools have tried to keep communication open, have been disrupted. Parents will also have anxieties about their own and children's safety. Communicate with families and parents clearly, positively and openly to avoid causing panic and fear among caregivers, ensure positive drop off and pick up experiences, and ongoing support children might need at home. This includes informing families of the protection measures and engaging them to support effective application of these measures.
7. **Prioritize training and support for preschool educators and staff.** Staff and educators will have ongoing needs for specific training as well as practical support to return to their classrooms. They will also have to balance between adherence to adapted health guidelines with guidance on developmentally appropriate pedagogical practices. Consider providing practical support on adapting curriculum activities and routines, providing regular check-ins between educators so they can share and process their experiences, as well as adding staff as needed to ensure teachers are not overwhelmed.
8. **Adopt a coordinated and integrated approach to ensure children's holistic needs are met upon return.** COVID-19 has multi-faceted impacts on young children. As vulnerable children come back to kindergartens, there may be protection, MHPSS, health, nutrition, and other issues that emerge and that may need to be addressed due to the COVID confinement. Ensure that preschool re-opening plans are inclusive of additional supports and/or referral mechanisms that may be needed, as well as take into account specific needs of vulnerable children and families, including those with disabilities.

## **SUGGESTED MEASURES FOR DECIDING TO RE-OPEN PRESCHOOLS & KINDERGARTENS**

- In deciding to re-open (or partially re-open) preschools, consider key factors, including the following<sup>v</sup>:
  - How preschool institutions, teachers and staff, parents and communities at large are coping with closures and the pandemic
  - Local situation and epidemiology of COVID-19 where the preschools are located

- Preschool/kindergarten setting and ability to maintain certain COVID-19 prevention and control measures
- Availability of testing (to conduct community surveillance and contact tracing); implementation of measures to limit the spread of the virus;
- Current understanding about COVID-19 transmission and severity in children, including emerging data on the role that children play in transmission of virus.
- Rapid response surveys among parents and preschool educators in particular are recommended to help inform the re-opening plans and provide critical information that needs to be taken into account – such as what % of caregivers need to return to work, what are caregivers biggest concerns to address, what % of preschool teachers are able to return to work etc.
- Consult with teachers and other education personnel and caregivers about their concerns and ideas for safe school reopening. Feedback on how their opinions and recommendations have been considered.
- Analyze the context-specific benefits and risks for re-opening of preschools and consider which preschools (or parts of preschool institutions) should be prioritized for reopening; in which locations, which risk mitigation measures within preschools and kindergarten communities should be prioritized; and areas of focus for further support to parents and teachers.
- Prepare for re-opening adequately. Avoid rapid decision making without sufficient time to prepare premises, re-design curriculum, if needed, support staff, parents and ensure smooth transition of children to new environments.

## **SUGGESTED MEASURES FOR ENSURING SAFE OPERATIONS OF PRESCHOOLS<sup>vi</sup>**

### **Daily hygiene and health practices at preschools and kindergartens**

- Schedule regular cleaning of the preschool classrooms and environment daily, including toilets, with water and soap/detergent and disinfectant<sup>vii</sup>.
- Clean and disinfect frequently touched surfaces such as door handles, tables, toys, supplies, light switches, doorframes, play equipment, teaching aids used by children.
- When feasible, staff members should wear face coverings within the preschool. Face masks for young children are not recommended and cloth face coverings should NOT be put on babies and children under age two under no circumstances because of the danger of suffocation.
- Educate young children about COVID-19 prevention- this includes appropriate and frequent hand hygiene, respiratory hygiene, as well as symptoms of COVID-19 children can be aware of.
  - Develop a way to track hand washing and reward for frequent/timely hand washing (sing a song while washing hands to practice recommended 20 second duration).
  - Use puppets or dolls to demonstrate symptoms (sneezing, coughing, fever) what to do if they feel sick (i.e. their head hurts, their stomach hurts, they feel hot or tired).
- Educate all staff about COVID-19 prevention- this includes appropriate and frequent hand hygiene, respiratory hygiene, mask use by staff if mandated, symptoms of COVID-19 and what to do if a child feels sick.
- Create a schedule for frequent hand hygiene as a part of children's and staff daily routine, and provide sufficient alcohol-based rub or soap and clean water at preschool entrances and throughout the preschool premises. Consider visual posters in classrooms for children and staff to see and be reminded.
- Increase air flow and ventilation where climate allows within rooms.
- Ensure trash is removed daily and disposed of appropriately.

### **Safety and hygiene related to preparation and administration of pre-school meals<sup>viii</sup>**

- Enforce compliance with national food safety legislation and principles of proper hygiene and food safety by food handlers when purchasing, delivering, storing, preparing and distributing meals.

- Display visual reminders on proper food preparation hygiene principles, including the daily cleaning and disinfection of food preparation surfaces, kitchens and eating areas as well as cooking tools and eating utensils.
- Ensure food handlers have access to cleaning and disinfection supplies and material and monitor proper execution, including regular handwashing. Where appropriate, provide preventive material (masks and gloves).
- Ensure specific measures are in place to temporarily restrict staff members suffering an infectious illness/disease from food production or preparation areas. This is particularly relevant if they develop symptoms of fever.
- Discontinue buffet-style food options and offer individual food servings, whenever possible.
- Meals can be arranged in the dining room or other rooms with larger space such as gym, library and other common areas. Try to keep the distance between children as large as possible given the number of children and the size of the dining room. Meals can also be organized in the room where the children stay in a way that the food is divided into portions in advance.
- Safe distance can be considered between the children as they queue to get the food, whenever possible make arrangements that the same children eat together.
- Minimize contamination risks. Remind children not to share or touch anyone else's food or drinks and discourage children from sharing utensils, food, etc.
- Limit other persons (for example, for cleaning, repairing or bringing food) entering the space used for dining as long as the children are in it.

### **Managing a sick child or staff member**

- Communicate to staff the importance of being vigilant for symptoms and staying in touch with facility management if or when they start to feel sick.
- On arrival and departure from work, daily measurement of temperature is recommended for all employees with a non-contact thermometer, as well as determining whether they have respiratory symptoms or signs of other infectious diseases.
- Staff with increased body temperature, respiratory symptoms and other symptoms of infectious disease should not come to work, take care of children, or come to the premises of the institution.
- The preschool management should have in place a replacement scheme for staff that is activated in cases of illness
- Establish procedures to ensure children and staff who come to the preschool center sick or become sick while at preschool are sent home as soon as possible.
- Keep sick children and staff separate from well children and staff until they can be sent home. Follow the appropriate national guidelines on this matter.
- Consider the need for record keeping of the children recorded with increased body temperature and onset of other symptoms while in preschool to support tracing of contacts in case that COVID-19 is confirmed.

## **SUGGESTED MEASURES FOR ENSURING CHILD WELLBEING & DEVELOPMENT**

### **Physical distancing in preschools**

- Assess what can be done within reason to limit direct physical contact between children, keeping in mind developmental principles and the fact that young children are by nature physical and social beings.
- Consider opening preschools in shifts to limit number of children per group at any time. Half of the children can attend in the morning, the other half in the afternoon.
- Consider increasing the number of teachers, if possible, to allow for fewer children per classroom (if space is available).

- Assess the possibility to maintain a distance of at least 1 meter<sup>x</sup> between everyone present at school – this includes between educator and children and between children. It is important to highlight that young children need care as much as they need learning and instruction. In the context of provision of care (for example, helping a child with changing clothes, supporting them with feeding, or ensuring emotional comfort when a child is in distress) it may not be possible or advisable to maintain physical distancing. Educators and preschool managers should exercise discretion and adhere to developmental principles when coming to agreement on how to reasonably keep distance between staff and children.
- Discuss and introduce with children and staff non-contact greetings. Consider making these greetings fun and child-friendly, like saying hello in sign language, giving the peace sign, waving the hand, giving a wink, etc.
- Increase spacing between tables, chairs, or spots on the carpet where children sit.
- Stagger recesses/breaks so that smaller groups of children are playing at once on the playground or shared spaces.
- Limit mixing of classes and groups of children. For example, children in a small group or classroom will stay in the same group/classroom with the same teachers throughout the day, without mixing with children and educators from other groups.
- If possible, at nap time, ensure that children’s naptimes (or cribs) are spaced out as much as possible, depending on space available. Consider placing children head to toe in order to further reduce the potential for viral spread.

### **Arrangements for learning**

- Move lessons and activities outdoors as much as possible, weather permitting. Young children love being outdoors, and it is safer for them to learn outside than inside at the moment. Consider adapting the curriculum and instruction so it can be delivered outdoors- for example, using outdoor equipment and nature as teaching/learning materials (conducting circle time outdoors, learning about nature, etc.), enhancing learning experiences with outdoor physical activity (gross motor play, dance, sports, etc.).
- Ventilate rooms as much as possible throughout the day; set up the space for learning in a way that respects space between children while still makes it feel like a community – for example, designate sitting or standing spots (using different materials like tape, circle spots, walking rope with handles, etc.)
- Split children into smaller groups or 2-3 children to support interaction between children while limiting large group activity.
- Adapt curriculum and use creative pedagogical practices to ensure playful learning experiences around the pandemic situation (for example, project-based learning building on children’s experience with the pandemic; using imaginary play to help children cope with stress and promote resilience; using teachable moments to help children learn about the pandemic and their role in ensuring public health)
- Balance individual learning activities with small group interactions; using creativity to mix individual and group interactions (for example, individual reflection/work, followed by “turn and show your neighbour”)

### **Toys, materials, games and routines**

- Toys and materials that are hard to sanitize or clean need to be removed – this includes soft toys for example. But many materials and games can remain in use if children are instructed to wash hands before and after their use. Instruct children to avoid putting toys/materials in their mouths.
- Setting up individual cubbies for each child with markers, scissors, crayons that each child can use is a good way to encourage continued creativity and art making without the need to share these between children.

- Focus on imaginative play, physical games that can respect some social distancing, singing, individual art projects, etc.
- Games and projects where each child can contribute individually (one by one) will work great – i.e. let's all make a story as a class, taking turns; children taking turns to add to a mural painting; etc.
- Rely on interactive read alouds and whole class entertainment activities such as a puppet show by the teacher, or a new song everyone can learn.
- Children's books, like other paper-based materials such as mail or envelopes, are not considered a high risk for transmission and do not need additional cleaning or disinfection procedures.
- Avoid mixing toys between classrooms and groups of children before they are washed and/or disinfected

## SUGGESTED MEASURES FOR ENSURING PARENTAL SUPPORT AND COMMUNICATION

- Inform parents about the measures the preschool is putting in place and ask for cooperation to report any cases of COVID-19 that occur in the household. If someone in the household is suspected to have COVID-19, instruct parents to keep the child home and inform the preschool.
- Enforce the policy of "staying at home if unwell" for children with symptoms. If possible, connect with local organizations to provide home care support and ensure communication between home and preschool. Communicate to parents the importance of measuring temperature to both him/herself and child regularly and keeping children home in case of higher temperature is recorded.
- Prepare clear drop off and pick up procedures that don't create panic among families and children; Children need reassurance from their caregivers and teachers after being away from preschool for weeks at a time. Minimize stress and trauma that might arise for children from "curb side drop offs".
- Consider staggering arrival and drop off times and/or have childcare providers come outside the facility to pick up the children as they arrive. Ideally, the same parent/designated person should drop off and pick up the child. Advise against crowding during school pick-up or day care, and if possible, avoid pick up by older family or community members (e.g. grandparents).
- Create a checklist for parents to decide whether children can go to kindergarten, with due consideration for the local epidemiology of COVID-19. The checklist could include:
  - Underlying medical conditions and vulnerabilities of children and/or family members;
  - Recent illness or symptoms suggestive of COVID-19; Special circumstances in the home environment, to tailor support as needed; Consider helpful posters or visual reminders for parents around the school and at drop off.
- Strengthen communication and coordination mechanisms that promote dialogue and engagement with parents regularly, to alleviate stress, anxiety and ensure continuity for children between home and school. Support teachers and management to send ongoing positive communication to parents.
- Check in regularly with families on how they and their children are feeling. Develop referral mechanisms for families with psychosocial support needs.

## SUGGESTED MEASURES FOR STAFF TRAINING AND SUPPORT

- Policies should protect staff, teachers and students who are at high risk due to age or underlying medical conditions, with plans to cover absent teachers and continue remote education to support students unable to attend school, accommodating individual circumstances to the extent possible. Consider flexible leave policies and practices.

- Instruct employees on the obligation to monitor their own health and the condition of children and to adhere to procedures in accordance with the recommendations related to the prevention of COVID-19 (including respect for social distance and use of personal protective equipment)
- Train administrative staff and teachers on implementing non-negotiable hygiene and safety practices and increase staff at preschools as needed. Cleaning staff, staff preparing food etc. should also be trained on disinfection and be equipped with personal protection equipment to the extent possible.
- Support teachers to adapt the curriculum and daily routine of children effectively, including re-thinking how whole class activities and games can take place, how to utilize outdoor lessons/time, etc.
- Improve competencies of pre-school teachers to support socio-emotional needs of children. Equip teachers to deal with children’s mental health and psychosocial (MHPSS) needs. Help teachers understand that, like the adults, most children are already unsettled and stressed and this transition initially will be hard. Behavior challenges are to be expected. Training efforts should explicitly improve teachers’ ability to meet children’s basic social-emotional needs, particularly in kindergartens with a high proportion of at-risk students.
- Teachers should be trained to identify age-related behavioral and cognitive changes and provide age-appropriate learning support.
- Check in regularly with teachers and staff and support their mental health and psychosocial needs.

## CONCLUSION

In the post-COVID re-opening of preschools, the broader challenge for program managers, directors, teachers, and families will be to work together to *not just balance but integrate* the need for adherence to adapted and reasonable national public health guidelines with the creation of a secure, enjoyable, stimulating environment that promotes physical health, emotional safety, social connections, and engaged learning for young children. Inclusive and early collaboration and communication between all stakeholders will be key to implement necessary measures. It will be important to maintain flexibility and modify approaches as needed, and to ensure learning and sharing of good practices<sup>x</sup>.

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### References and Endnotes:

<sup>i</sup> *Framework for reopening schools*, April 2020. <https://www.unicef.org/media/68366/file/Framework-for-reopening-schools-2020.pdf>

<sup>ii</sup> *Framework for reopening schools*, April 2020. <https://www.unicef.org/media/68366/file/Framework-for-reopening-schools-2020.pdf>

<sup>iii</sup> *Considerations for school-related public health measures in the context of COVID-19*, May 2020. <https://www.who.int/publications-detail/considerations-for-school-related-public-health-measures-in-the-context-of-covid-19>

<sup>iv</sup> While the principles and measures described in this guidance note are also applicable to re-opening daycare centers and creches serving children 0-3 years, these younger children require additional measures and considerations, especially in terms of balancing physical distancing with nurturing care and support.

<sup>v</sup> Adapted from *Considerations for school-related public health measures in the context of COVID-19*, May 2020. <https://www.who.int/publications-detail/considerations-for-school-related-public-health-measures-in-the-context-of-covid-19>

<sup>vi</sup> Suggested measures adapted from *Considerations for school-related public health measures in the context of COVID-19*, May 2020. <https://www.who.int/publications-detail/considerations-for-school-related-public-health-measures-in-the-context-of-covid-19>



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<sup>vii</sup> WHO recommends 70% ethyl alcohol to disinfect small surface areas and equipment, or sodium hypochlorite 0.1% for disinfecting surfaces.

<sup>viii</sup> Although it is unlikely that the virus is transmitted through food, it is still critical to guarantee compliance of food handlers and other relevant staff with basic food safety recommendations when preparing meals. This is also necessary to prevent any foodborne illness which could further complicate the response to COVID-19 or make weakens children's immune system.

<sup>ix</sup> *Considerations for school-related public health measures in the context of COVID-19*, May 2020.

<https://www.who.int/publications-detail/considerations-for-school-related-public-health-measures-in-the-context-of-covid-19>

<sup>x</sup> Ibid

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