

Covid-19 Education Settings Resource Pack

Interim Guidance

**For Early Years/Nurseries,
Childminders, Primary Schools,
Secondary Schools and SEND
settings**

London Coronavirus Response Centre
Public Health England, London

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PLEASE NOTE APPENDICES 1, 3, 4 and 5 have also been shared as separate attachments for use by schools.

1. What this pack is for

Headteachers, Early Years leads (including children centres, nurseries and childminders), and their staff have worked tirelessly and to extreme lengths during these challenging times. They have not only maintained the education and welfare needs of children, but also supported Public Health measures such as risk assessments and contact tracing, as well as providing wider support to anxious families and communities during the current pandemic.

The Department for Education, Local Authorities, Health Protection Teams (HPT) and the London Coronavirus Response Cell (LCRC) in London have been supporting school and Early Year settings with their response to COVID-19 cases. As these have become more frequent, and response time has increased, the HPT/LCRC recognises the need to enable early years and schools to manage their own responses in a timely manner, whilst ensuring that support is available for them in managing the most complex school situations. This pack has been put together by the LCRC to simplify this process, by providing the information and resources schools and early years settings need to:

- Carry out on-site risk assessments confidently
- Send communications to parents
- Seek advice from other resources
- Know when to review the situation or seek further support from the Department for Education helpline, HPT or LCRC

Please note, the information in this pack is accurate at the time of its writing, but this is a rapidly evolving policy area, and users should also check for updates on a regular basis by using embedded hyperlinks and the Government websites. We have signposted areas in which we expect developments – please treat these with caution.

The advice within this document should be used in conjunction with guidance from other sources, such as:



- Your Local Authority public health, social care and education teams
- The Department for Education guidance for schools and early years, and helpline
- Other educational organisations and resources, such as the GLA's Healthy Schools London, the Association of School and College Leaders (ASCL) or similar
- Public Health England's published guidance, including [stay at home guidance](#) and [guidance for non-household contacts](#).

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What happens if there is a confirmed case of COVID-19 in our Primary or Early Years Setting?

Did the positive student/staff member attend school during the infectious period: 2 days before symptom onset (or test date if asymptomatic) to 10 days after?




-  **NO** – no further action required by school beyond supporting student(s) as necessary during self-isolation
-  **YES** – school carries out an on-site risk assessment using checklist

- Case should already be isolating at home. They should remain in isolation until 10 days have passed from symptom onset.
- The case's household (including siblings that attend other schools) should isolate for 10 full days

The school carries out on-site risk assessment to identify potential **contacts** during this period at:


-  large/small group sessions
-  additional on-site/academic activities e.g. clubs/societies
-  events/trips

To identify contacts, use the **risk assessment checklist**, and:

-  Attendance records
-  Identify class and other bubbles
-  Speak to the child/teacher as needed

- Contacts are informed to self-isolate for 10 full days from date of last contact
- Template letters for parents and staff.
- The **wider school** is sent an 'inform and advise' letter

Who is a contact?

 **Direct close contacts:** face-to-face contact for any length of time (e.g. coughed on or spoken to) OR within 1 metre for ≥ 1 minute

 **Proximity contacts:** ≤ 2 m for ≥ 15 minutes

 **Travel contacts:** shared small vehicle together

If the following criteria are met, review infection control measures (section 4.1) and only contact LCRC/HPT if you have a specific query:

- $\geq 10\%$ of a bubble is affected within 14 days
- $\geq 10\%$ of staff are affected within 14 days
- ≥ 3 bubbles are affected
- There have been any admissions to hospital
- Your school is a SEND school
- The case is a boarder in a residential school

If you need advice or support you can access the **government schools guidance online** or contact the DfE helpline on **0800 046 8687**



What happens if there is a confirmed case of COVID-19 in our Secondary School?

Did the positive student/staff member attend school during the infectious period: 2 days before symptom onset (or test date if asymptomatic) to 10 days after?

- ✓ **NO** – no further action required by school beyond supporting student(s) as necessary during self-isolation
- ✗ **YES** – school carries out an on-site risk assessment using checklist

- Case should already be isolating at home. They should remain in isolation until 10 days have passed from symptom onset.
- The case's household (including siblings that attend other schools) should isolate for 10 full days

The school carries out on-site risk assessment to identify potential **contacts** during this period at:

- large/small group sessions
- additional on-site/academic activities e.g. clubs/societies
- events/trips

To identify contacts, use the **risk assessment checklist**, and:

- Attendance records
- Seating plans/charts (if available)
- Speak to the student (as necessary)

- Contacts are informed to self-isolate for 10 full days from date of last contact
- The **wider school** is sent an 'inform and advise' letter

Who is a contact?



Direct close contacts: face-to-face contact for any length of time (e.g. being coughed on/spoken to) OR within 1 metre for ≥ 1 min



Proximity contacts: ≤ 2 m for ≥ 15 minutes







Travel contacts: shared small vehicle together

If the following criteria are met, review infection control measures (section 4.1) and only contact LCRC/HPT if you have a specific query:

- ≥ 5 students are affected in one school year within 14 days
- $\geq 10\%$ of staff are affected within 14 days
- ≥ 3 bubbles are affected
- There have been any admissions to hospital
- Your school is a SEND school
- The case is a boarder in a residential school

If you need advice or support you can access the **government schools guidance online** or contact the DfE helpline on **0800 046 8687**

**Note that in a small number of settings, serial testing of contacts is currently being piloted*

| What is the situation? | What should be done? | When can the child go back to school or nursery? |
|---|--|---|
| <p>A child has at least one symptom of COVID-19</p>  | <ul style="list-style-type: none"> • The child must not go to school or nursery • The child should have a test as soon as possible • The whole household should self-isolate while waiting for the test result and should not go out • They should let the school or nursery know about the result of the test | <ul style="list-style-type: none"> • 10 full days after the symptoms started if the test result is positive • If the test result is negative, the child can return to school or nursery (as long as they are well and they are not a contact of someone with COVID-19). |
| <p>The school or nursery has identified a child as a close contact of a person with COVID-19</p>  | <ul style="list-style-type: none"> • The child should not go to school/nursery • The child should self-isolate for 10 days • If the child has symptoms they should get a test • The rest of the household does not need to self-isolate unless your child goes on to develop symptoms or anyone in the house has a positive COVID-19 test for any reason | <ul style="list-style-type: none"> • When the child has completed the 10 full days of self-isolation, as recommended by the school or nursery |
| <p>NHS Test and Trace has identified a child as a close contact of a person with COVID-19 outside of school or nursery</p>  | <ul style="list-style-type: none"> • The child must not go to school or nursery • The child should self-isolate for 10 full days • If a child has symptoms they should get tested • They should continue to self-isolate even if they test negative during those 10 days • The rest of the household does not need to self-isolate unless they have also been in contact with the case, or your child goes on to develop symptoms or anyone at home has a positive COVID-19 test for any reason | <ul style="list-style-type: none"> • When the child has completed the 10 full days of self-isolation, as recommended by NHS Test and Trace |
| <p>Someone else in a household has symptoms of COVID-19</p>  | <ul style="list-style-type: none"> • The child must not go to school or nursery • The household member with symptoms should have a test as soon as possible • The whole household should self-isolate whilst waiting the test result • No member of the family should be at school/work whilst awaiting a test result | <ul style="list-style-type: none"> • If the household member tests negative, and the child does not have symptoms of COVID-19, the child can return to school or nursery • If the household member tests positive, see below |
| <p>Someone else in a household has tested positive for COVID-19</p>  | <ul style="list-style-type: none"> • The child must not go to school or nursery • The whole household should self-isolate for 10 days from the time that the person with the positive test started having symptoms (or from the date of the test if no symptoms), even if anyone else in the household tests negative during those 10 days | <ul style="list-style-type: none"> • When the child has completed the 10 days of self-isolation • If the child develops symptoms during the 10 full days, they will need to get a test and self-isolate for a further 10 days from the date that symptoms started |
| <p>Tests for COVID-19</p> <ul style="list-style-type: none"> • Polymerase Chain Reaction (PCR) tests: PCR tests detect the RNA (ribonucleic acid, the genetic material) of a virus and are the most reliable COVID-19 tests. It takes some time to get the results because they are usually processed in a laboratory. • Lateral Flow Device (LFD) tests: LFD tests are simple and quick to use and mainly used in people who do not have symptoms of COVID-19. | | |

Last updated 27/04/2021

2. Background and key definitions

Coronaviruses are a family of viruses that mainly cause lung diseases. The name of the current coronavirus is SARS-CoV-2, and the disease that it causes is called COVID-19.

The three main symptoms of COVID-19 are¹:

- **A high temperature.** This means you feel hot to touch on your chest or back (you do not need to measure your temperature, but if you do, we would define a high temperature as 37.8 degrees Celsius or above).
- **A new continuous cough.** This means coughing a lot for more than an hour, or 3 or more coughing episodes in 24 hours (if you usually have a cough, it may be worse than usual).
- **A loss of, or change in, normal sense of taste or smell.**

An individual with ANY one of these three symptoms is advised to stay at home and get a test.

Diarrhoea/vomiting in children is most associated with viral gastroenteritis, though it may also be a minor symptom of COVID-19. At this point, diarrhoea and vomiting are not included in the symptoms which are required to obtain a test for COVID-19. If a child has symptoms of diarrhoea/ vomiting they must be excluded from school for a period of 48 hours after their symptoms resolve, as per standard public health practice for any diarrhoea or vomiting related symptoms (regardless of COVID-19). If they then develop symptoms, suggestive of COVID-19, then appropriate actions (request for test/isolation etc) are needed.

2.1 Disease course

Understanding the course of the disease can help us to reduce its spread. There are a few key time periods that you should know about:

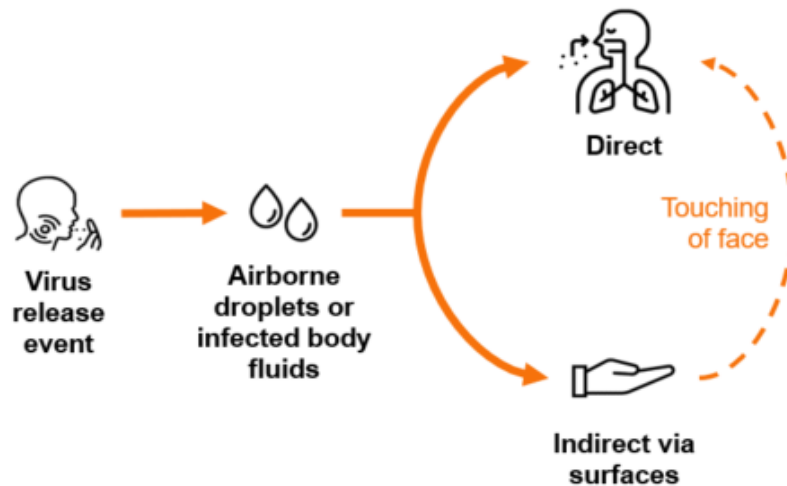
- **Incubation period:** the time between a person being infected and when they show symptoms.
 - For COVID-19, this is often around 5-6 days, but may be longer, which is why 10-day self-isolation periods are recommended.
- **Infectious period:** the time when a person who has COVID-19 can infect others, even if they don't have symptoms.
 - For COVID-19, this is from around **2 days before symptom onset (any of the three main symptoms), to 10 days after symptom onset.**
 - For asymptomatic people who test positive, we use from **2 days before the test until 10 days after** as the reference point.

A person is **no longer infectious if 10 full days have passed from symptom onset and their symptoms have resolved** (including being fever-free for 48 hours). Note that an ongoing cough or continued loss of taste or smell is not a sign that you are infectious and may continue for several weeks after the infection.

¹ See: <https://www.nhs.uk/conditions/coronavirus-covid-19/symptoms/>

2.2 Transmission

Transmission occurs from person to person after the virus is released from a person who is infected. It can then be transmitted to another person directly through the air, or indirectly by resting on a surface that another person touches.



We can break the chain of infection and keep protecting each other by remembering ‘hands, face, space’:

- **Hands:** wash your hands regularly for at least 20 seconds with soap and water
- **Face:** use a face covering when social distancing is not possible
- **Space:** try to keep your distance from those not in your household

In addition to these, key steps for schools and early years are:

- Promote good coughs/colds hygiene practices – **catch it, bin it, kill it**
- **Clean high-touch** surfaces regularly throughout the day by using normal cleaning products

2.3 Contacts

A ‘contact’ is a person who has been in close proximity with someone with COVID-19 during their infectious period² and is therefore at risk of infection. As well as cases, contacts must self-isolate. Contacts are defined in the following ways:

Direct contact:

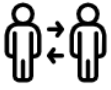


- Anyone who lives in the same household as a case
- Anyone who has had face to face contact with a case, for any length of time, including being coughed on or talked to

² As in section 2.1: this is taken as 2 days before onset of any of the three main symptoms of COVID-19 to 10 days after symptom onset. For asymptomatic people who test positive, we use from 2 days before the *test* until 10 days after as the reference point

- Anyone who has been within 1 metre of a case for one minute or longer

Proximity contact:



- Anyone who has been within two meters of a case for more than 15 minutes
- Anyone who has travelled in a small vehicle with a case

Contacts of contacts do not need to self-isolate. This means that household members of students or staff that are self-isolating because they are contacts of a case do not need to self-isolate themselves.

2.4 Bubbles

Bubbles help to identify contacts and aim to reduce the number of contacts per case. Within a bubble, there is potential for the entire group to be exposed, but the exposure should be limited within the bubble. Smaller bubbles will reduce the impact of positive cases. Remember that when finding contacts, you must consider ALL the bubbles that a case is part of – in class, in clubs, and on transport.

When planning bubble sizes and arrangements, please do consider what would happen if a single case was identified positive within that bubble.

In Early Years settings and Primary Schools, bubbles will often correspond to a single class, as we recognise that younger children will not be able to maintain social distancing.

In secondary schools, we are aware that ‘bubbles’ may need to be larger in order for schools to deliver the full range of subjects, but that older students are better able to social distance. For this reason, there are different approaches to risk assessment and the identification of contacts in primary and secondary school settings. This is described in more detail in the risk assessment checklist. **The default should NOT be to identify the whole class or bubble in secondary schools as potential contacts. The understanding is that older children should be better able to maintain social distancing.**

3. Testing for COVID-19

Two types of test are currently being used to detect if someone has COVID-19:

- Polymerase Chain Reaction (PCR) tests
- Lateral Flow Device (LFD) tests – also known as Lateral Flow Tests

PCR tests detect the RNA (ribonucleic acid, the genetic material) of a virus. PCR tests are the most reliable COVID-19 tests. It takes some time to get the results because they are usually processed in a laboratory.

LFD tests detect proteins in the coronavirus and work in a similar way to a pregnancy test. They are simple and quick to use. LFD tests are mainly used in people who do NOT have symptoms of COVID-19. These tests do not replace the current testing policy for those with symptoms. [Anyone with symptoms](#) (even if they recently had a negative LFD test result), should still self-isolate immediately according to government guidelines, and order a test online or visit a test site to take a polymerase chain reaction (PCR) test to check if they have the virus.

3.1 Asymptomatic testing in educational settings from March 2021

Please refer to accompanying **FAQs on the use and interpretation of Lateral Flow Device Testing** – which also includes information for SEND Specialist/Inclusive Settings. In addition,

Please visit the Government websites to keep yourself up to date with the latest guidance around asymptomatic testing in schools and colleges:

- [Guidance: Schools coronavirus \(COVID-19\) operational guidance -Updated 6 April 2021](#)
- [Guidance: Coronavirus \(COVID-19\) asymptomatic testing in schools and colleges - Updated 30 March 2021](#)
- [Guidance: Stay at home: guidance for households with possible or confirmed coronavirus \(COVID-19\) infection – Updated 30 March 2021](#)
- [Asymptomatic testing for staff in primary schools and nurseries](#)

[Position statement regarding daily contact testing in schools from PHE and NHS Test and Trace - GOV.UK](#)

For any questions on testing email RapidTesting.SCHOOLS@education.gov.uk, or call the DfE coronavirus helpline on 0800 046 8687 and selecting option 7. This form ([contact us form](#)) can be used to report issues related to asymptomatic testing in schools and colleges that cannot be resolved by the published guidance

3.2 What do you need to do in response to different test results?

CAUTION: Please note the information in this section is correct at the time of its publication. We understand that this is a rapidly changing area and we recommend you regularly visit the latest Government guidance for the most up to date information.

A person and their household should be self-isolating as soon as they have any of the three main symptoms of COVID-19 and whilst they are awaiting the results of the test.

A positive PCR test result means that the person who has been tested and their household must complete 10 full days of isolation. The isolation period starts immediately from when one of the three main [symptoms](#) started, or, if they did not have any symptoms, from when the first positive test was taken, for example if a positive LFD test was performed first. This means that if, for example, the symptoms started at any time on the 15th of the month (or if they did not have symptoms but the first positive COVID-19 test was taken on the 15th), the isolation period ends at 23:59 hrs. on the 25th of the month.

A positive LFD

Please refer to accompanying **FAQs on the use and interpretation of Lateral Flow Device Testing** for full detail. **An easy to read flowchart is also available on page 13.** In brief:

- A positive LFD test - For **staff member and pupils** who receive a positive LFD test at school or at **home**, would also need a confirmatory [PCR test](#). These individuals and their households must start their isolation period as soon as the LFD test is positive. The school would also need to identify their close contacts at school (during the infectious period). These close contacts would also need to self-isolate from the day of their last exposure to the case plus 10 full days. If the confirmatory PCR test is carried

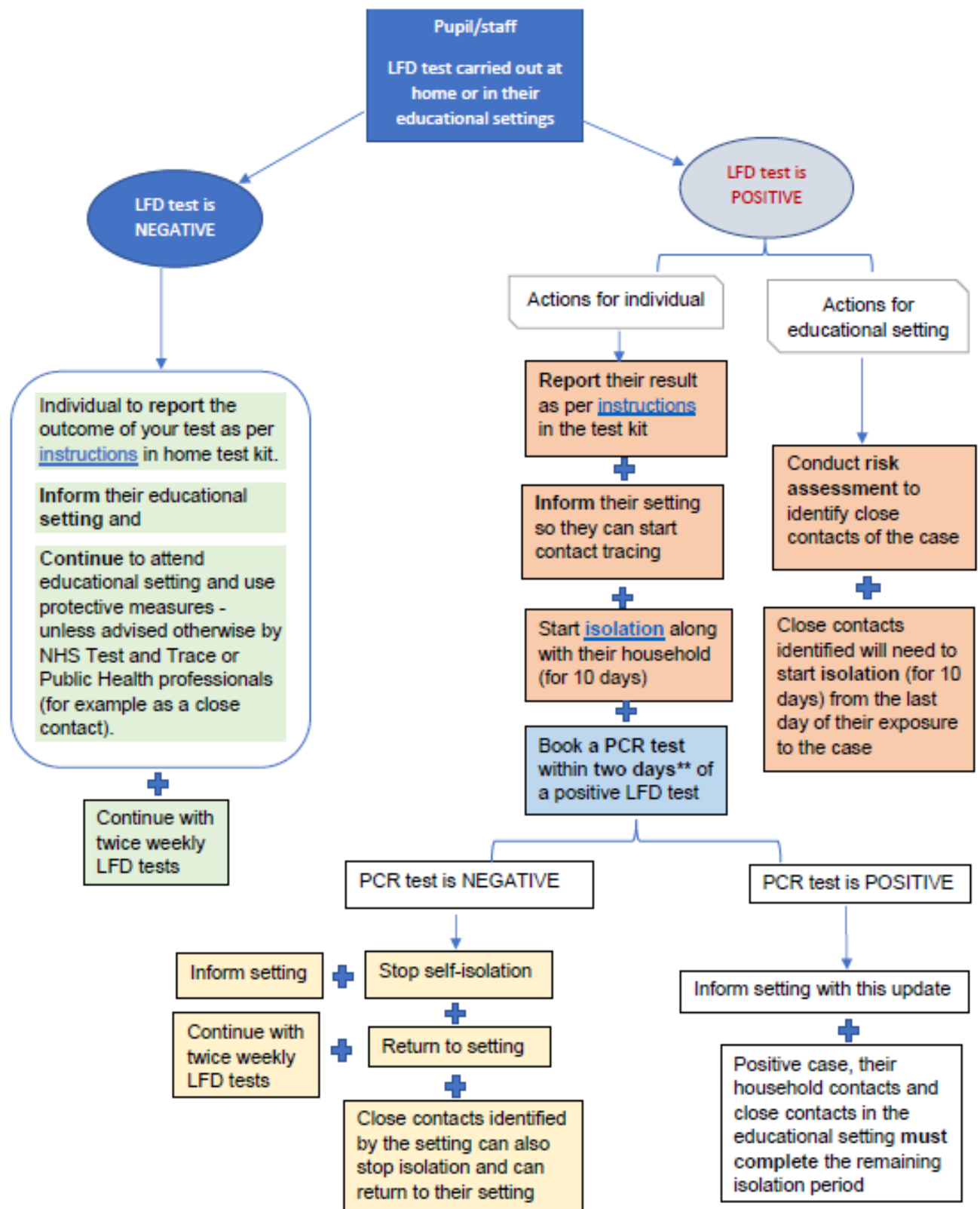
out within 2 days³ and it comes back as positive, then both (positive case and their contacts) would need to complete their remaining days of the isolation period which originally started on the date of the positive LFD test. If, however, this PCR test (carried out within two days) comes back as negative, then both the individual (their household) and their close contacts from school can stop isolation. **Please note, if this confirmatory PCR test is carried out after two days (then regardless of the new result), they would need to continue with the original isolation period that started with the positive LFD test previously.**

- In addition, if during their isolation period a confirmed case develops symptoms, then they would need to restart isolation period from the date when their symptoms started plus 10 full days. If any of the close contacts develop symptoms, then they would need to seek a PCR test – if PCR test comes back as positive then they would also need to restart their isolation period from the date when their symptoms started plus 10 full days. This means that if, for example, the symptoms started at any time on the 15th of the month (or if they did not have symptoms but the first positive LFD test was taken on the 15th), the isolation period ends at 23:59 hrs. on the 25th of the month. Their household also need to isolate for 10 days as well from the same date.

Further information on what to do if a pupil or student tests positive for coronavirus (COVID-19) using a lateral flow device can be found in the how to guide on the secure digital platform. Those affected should self-isolate immediately and follow the [guidance for households with possible or confirmed coronavirus \(COVID-19\) infection](#).

³ **Within two days** means the PCR should be **taken** on the day the LFD test was taken, the next day, or the following day. **For example:** An LFD test returns a positive result early Monday morning on the 15th of the month. The person has the rest of Monday 15th, or Tuesday 16th, or Wednesday 17th to **take** a PCR in order to be eligible for the rescind function in the event of a negative result.

Interpretation of asymptomatic LFD test results and linked actions (for individuals and their educational setting)



**** Within two days** means the PCR should be taken on the day the LFD test was taken, the next day, or the following day. For example: An LFD test returns a positive result early Monday morning on the 15th of the month. The person has the rest of Monday 15th, or Tuesday 16th, or Wednesday 17th to take a PCR in order to be eligible for the rescind function in the event of a negative

4 How to respond to cases of COVID-19 in your school or early years setting

You will be able to manage many of the situations that arise in your school or early years setting with support from this pack, as well as with the [government guidance for schools and early years settings](#). You can also refer to government guidance, including [stay at home guidance](#) and [guidance for non-household contacts](#).

The specific actions you need to take will vary depending on how many cases you have and the circumstances of your school. We have put together a [checklist](#) to assist you in the process (appendix 1) and outlined in the following pages various COVID-19 scenarios. There are also some worked examples in Appendix 6.

4.2 Managing a suspected or confirmed case in your setting

In general, you will need to take the following steps to manage a suspected or confirmed case of coronavirus in your setting:

1. Isolate case:

Advise that the child or staff member with symptoms suggestive of COVID-19 is tested, and that both they and their household must isolate whilst awaiting the test result.

- *If a test (and any required confirmatory test) is positive:* they must all continue to isolate for the remaining days of the full 10 days period and inform the school so that they can identify close contacts – (please see section 3.2 and the worked example in Appendix 6).

2. Identify contacts of positive cases:

- Check if the case was in your setting in the 2 days before their symptoms started (or 2 days before the test if they were asymptomatic)?
- Identify who was in contact with them during that time in the school or Early Years setting. (Other contacts outside the setting should be followed up by Test and Trace)

Use the risk assessment checklist (appendix 1) to help identify contacts who will need to self-isolate and provide them with the appropriate advice. *NB: If the confirmed case did not attend school during the infectious period (2 days prior to symptoms onset or the test if they had no symptoms), then no action is needed for contacts*

3. Share information with families:

Provide information to parents and staff as appropriate – please see template letters in appendix 3 and 4 (a and b).

4. Notifications

- a. Report to DfE and Ofsted as per mandatory requirements
- b. Report to Local Authority
- c. There is no formal requirement to report to HPT/LCRC. Formal notification under the Infectious Diseases regulations means that cases will be notified by the testing lab, so **schools/early years do not need to notify individual cases to PHE.**

5. Seek advice (if needed):

if you need advice, sources of support are in section 4.2.

6. Reaching a threshold number of cases in your setting.

The criteria for reaching the threshold are specified in box 1. We recognise that not all transmission can be prevented in school, and the enormous efforts schools have put into reducing transmission, but reaching the threshold is a moment for your review. When you reach a threshold number of cases this is a moment to take stock of the infection control measures you have put in place and to review your prevention measures. These include:

- a. Continue to identify close contacts of new cases and advise them to isolate for the required duration.
- b. Look over the general infection control measures and see whether there are any additional measures that may work in your setting. See box 2 for suggestions.
- c. Consider whether there are any areas where the infection has been passed on and how to prevent this in future. For instance, if you think that transmission has happened between students in the lunch queue, then what can you do to improve distancing, or if between staff, consider whether you can reduce contact in the staff room (if you are using one).
- d. Discuss any operational issues with the Local Authority.

There is no *requirement* to contact the LCRC/HPT when reaching the threshold but please do email the LCRC/HPT if you have any specific queries or specific requests of support when reaching the threshold, specifying clearly the question that you have (see also section 4.1 below). A template form is provided (appendix 5) and it will be easier to answer your question if you complete this.

Box 1: Threshold number of cases.

For Primary Schools or early years settings if:

- 10% (or more) of a bubble is affected within 14 days – for example, if there are 3 or more **confirmed** cases of COVID-19 in a bubble of 30 people
- 10% (or more) of staff are affected within 14 days – for example, if there are 6 or more confirmed cases of COVID-19 in a staff of 60
- 3 (or more) bubbles within your school contain at least one confirmed case
- There have been any **admissions** to hospital in your students or staff members due to COVID-19
- If your school is for children and young people with special educational needs and disability (SEND)
- If you have a case in a boarder at a residential school

For Secondary Schools if:

- 5 or more students are affected in a single school year within 14 days i.e. 5 or more **confirmed** cases
- 10% (or more) of staff are affected within 14 days – for example, if there are 6 or more confirmed cases of COVID-19 in a staff of 60
- 3 (or more) bubbles within your school contain at least one confirmed case
- There have been any admissions to hospital in your students or staff members due to COVID-19
- If your school is for children and young people with special educational needs and disability (SEND)
- If you have a case in a boarder at a residential school

Box 2: Infection control review suggestions

- Many of the new cases linked to your setting will have acquired their infection in the wider community including students/staff mixing in friendship groups outside school. **Please continue to encourage the school community to abide by all necessary restrictions.**
- Some transmission may inevitably be occurring in education settings and we would encourage you at this point, to review all your control measures:

Review your social distancing measures:

- To review your cleaning regimes and ensure they continue to be in line with national guidance
- Attempt to minimise mixing between groups of children, within larger bubbles, if possible
- To remind staff and children to wash their hand frequently
- Remind staff members to minimise mixing with other staff in communal areas
- To remind students about maintaining social distancing outside the classroom
- Ensure students continue to remain at their desks in class
- Remind (secondary age) students and staff to cover their face in enclosed spaces, especially where social distancing may be difficult and where they come into contact with people whom they don't usually meet

4.3 Sources of support

Please note that there is additional material in the appendix including additional advice and guidance on infection control (appendix 2), worked examples and scenarios (appendix 6) and specific information for SEND settings (appendix 7).

If schools or Early Years settings are confident in managing the risk assessment for all cases beneath the escalation thresholds, but require further support, there are a number of options. HPT/LCRC staff are happy to receive queries from schools seeking advice and will respond in priority order.

1. The Government Guidance

- You can consult the Government Guidance at any time by accessing the website here: <https://www.gov.uk/coronavirus/education-and-childcare>.
- **The Department for Education Helpline** Schools and colleges in England can also raise questions, concerns or report issues, via the DfE coronavirus helpline: 0800 046 8687 or at RapidTesting.SCHOOLS@education.gov.uk. This form ([contact us form](#)) can be used to report issues related to asymptomatic testing in schools and colleges that cannot be resolved by the published guidance or by calling the DfE coronavirus helpline on 0800 046 8687 and selecting option 7.

2. Your Local Authority

- Local Authority Public Health Teams in many boroughs are offering support to schools where they cannot access the HPT/LCRC or DfE.
- If you have operational concerns about keeping the school open due to large numbers of staff or students self-isolating, keep your local authority informed and they may be able to provide additional support.

3. London Coronavirus Response Cell (E: LCRC@phe.gov.uk, T: 0300 303 0450) or local Health Protection Team

- The HPT/LCRC is there for further advice and support for schools or Early Years settings if they have concerns or questions which are not answered by reading this pack or contacting the DfE helpline. This is particularly for settings with more complex cases: for example, SEND settings, if there is a case/s or if any of the cases are extremely unwell.
- HPT/LCRC will provide support through:
 - Discussing the check list and procedures
 - Reviewing infection prevention and control procedures within the school
 - Answering questions regarding complex situations
 - Advising SEND or residential settings for any cases that they have
- The HPT/LCRC is happy to receive emails from schools, as well as telephone calls. **We recommend that you contact the HPT/LCRC by sending an email** with your contact information, as **this is the quickest and most efficient way for our team to respond to you**. Due to the very high volume of calls experienced, cases will be prioritised, so please note that you might not get a response on the same day. SEND and residential settings will also be prioritised in this way. If you have previously spoken to us and need to call, then please give the call handler your HP Zone reference number and this will facilitate a response.
- To simplify the process, we have created an **email template**, with spaces for the information we require. The template can be found in Appendix 5.

4.3 COVID-19 scenarios

The following scenarios are designed to give you a broad overview of how to respond to various COVID-19 situations within your school. Use the **risk assessment checklist** to assist you with the management of confirmed cases (confirmed cases are cases with a positive coronavirus test). The **contact tracing questions** can help you identify contacts. The **'contacts letter'** and **'warn and inform letter'** is included in this resource pack (appendices 3 and 4). See also sections 4.1 (managing a suspected or confirmed case in your setting) and 4.2 (sources of support).

.1 Suspected case (staff or student)

| | |
|--------------------|--|
| Case | <ul style="list-style-type: none"> • If a staff member or child develops any of the three main symptoms of COVID-19, they must self-isolate and get a PCR test as soon as possible via the online portal or calling NHS 111. • All their household members who remain well must stay at home whilst waiting for the test result. Household members should not go to work, school or public areas and exercise should be taken within the home during that time. <ul style="list-style-type: none"> • If the test result is negative – if they are well and fever free for 48 hours they can return to the setting. • If the test result is positive – see table 4.3.2 and 4.3.3 below |
| Contacts | • No further actions |
| Escalation | • No further actions |
| Information | • No further actions |

4.3.2 Single confirmed case (primary school/Early Years)

| | |
|-------------|--|
| Case | <ul style="list-style-type: none"> • Asymptomatic staff with a positive LFD test needs to self-isolate in line with https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance/stay-at-home-guidance-for-households-with-possible-coronavirus-covid- |
|-------------|--|

| | |
|--------------------|--|
| | <p><u>19-infection</u>. (please note, primary school/Early years pupils are not offered LFD testing at present).</p> <ul style="list-style-type: none"> • They will also need to arrange a PCR test to confirm the result within 2 days of the LFD test. If the PCR test is taken within 2 days of the positive LFD test, and result of this PCR test is negative, then it overrides a positive LFD test and they can return to school. • Symptomatic staff/pupil: In this case, both symptomatic case and their household should isolate for 10 full days and book a PCR test. The isolation period includes the day symptoms started (or the day), and the next 10 full days. If the 10-day isolation period starts on the 15th of the month, their isolation period ends at 23:59 hrs. on the 25th. If, they took a PCR test without having any symptoms and it came back as positive then the isolation period starts from the day of the test. • Staff with a negative LFD test can continue to attend setting in line with routine system of controls already in place. |
| Contacts | <ul style="list-style-type: none"> • Identify close contacts of the case using the risk assessment checklist and contact tracing questions • Contacts of positive cases (for primary schools, this will usually be the class and teachers) should self-isolate for 10 full days • The isolation period for contacts in the educational setting includes the date of their last contact with the case and the next ten full days. This means that if, for example, the last contact with the case was at any time on the 15th of the month, the isolation period ends at 23:59 hrs on the 25th. The household members of these <u>contacts</u> do not need to isolate as they are considered as contacts of a contact at this stage |
| Escalation | <ul style="list-style-type: none"> • Department for Education helpline |
| Information | <ul style="list-style-type: none"> • Give information to parents and staff. Send warn and inform letter • Inform your Local Authority if required |

4.3.3 Single confirmed case (secondary school)

| | |
|-------------|--|
| Case | <ul style="list-style-type: none"> • Anyone with a positive LFD test should self-isolate immediately along with close contacts and other household members, in line with https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance/stay-at-home-guidance-for-households-with-possible-coronavirus-covid-19-infection. • They will also need to arrange a PCR test to confirm the result within 2 days of the LFD test. If the PCR test is taken within 2 days of the positive LFD test, and is negative, it overrides a positive LFD test and they can return to school. Please see below if this PCR test is positive. • A positive PCR test (regardless of it been carried out as a follow up to LFD test within 2 days or due to the person having symptoms) would require the individual and their households to isolate for 10 full days. If the 10-day isolation period starts on the 15th of the month, their isolation period ends at 23:59 hrs. on the 25th. If, they took a PCR test without having any symptoms and it came back as positive then the isolation period starts from the day of the test. • The case's household (including siblings that attend other schools) should isolate for 10 full days. For household members the isolation period includes the day the first person in the household had symptoms (or the day their test was taken if they did not have symptoms, whether this was an LFD or PCR test), and the next 10 full days. This means that if, for example, if the 10-day isolation period starts on the 15th of the month, their isolation period ends at 23:59 hrs. on the 25th |
|-------------|--|

| | |
|--------------------|---|
| Contacts | <ul style="list-style-type: none"> Identify close contacts of the case using the risk assessment checklist and contact tracing questions Contacts (direct, proximity, friendship) should self- isolate for 10 full days The isolation period for contacts in the educational setting includes the date of last contact with the case and the next ten full days. This means that if, for example, the last contact with the case was at any time on the 15th of the month, the isolation period ends at 23:59 hrs on the 25th The household members of these contacts do not need to isolate as they are considered as contacts of a contact at this stage |
| Escalation | <ul style="list-style-type: none"> Department for Education helpline |
| Information | <ul style="list-style-type: none"> Give information to parents and staff. Send warn and inform letter Inform your Local Authority if required |

4.3.4 More than one confirmed case or a complex case

| | |
|--------------------|--|
| Case | <ul style="list-style-type: none"> Anyone with a positive LFD test should self-isolate immediately along with close contacts and other household members, in line with https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance/stay-at-home-guidance-for-households-with-possible-coronavirus-covid-19-infection. They will also need to arrange a PCR test to confirm the result within 2 days of the LFD test. If the PCR test is taken within 2 days of the positive LFD test, and is negative, it overrides a positive LFD test and they can return to school. Anyone with a positive PCR test will need to isolate for 10 full days. The isolation period includes the day symptoms started (or the day the test was taken if you do not have symptoms), and the next 10 full days. If the 10-day isolation period starts on the 15th of the month, their isolation period ends at 23:59 hrs. on the 25th. The case's household (including siblings that attend other schools) should isolate for 10 full days. For household members the isolation period includes the day the first person in the household's symptoms started (or the day their test was taken if they did not have symptoms, whether this was an LFD or PCR test), and the next 10 full days. This means that if, for example, if the 10-day isolation period starts on the 15th of the month, their isolation period ends at 23:59 hrs. on the 25th |
| Contacts | <ul style="list-style-type: none"> Identify close contacts of the case using the risk assessment checklist and contact tracing questions Contacts (direct, proximity, and friendship) or bubble isolate for 10 full days The isolation period includes the date of last contact with the case and the next ten full days. This means that if, for example, the last contact with the case was at any time on the 15th of the month, the isolation period ends at 23:59 hrs on the 25th |
| Escalation | <ul style="list-style-type: none"> Department for Education helpline If the threshold criteria have been met (see box 1), this is a moment to take stock of the infection control measures you have put in place and to review prevention measures. You are not required to contact the HPT/London Coronavirus Response Cell (LCRC) but you can for any specific additional queries that you have Queries that are specific to the operational and logistical nature should be escalated to the local authority public health and educational teams |
| Information | <ul style="list-style-type: none"> Give information to parents and staff. Send inform and advise letter Inform your local authority if required |

4.3.5 Summary of scenarios for managing contacts in school

| Scenario | Cases(s) | School Contact Isolation | Escalation | Information |
|---|--|---|--|---|
| Suspected case (i.e. someone with symptoms of COVID-19) | Isolate (10 full days) + book a PCR test | None | None | None |
| Single PCR confirmed case (primary school) | Isolate (10 full days) | Contacts/Bubbles (isolate for 10 full days) | Department for Education Helpline | Inform and advise letter |
| Single PCR confirmed case (secondary school) | Isolate (10 full days) | Contacts (isolate for 10 full days) | Department for Education Helpline | Inform and advise letter |
| More than one PCR confirmed cases | Isolate (10 full days) | Contacts/Bubbles (isolate for 10 full days) | Department for Education Helpline See section 4.1. | Inform and advise letter |
| Thresholds are met | Isolate (10 full days) | Contacts/Bubbles (isolate for 10 full days) | Infection control review (see section 4.1). For any concerns/issues requiring specific further advice, complete LCRC proforma and email in the first instance | Inform and advise letter LCRC/HPT will send a <i>'Threshold letter'</i> in response to any queries when the threshold is met |

Appendix 1: On-site risk assessment checklist (confirmed cases only)

| | Information Gathered | Action to Take |
|--|---|---|
| Verify with confirmed case | | |
| Check date of symptom onset or date of test if asymptomatic | | |
| Identify dates of attendance at school during infectious period (2 days prior to symptom onset or 2 days prior to test date if asymptomatic, up to the most recent day of attendance) | | Advise on the self-isolation period: confirmed case(s) must not attend school for 10 days after the date of onset (or date of test if asymptomatic) and symptoms have resolved. Household members should also self-isolate for 10 days. |
| <b style="color: red;">If confirmed case did not attend school during the infectious period, then no further action is required with the school. | | |
| Risk Assessment | | |
| Identify exposure areas (only exposures while the case was infectious): Consider class, year group and if a member of any other school groups (e.g. breakfast or after school club, sports or music group). | Class: Year group: Breakfast club or after school club? Music, sports, or other activity? Travel to school? | |
| Identify contacts (only contacts while the case was infectious): You will need to consider contacts in all of the exposure areas identified above. Contacts may be: <ul style="list-style-type: none"> • Direct contacts: Face to face contact with a case for any length of time, including being coughed on, a face to face conversation, unprotected physical contact (skin to skin). This includes exposure within 1 metre for 1 minute or longer • Proximity contacts: Extended close contact (within 2 metres for more than 15 minutes) with a case • Travel contacts: Anyone who travelled in a small vehicle (car or people-carrier size) with a case | | Advise those identified as contacts to self-isolate for 10 days from date of last contact with the confirmed case. This means that if, for example, the last contact with the case was at any time on the 15 th of the month, the isolation period ends at 23:59 hrs on the 25 th |

| Refer to the appropriate section below | | |
|--|--|---|
| Early Years and Key Stage 1 (Foundation to Year 2) | | |
| <ul style="list-style-type: none"> • All children who had shared a classroom with the case during their infectious period • Children in friendship groups who are known to have had definite direct contact with them during their infectious period. This should be specific identifiable individuals (rather than groups where contact cannot be ruled out) • Staff members who report that they have had contact with the case during their infectious period | | <p>Advise those identified as contacts to self-isolate for 10 days from date of last contact with the confirmed case. This means that if, for example, the last contact with the case was at any time on the 15th of the month, the isolation period ends at 23:59 hrs on the 25th</p> |
| Key Stage 2 (Year 3-6) | | |
| <ul style="list-style-type: none"> • If children mix a lot within the classroom then the whole class would usually be defined as contacts • If there is a seating plan for all lessons and it is felt that social distancing has been observed in the classroom then look at seating plans instead. Identify contacts as children who sat within 2 metres of the case during their infectious period • Children in friendship groups who are known to have had definite direct contact with the case during their infectious period • Staff members who report that they have had contact with the case during their infectious period • Any other people who they have had definite face to face contact with at break times or in another group activities? This should be specific identifiable individuals (rather than groups where contact cannot be ruled out) | | <p>Advise those identified as contacts to self-isolate for 10 days from date of last contact with the confirmed case. This means that if, for example, the last contact with the case was at any time on the 15th of the month, the isolation period ends at 23:59 hrs on the 25th</p> |
| Key Stage 3, 4, and 5 (Year 7-13) | | |
| <ul style="list-style-type: none"> • The default should NOT be to identify the whole class or bubble as contacts in a secondary setting • Class contacts should be found by using the student timetable to identify classes during the infectious period. Look at seating plans and identify children who sat within 2 metres of the case during their infectious period in school • Children in friendship groups who are known to have had definite direct contact with the case during their infectious period • Staff members who report that they have had contact with the case during their infectious period • Any other people who they have had definite face to face contact with at break times or in other group activities? This should be specific identifiable individuals (rather than whole groups where contact cannot be ruled out) | | <p>Advise those identified as contacts to self-isolate for 10 days from date of last contact with the confirmed case. This means that if, for example, the last contact with the case was at any time on the 15th of the month, the isolation period ends at 23:59 hrs on the 25th</p> |

Appendix 2: Additional advice and guidance on infection control

Hand hygiene:

- Reinforce education of staff and students about hand and respiratory hygiene and display posters widely
- Clean hands more often than usual
- Ensure liquid soap and disposable paper towels are available at each sink
Use alcohol hand rub or sanitiser
- Promote catch it, bin it, kill it
- Use e-Bug resources to teach hygiene

Resources:

- www.england.nhs.uk/south/wp-content/uploads/sites/6/2017/09/catch-bin-kill.pdf
- www.e-bug.eu

Environment:

- Remove soft furnishings, toys, and toys that are hard to clean, such as sand trays, play-doh or plasticine
- Water fountains or water jugs to only be using COVID 19 safe guidelines. Please refer to the Water Only Schools toolkit (Covid 19 guidance) for safe use of water fountains when it is available (It is due to be published shortly).
- Remove shared food and drink e.g. fruit bowls
- Regular cleaning

Decontamination:

- Use disposable cloths
- Rooms to be thoroughly cleaned at the end of each day
- Enhanced cleaning (frequently touched areas)
- Wash hands after removing PPE

Cleaning guidance:

- <https://www.hse.gov.uk/coronavirus/cleaning/index.htm>
- <https://www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-settings/covid-19-decontamination-in-non-healthcare-settings>

Waste management:

Gloves and aprons should be double-bagged, stored securely for 72 hours then disposed in the regular rubbish after cleaning is finished

Isolation of children with symptoms at school:

- Children who develop symptoms at school should be isolated until collected by parents or carers
- If isolation is not possible, move them to an area at least 2 metres from other people
- If the child needs to go to the bathroom, this should be a separate bathroom
- Bathroom should be decontaminated with standard cleaning products before being used by others

Appendix 3: Inform and advise parent letter (and table)

For members of school community not identified as contacts

Date:

Dear Parents,

Case of COVID-19

We have been advised that a person in our school/nursery/childminders has tested positive for coronavirus.

What the school has done

We have done a full risk assessment and everyone who has been in contact with the person who tested positive has been identified and advised to self-isolate. Your child has NOT been in contact with the positive case according to public health guidelines and can continue to come to school/nursery/childminders as normal. This letter has been sent out to all families in our setting to let them know of the current situation and provide advice on how to support their child.

What do you need to do?

The school/nursery/childminders remain open and if your child is well, they can continue to attend as normal. We are continuing to monitor and review the situation.

Do be alert for the symptoms of coronavirus which are:

- **A high temperature**
- **A new continuous cough**
- **A loss of, or change in, normal sense of taste or smell**

See www.nhs.uk/conditions/coronavirus-covid-19/symptoms

If your child develops ANY of the three main symptoms of COVID-19, they should get tested as soon as possible. Please be reassured that for most people, especially children, coronavirus (COVID-19) will be a mild illness.

We know that this is a difficult time for families and thank you for your support as we work to keep our school/nursery/childminders and wider community safe.

Yours sincerely,

Headteacher

For more information see next page, and:

www.gov.uk/coronavirus/education-and-childcare
www.nhs.uk/conditions/coronavirus-covid-19/symptoms/ or by phone 111.

Appendix 4: Letter to parents of children who are contacts of cases (and table)

Date:

Advice for your child to self-isolate for 10 days

Dear Parent,

We have been informed that a person in the school/nursery/childminders has tested positive for coronavirus (COVID-19).

What has the school done?

A full risk assessment has been carried out. We have followed the national public health guidance and have identified that your child has been in close contact with the affected person. **Your child must now stay at home and self-isolate for ten full days after the date they were last in contact with the person who tested positive. This means they can stop isolating at 23:59 on [ADD DATE] and return to school on [ADD DATE].**

What do you need to do?

- Your child needs to self-isolate for 10 full days. They should not leave your home except in exceptional circumstances, for example for a medical emergency or to avoid a risk of harm. They cannot go to school/nursery or public areas. People can become infectious up to 2 days before symptoms begin and they could spread the disease to others if they do not go into self-isolation. Your child should try to avoid contact with vulnerable family members as much as possible.
- **Other members of your household do not need to self-isolate during the 10 days if your child does not have symptoms.** They can continue normal activities.

What to do if my child develops symptoms during the 10 days

For most people, COVID-19 will be a mild illness. However, if your child develops ANY of the three main symptoms of COVID-19, a new continuous cough, a high temperature, a change in their normal sense of taste or smell they should stay isolating at home and have a test as soon as possible. All other household members must self-isolate whilst you wait for result. See the PHE [Staying at Home Guidance](#).

- **If the test result is negative** – your child must continue to self-isolate until the end of the original 10 full days, as they could still develop COVID-19. The rest of the household can stop isolating, unless someone gets new symptoms.
- **If the test result is positive** – your child must self-isolate for 10 full days from when their symptoms started. The rest of the family will also need to self-isolate for 10 full days from when your child's symptoms started.

What to do if my child does not develop symptoms of COVID-19 during the 10 days

They need to stay at home for the full 10 days because it can take 10 days for symptoms of COVID-19 to develop. If your child does not stay at home, there is a chance that they could pass on COVID-19 to someone else, even if they feel well. Even

if they never develop symptoms, they can still be infected and pass the virus on without knowing it.

If your child is well at the end of the 10-day period of self-isolation, they can return to usual activities.

We know that this is a difficult time for families and thank you for your support as we work to keep our school/nursery/childminders and wider community safe.

Yours sincerely,

Headteacher

For more information see next page, and:

www.gov.uk/coronavirus/education-and-childcare

www.nhs.uk/conditions/coronavirus-covid-19/symptoms/ or by phone 111.

Appendix 5: Template letter for headteachers contacting the LCRC/HPT

Please send emails to LCRC@phe.gov.uk or your local HPT.

You are welcome to add any further details but **please do not include any information that could potentially be used to identify individuals**, including name, date of birth, or address. Any such information must be sent securely or provided over the phone.

Fields marked with a star* are required

| Basic Information | |
|---|---|
| Name of Educational Setting* | |
| Your main reason for contacting the HPT/LCRC* | For information <input type="checkbox"/> |
| | SEND school <input type="checkbox"/> |
| | Large number of cases in setting reaching threshold <input type="checkbox"/> |
| | Specific query - please specify <input type="checkbox"/> |
| What question/s would you like us to answer? | |
| Have you contacted the HPT/LCRC before? If so, please give your reference number | |
| Type of Educational Setting (please mark all that apply) | Early Years setting |
| | Primary School |
| | Secondary School |
| | SEND school |
| | Further Education College |
| Boarding School | |
| Address | |
| Post code* | |
| Total number of staff in setting | |
| Total number of students in setting | |
| Have you started school testing using lateral flow device? | |
| Contact Details | |
| Main contact person* - name | |
| Main contact person – role | |
| Contact telephone number* (If including a mobile number please let us know what times | |

| | |
|--|--|
| are ok to call, as we work past the end of the school day and may be able to call you later) | |
| Email address for our reply* | |
| Other point of contact and contact details | |
| Situation Information | |
| Total number of children with a positive test result in the previous 14 days | |
| Total number of staff with a positive test result in the previous 14 days | |
| Have any of the positive cases or their contacts recently returned from abroad? | |
| If yes, where from? | |
| Which years/classes are these children in? Please let us know how many confirmed cases in each | |
| How many households are affected? (Are there any siblings amongst the confirmed cases) | |
| Staff and children identified as close contacts and advised to self-isolate | |
| Early Years settings- How many individual children or bubbles have been excluded? For each bubble, please give the approx. number of students and staff excluded | |
| Primary schools – how many individual children or bubbles have been excluded? For each bubble, please give the number of students and staff excluded | |
| Secondary schools – how many students and staff have been excluded as contacts? Please give this by year if several years are affected | |
| Hospital admissions | |
| Have any children or staff been admitted to hospital? | |
| Have there been any admissions to intensive care or deaths? | |
| Actions taken | |
| Have you had any support already from DfE | |

| | |
|---|--|
| helpline/local public health? – please specify | |
| Please tell us what actions you have already taken | |

Appendix 6: Worked examples

Worked example 1: How long to isolate for?

Someone in a household tests positive for COVID-19, how long does the rest of the household need to isolate for?

Anyone in the same household as a person with coronavirus symptoms, should self-isolate immediately along with close contacts and other household members, in line with <https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance/stay-at-home-guidance-for-households-with-possible-coronavirus-covid-19-infection>.











They will also need to arrange a PCR test to confirm the result within 2 days of the LFD test. If the PCR test is taken within 2 days of the positive LFD test. If the PCR test is positive, they should self-isolate for 10 full days. The isolation period includes the day the first person in your household's symptoms started (or the day their test was taken if they did not have symptoms, and the next 10 full days. This means that if, for example, the 10 days isolation period starts on the 15th of the month, the isolation period ends at 23:59 hrs on the 25th of the same month.

If the PCR test is negative, it overrides a positive LFD test and they can return to school.

Anyone in the same household as a person with coronavirus symptoms, should self-isolate for

Worked example 2: What happens if there is a case in a school?

A staff member or child is in school on Thursday 3rd December and Friday 4th December and develops symptoms in the evening on Saturday 5th December. The child is tested on Saturday and has a positive test result on Sunday (6th). What should the school do?

| Day | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | |
|---|---|---|---|---|---|---|---|---|---|----|----|----|----|----|----|----|----|----|----|----|----|----|--|
| Key: Self-isolating with no symptoms  Symptoms of coronavirus  | | | | | | | | | | | | | | | | | | | | | | | |
| Child tests positive for coronavirus  | The child must isolate for 10 days (the time taken for the infection to clear once symptoms start)- and his whole family must also start 10 day self isolation from day 1. The isolation period ends at 23:59 hrs on the 11 th day  | | | | | | | | | | | | | | | | | | | | | | |
| Mum  | Mum has no symptoms – she must self isolate for the full 10 days, even if she has a negative test in this time- as we do not know if she is incubating the disease - after 10 days she can come out of isolation  | | | | | | | | | | | | | | | | | | | | | | |
| Brother  | | | Brother starts his 10 day isolation but only develops symptoms on day 3 and therefore needs to isolate for a further 10 days of the infection= self-isolating a total of 13 days. Isolation ends at 23:59 on the 13 th day.  | | | | | | | | | | | | | | | | | | | | |
| Dad  | Dad starts his 10 day isolation, and only develops symptoms on day 10- he now has to wait a further 10 days to clear the infection- so he self-isolates a total of 20 days  | | | | | | | | | | | | | | | | | | | | | | |

1. **Isolate case:** Advise that the child and their household should continue to isolate for 10 full days. In this case, isolation would end at 23:59 on December 15th, and the child should return to school on December 16th.

2. Identify contacts

- a. When was the child infectious?
 - From 2 days before symptoms started. In this case, on Thursday and Friday (the time of day that the symptoms started on Saturday has no impact on the 2-day period)
- b. Who were they in contact with?
 - Identify all contacts over those two days using the risk assessment checklist.
- c. How long do they need to isolate for?
 - The child who tested positive self isolates for a full 10 days from the start of symptoms. The isolation period includes the day their symptoms started and the next 10 full days (until 23:59 on December 15th) and the child should return to school on December 16th.
 - The child's family should self-isolate for at least 10 full days from the start of the child's symptoms. The isolation period includes the day the child's symptoms started and the next 10 full days (until 23:59 on December 15th). Family members may need to self-isolate for longer if they then develop symptoms.
 - Contacts at school should self-isolate for at least 10 days from when they were last in contact with the case. The isolation period includes the day they were in contact with the case, and the next 10 full days. Anyone who had been in contact with the case on the Friday 4th December must isolate until 23:59 on Monday the 14th of December, 10 days afterwards and return to school on the Tuesday 15th December. Anyone who was in contact with them on the Thursday but NOT in contact with them on Friday, can return to school on the Monday 14th December, as they will be isolating for 10 days until 23:59 on the 13th of December. See diagram below

| December | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 |
|----------|-----------------|-----------------|-----------------------------------|--|---|---|---|----|----|----|----|---|---|--|
| | Child in school | Child in school | Child has symptoms and has a test | Child test result is positive. He and his family isolate for 10 days from 5 th December. School do a risk assessment and inform the bubble of the child to self-isolate | | | | | | | | Contacts exposed to the child only on the 3 rd but NOT on the 4 th can return to school | Contacts exposed to the child on the 4 th can return to school | Child and family can return to school and work |

3. **Share information with families:** Provide information to parents, staff
4. **Notifications**
5. **Seek advice** if needed
6. **Reaching a threshold number of cases in your setting.** The criteria for reaching the threshold are specified in box 1. When you reach a threshold number of cases this is a moment to take stock of the infection control measures you have put in place and to review prevention measures. There is no *requirement* to contact the LCRC/HPT when reaching

the threshold but please do email LCRC/HPT if you have any specific queries or specific requests of support when reaching the threshold using the template form provided (appendix 5), specifying clearly the question that you have.

Worked example 3: Temperatures in early years

A child has a temperature, but the parents think that this is most likely because they are teething. Do they need to get a test?

We recognise that this is difficult for early years settings, and for families with young children where they have coughs, or temperatures particularly over the winter season. It is however difficult to distinguish COVID-19 symptoms from other related viruses without a test. Therefore, if a child has any of the three symptoms of COVID-19, including a temperature, they need to get a test. Suspicion of teething as a cause of temperature is not enough to allow a child to remain in the setting.

Appendix 7: Additional information for SEND settings

For children and young people with special educational needs and disability (SEND), the key principles of health protection response remain the same as for mainstream schools with the addition of the following:

- Unlike mainstream school, a **single** possible or confirmed cases in SEND schools require HPT/LCRC response from a clinical team member
- Schools should let HPT/LCRC teams know any particular circumstances pertaining to the case including:
 - Communicating and interacting needs
 - Cognition and learning needs
 - Social, emotional and mental health difficulties
 - Sensory and/or physical needs
 - If the setting is unable to get a test
 - Any Aerosol Generating Procedures performed relating to the case.

If a suspected case in a SEND school cannot get a test to confirm diagnosis

This would be in a very small number of situations as testing is now widely available but could apply if **testing cannot take place** (for example, because child is unable to tolerate testing due to any reason), then **identification of close contacts** and the **need for them to isolate** would require **a risk assessment on a case by case basis**. In this situation, please contact the LCRC to support you with the risk assessment of these contacts with the following information:

- Make an assessment of the child's current symptoms
- Anyone else in child's family who had same symptoms/or a positive test result recently?
- Type of your setting i.e. primary or secondary school, single or joint rooms with mixing between pupils etc
- Duration of exposure (how long symptomatic child was in school/did this child use personal or school transport)
- Size of bubble (including transport bubble) and the level of mixing between symptomatic case and other pupils/staff in the bubble during the infectious period (i.e. two days prior to child becoming unwell)
- Any group activities carried out by the bubble during the child's infectious period
- Vulnerabilities of other children
- Any procedures undertaken by the school based on the child needs e.g. Aerosol Generating Procedures (AGP)

The above are examples of things to consider and you may like to report anything else that can also support LCRC in risk assessment.

AEROSOL GENERATING PROCEDURES (AGP)

AGPs that are commonly performed in education and children's social care settings include:

- non-invasive ventilation (NIV)
- bi-level positive airway pressure ventilation (BiPAP)
- continuous positive airway pressure ventilation (CPAP)
- respiratory tract suctioning beyond the oro-pharynx

Procedures that are not classed AGPs include:

- oral or nasal suction
- the administration of nebulised saline, medication or drugs
- chest compressions or defibrillation

- chest physiotherapy
- the administration of oxygen therapy
- suctioning as part of a closed system circuit
- nasogastric tube insertion and feeding

AGPs should be carried out in the following:

- designated room for carrying out the procedure (ideal)
- a multi-purpose room - the room must be left for an hour and cleaned before being used by another pupil or accessed without PPE

Or if undertaken within a classroom, all other staff and pupils are at least 2 metres distance away with a window is opened for ventilation

Useful Links for SEND settings

Special educational needs and disability (SEND) settings:

- www.gov.uk/government/collections/coronavirus-covid-19-guidance-for-schools-and-other-educational-settings

Face coverings in education:

- <https://www.gov.uk/government/publications/face-coverings-in-education>

Cleaning and decontamination:

- www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-settings

Shielding and protecting extremely vulnerable people:

- www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19

Social distancing for everyone in the UK:

- www.gov.uk/government/publications/covid-19-guidance-on-social-distancing-and-for-vulnerable-people

Households with possible coronavirus infection:

- www.gov.uk/government/publications/covid-19-stay-at-home-guidance

Full guidance on staying at home and away from others:

- www.gov.uk/government/publications/full-guidance-on-staying-at-home-and-away-from-others

- **Guidance for suctioned children**

<https://www.gov.uk/government/publications/safe-working-in-education-childcare-and-childrens-social-care/safe-working-in-education-childcare-and-childrens-social-care-settings-including-the-use-of-personal-protective-equipment-ppe#what-specific-steps-should-be-taken-to-care-for-children-with-complex-medical-needs-such-as-tracheostomies>