

# COVID-19 Worcestershire Implementing Public Health protective measures guidance for mainstream schools

Please note guidance is changing rapidly, and it is essential schools check the Department for Education website regularly for updates

V5



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## Version Control

Date	Version Control	Changes
28.05.20	V1	
02.06.20	V2	Link to online digital portal and local hub for testing. Checklist updated
11.06.20	V3	Additional information regarding clinically vulnerable children. Additional information added regarding using public and school transport Amendment regarding the use of face coverings.
28.08.20	V4	Full revision of guidance in preparation for full opening of schools
28.09.20	V5	Updated links and advice in section 7.

## Introduction

There are important actions that children and young people, their parents and those who work with them can take during the coronavirus outbreak, to help prevent the spread of the virus.

In all education, childcare and social care settings, preventing the spread of coronavirus involves dealing with direct transmission (for instance, when in close contact with those sneezing and coughing) and indirect transmission (via touching contaminated surfaces). A range of approaches and actions should be employed to do this. These can be seen as a hierarchy of controls that, when implemented, creates an inherently safer system, where the risk of transmission of infection is substantially reduced. These include:

### Prevention:

1) Minimise contact with individuals who are unwell by ensuring that those who have coronavirus (COVID-19) symptoms, or who have someone in their household who does, do not attend school

2) Clean hands thoroughly more often than usual

3) Ensure good respiratory hygiene by promoting the

‘catch it, bin it, kill it’ approach

4) Introduce enhanced cleaning, including cleaning frequently touched surfaces often, using standard products such as detergents and bleach

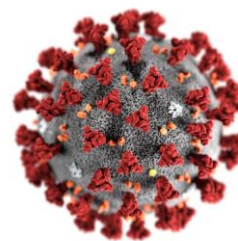
5) Minimise contact between individuals and maintain social distancing wherever possible

6) Where necessary, wear appropriate personal protective equipment (PPE)

Numbers 1 to 4 must be in place in all schools, all the time.

Number 5 must be properly considered, and schools must put in place measures that suit their particular circumstances.

Number 6 applies in specific circumstances.



### Response to any infection:

- 7) Engage with the NHS Test and Trace process
- 8) Manage confirmed cases of coronavirus (COVID-19) amongst the school community
- 9) Contain any outbreak by following local health protection team advice



Numbers 7 to 9 must be followed in every case where they are relevant.



## Prevention

### 1. Minimise contact with individuals who are unwell by ensuring that those who have coronavirus (COVID-19) symptoms, or who have someone in their household who does, do not attend school

- Ensuring that pupils, staff and other adults do not come into the school if they have [Coronavirus \(COVID-19\) symptoms](#) or have tested positive in at least the last 10 days, and ensuring anyone developing those symptoms during the school day is sent home, are essential actions to reduce the risk in schools and further drive down transmission of coronavirus (COVID-19).
- All schools must follow this process and ensure all staff are aware of it.
- If anyone in the school becomes unwell with a new and persistent cough or a high temperature, or has a loss of, or change in, their normal sense of taste or smell (anosmia), they must be sent home and advised to follow '[stay at home: guidance for households with possible or confirmed coronavirus \(COVID-19\) infection](#)', which sets out that they should self-isolate for at least 10 days and should [arrange to have a test](#)
- to see if they have coronavirus (COVID-19).
- If they have tested positive whilst not experiencing symptoms but develop symptoms during the isolation period, they should restart the 10 day isolation period from the day they develop symptoms.
- Other members of their household (including any siblings) should self-isolate for 14 days from when the symptomatic person first had symptoms.
- If a child is awaiting collection, they should be moved, if possible, to a room where they can be isolated behind a closed door, depending on the age and needs of the child, with appropriate adult supervision if required. Ideally, a window should be opened for ventilation. If it is not possible to isolate them, move them to an area which is at least 2 metres away from other people.
- If they need to go to the bathroom while waiting to be collected, they should use a separate bathroom if possible. The bathroom must be cleaned and disinfected using standard cleaning products before being used by anyone else.
- PPE must be worn by staff caring for the child while they await collection if a distance of 2 metres cannot be maintained (such as for a very young child or a child with complex needs). More information on PPE use can be found in the [safe working in education, childcare and children's social care settings, including the use of personal protective equipment \(PPE\) guidance](#).
- As is usual practice, in an emergency, call 999 if someone is seriously ill or injured or their life is at risk. Anyone with coronavirus (COVID-19) symptoms should not visit the GP, pharmacy, urgent care centre or a hospital.
- Any members of staff who have helped someone with symptoms and any pupils who have been in close contact with them do not need to go home to self-isolate unless they develop symptoms themselves (in which case, they should arrange a test) or if the symptomatic

person subsequently tests positive or they have been requested to do so by NHS Test and Trace.

- Everyone must wash their hands thoroughly for 20 seconds with soap and running water or use hand sanitiser after any contact with someone who is unwell. The area around the person with symptoms must be cleaned with normal household bleach after they have left to reduce the risk of passing the infection on to other people see [COVID-19: cleaning of non-healthcare settings outside the home](#)
- Public Health England is clear that routinely taking the temperature of pupils is not recommended as this is an unreliable method for identifying coronavirus (COVID-19).

## 2. Clean hands thoroughly more often than usual

Washing hands properly is one of the most important things individuals can do to help prevent and control the spread of COVID-19.

- All children, young people and staff should wash hands
- on arrival at their educational setting, and more
- regularly throughout the day
- Staff, children and families should be reminded to
- wash their hands soap and water hands for 20
- seconds. Ensure help is available for children and have
- trouble washing their hands.
- Supervise children to ensure they wash their hands for
- 20 seconds (sing Happy Birthday twice) with soap
- and water or hand sanitiser.
- Hands should be washed before eating and after sneezing, after using toilets and arriving and leaving school.
- Children should also be encouraged not to touch their faces.
- Staff should pay particular attention to handwashing before and after supporting children who need help with toileting or eating, as well as avoiding touching their own face whilst at work.
- Schools need to ensure that there is enough hand washing or hand sanitiser 'stations' available so that all pupils and staff can clean their hands regularly
- Children should be supervised when using hand sanitiser given risks around ingestion. Small children and pupils with complex needs should continue to be helped to clean their hands properly. Skin friendly skin cleaning wipes can be used as an alternative
- Schools need to build these routines into school culture, supported by behaviour expectations and helping ensure younger children and those with complex needs understand the need to follow them



Posters and lesson plans on general hand hygiene can be found on the [e-bug](#) website



## How to wash your hands:

Useful resources are available to demonstrate good hand hygiene

[NHS best way to wash your hands](#)

[GOV.UK safe working in education childcare and children's social care settings including the use of PPE personal protective equipment](#)

[Best practice hand rub \(PDF file\)](#)

[Best practice hand wash \(PDF file\)](#)

## Hand-washing technique with soap and water





### 3.Ensuring good respiratory hygiene ‘catch it, bin it, kill it’

Good respiratory hygiene is important as COVID-19 can be spread through:

- Respiratory droplets released when someone sneezes, or coughs and sometimes exhales
- Touching surfaces contaminated with respiratory droplets that can then be transferred by touching your eyes, nose or mouth.
- Remember catch it, bin it, kill it.

## CATCH IT

Germs spread easily. Always carry tissues and use them to catch your cough or sneeze.



## BIN IT

Germs can live for several hours on tissues. Dispose of your tissue as soon as possible.



## KILL IT

Hands can transfer germs to every surface you touch. Clean your hands as soon as possible.



#### 4. Introduce enhanced cleaning, including cleaning frequently touched surfaces often using standard products, such as detergents and bleach

Public Health England has published revised guidance [cleaning non-healthcare settings](#) to advise on general cleaning required in addition to the existing advice on cleaning those settings when there is a suspected case.

##### Points to consider include:

- Putting in place a cleaning schedule that ensures cleaning is generally enhanced and includes:
  - more frequent cleaning of rooms and shared areas
  - that are used by different groups
  - frequently touched surfaces being
  - cleaned more often than normal such as door
  - handles, handrails, table-tops, play equipment,
  - toys and electronic devices (such as phones)
  
- Toilets will need to be cleaned regularly and pupils must be encouraged to clean their hands thoroughly after using the toilet - different groups being allocated their own toilet blocks could be considered but is not a requirement if the site does not allow for it
- Reducing clutter and removing difficult to clean items can make cleaning easier.
- Remove soft furnishings, soft toys and toys that are hard to clean (such as those with intricate parts)
- Consider how play equipment is used ensuring it is appropriately cleaned between groups of children using it, and that multiple groups do not use it simultaneously.
- Outdoor playground equipment should be more frequently cleaned. This would also apply to resources used inside and outside by wraparound care providers
- When cleaning, use the usual products, like detergents and bleach, because these are very effective at getting rid of the virus on surfaces.



## **Cleaning an area after someone with suspected coronavirus (COVID-19) has left will reduce the risk of passing the infection on to other people.**

- Follow the [COVID-19: cleaning in non-healthcare settings outside the home](#)

### **Personal protective equipment (PPE)**

- The minimum PPE to be worn for cleaning an area after a person with symptoms of, or confirmed COVID-19 has left the setting is disposable gloves and an apron. Wash hands with soap and water for 20 seconds after all PPE has been removed.
- If a risk assessment of the setting indicates that a higher level of virus may be present (for example, where someone unwell has spent the night such as a boarding school dormitory) then additional PPE to protect the cleaner's eyes, mouth and nose may be necessary. The local Public Health England (PHE) Health Protection Team can advise on this.

### **Cleaning and disinfection**

- Public areas where a symptomatic person has passed through and spent minimal time but which are not visibly contaminated with body fluids, such as corridors, can be cleaned thoroughly as normal.
- All surfaces that the symptomatic person has come into contact with should be cleaned and disinfected, including all potentially contaminated and frequently touched areas such as bathrooms, door handles, telephones, grab rails in corridors and stairwells
- Use disposable cloths or paper roll and disposable mop heads, to clean all hard surfaces, floors, chairs, door handles and sanitary fittings – think one site, one wipe, in one direction.
- Use one of the options below:
  - a combined detergent disinfectant solution at a dilution of 1,000 parts per million available chlorine (ppm av.cl.)
  - or
  - a household detergent followed by disinfection (1000 ppm av.cl.). Follow manufacturer's instructions for dilution, application and contact times for all detergents and disinfectants
  - or
  - if an alternative disinfectant is used within the organisation ensure that it is effective against enveloped viruses
- Avoid mixing cleaning products together as this can create toxic fumes. Avoid creating splashes and spray when cleaning.
- Any cloths and mop heads used must be disposed of and should be put into waste bags as outlined below.
- When items cannot be cleaned using detergents or laundered, for example, upholstered furniture and mattresses, steam cleaning should be used.

## Laundry

- Wash items in accordance with the manufacturer's instructions. Use the warmest water setting and dry items completely. Dirty laundry that has been in contact with an unwell person can be washed with other people's items. To minimise the possibility of dispersing virus through the air, do not shake dirty laundry prior to washing.
- Clean and disinfect anything used for transporting laundry with your usual products, in line with the cleaning guidance above.



## Waste

- Personal waste from individuals with symptoms of COVID-19 and waste from cleaning of areas where they have been (including PPE, disposable cloths and used tissues):
    1. Should be put in a plastic rubbish bag and tied when full
    1. The plastic bag should then be placed in a second bin bag and tied
    2. This should be put in a suitable and secure place and marked for storage until the individual's test results are known
  - This waste should be stored safely and kept away from children. It should not be placed in communal waste areas until negative test results are known, or the waste has been stored for at least 72 hours.
  - If the individual tests negative, this can be put indisposed of immediately with the normal waste.
  - If COVID-19 is confirmed this waste should be stored for at least 72 hours before disposal with normal waste.
  - If during an emergency you need to remove the waste before 72 hours, it must be treated as Category B infectious waste. You must:
    - keep it separate from your other waste
    - arrange for collection by a specialist contractor as hazardous waste
- There will be a charge for this service.
- Other household waste can be disposed of as normal.

### Further Guidance from GOV.UK:

[Covid-19 decontamination in non-healthcare settings](#)

[Coronavirus covid-19 implementing protective measures in education and childcare settings](#)

[Safe working in education childcare and children's social care settings including the use of PPE personal protective equipment](#)

## **5. Minimise contact between individuals and maintain social distancing wherever possible**

Minimising contacts and mixing between people reduces transmission of coronavirus (COVID-19). This is important in all contexts, and schools must consider how to implement this. Schools must do everything possible to minimise contacts and mixing while delivering a broad and balanced curriculum.

The overarching principle to apply is reducing the number of contacts between children and staff. This can be achieved through keeping groups separate (in 'bubbles') and through maintaining distance between individuals. These are not alternative options and both measures will help, but the balance between them will change depending on:

- children's ability to distance
- the lay out of the school
- the feasibility of keeping distinct groups separate while offering a broad curriculum (especially at secondary)

It is likely that for younger children the emphasis will be on separating groups, and for older children it will be on distancing. For children old enough, they should also be supported to maintain distance and not touch staff where possible.

### **Points to consider and implement:**

- How to group children
- Measures within the classroom
- Measures elsewhere
- Measures for arriving at and leaving school

### **How to group children**

- Consistent groups reduce the risk of transmission by limiting the number of pupils and staff in contact with each other to only those within the group. Maintaining distinct groups or 'bubbles' that do not mix makes it quicker and easier in the event of a positive case to identify those who may need to self-isolate and keep that number as small as possible.
- However, the use of small groups restricts the normal operation of schools and presents both educational and logistical challenges, including the cleaning and use of shared spaces, such as playgrounds, boarding houses, dining halls, and toilets, and the provision of specialist teaching. This is the case in both primary and secondary schools but is particularly difficult in secondary schools.
- Maintaining consistent groups remains important, but given the decrease in the prevalence of coronavirus (COVID-19) and the resumption of the full range of curriculum subjects, schools may need to change the emphasis on bubbles within their system of controls and increase the size of these groups.
- In secondary schools, and certainly in the older age groups at key stage 4 and key stage 5, the groups are likely to need to be the size of a year group to enable schools to deliver the

full range of curriculum subjects and students to receive specialist teaching. If this can be achieved with small groups, they are recommended. At primary school, and in the younger years at secondary (key stage 3), schools may be able to implement smaller groups the size of a full class. If that can be achieved, it is recommended, as this will help to reduce the number of people who could be asked to isolate should someone in a group become ill with coronavirus (COVID-19).

- Schools should assess their circumstances and if class-sized groups are not compatible with offering a full range of subjects or managing the practical logistics within and around school, they can look to implement year group sized 'bubbles'. Whatever the size of the group, they should be kept apart from other groups where possible and older children should be encouraged to keep their distance within groups. Schools with the capability to do it should take steps to limit interaction, sharing of rooms and social spaces between groups as much as possible. When using larger groups, the other measures from the system of controls become even more important, to minimise transmission risks and to minimise the numbers of pupils and staff who may need to self-isolate. It is recognised that younger children will not be able to maintain social distancing, and it is acceptable for them not to distance within their group.
- Both the approaches of separating groups and maintaining distance are not 'all-or-nothing' options and will still bring benefits even if implemented partially. Some schools may keep children in their class groups for the majority of the classroom time, but also allow mixing into wider groups for specialist teaching, wraparound care and transport, or for boarding pupils in one group residentially and another during the school day. Siblings may also be in different groups. Endeavouring to keep these groups at least partially separate and minimising contacts between children will still offer public health benefits as it reduces the network of possible direct transmission.
- All teachers and other staff can operate across different classes and year groups in order to facilitate the delivery of the school timetable. This will be particularly important for secondary schools. Where staff need to move between classes and year groups, they should try and keep their distance from pupils and other staff as much as they can, ideally 2 metres from other adults. Again, we recognise this is not likely to be possible with younger children and teachers in primary schools can still work across groups if that is needed to enable a full educational offer.

### **Measures within the classroom**

- Maintaining a distance between people whilst inside and reducing the amount of time they are in face to face to contact lowers the risk of transmission. It is strong public health advice that staff in secondary schools maintain distance from their pupils, staying at the front of the class, and away from their colleagues where possible. Ideally, adults should maintain 2 metre distance from each other, and from children. We know that this is not always possible, particularly when working with younger children, but if adults can do this when circumstances allow that will help. In particular, they should avoid close face to face contact and minimise time spent within 1 metre of anyone. Similarly, it will not be possible when working with many pupils who have complex needs or who need close contact care. These pupils' educational and care support should be provided as normal.

- For children old enough, they should also be supported to maintain distance and not touch staff and their peers where possible. This will not be possible for the youngest children and some children with complex needs and it is not feasible in some schools where space does not allow. Schools doing this where they can, and even doing this some of the time, will help.
- When staff or children cannot maintain distancing, particularly with younger children in primary schools, the risk can also be reduced by keeping pupils in the smaller, class-sized groups described above.
- Schools should make small adaptations to the classroom to support distancing where possible. That should include seating pupils side by side and facing forwards, rather than face to face or side on, and might include moving unnecessary furniture out of classrooms to make more space.

### **Measures elsewhere**

- Groups should be kept apart, meaning that schools should avoid large gatherings such as assemblies or collective worship with more than one group.
- When timetabling, groups should be kept apart and movement around the school site kept to a minimum. While passing briefly in the corridor or playground is low risk, schools should avoid creating busy corridors, entrances and exits. Schools should also consider staggered break times and lunch times (and time for cleaning surfaces in the dining hall between groups).
- Schools should also plan how shared staff spaces are set up and used to help staff to distance from each other. Use of staff rooms should be minimised, although staff must still have a break of a reasonable length during the day.

### **Measures for arriving at and leaving school**

- travel to school patterns differ greatly between schools. If those patterns allow, schools should consider staggered starts or adjusting start and finish times to keep groups apart as they arrive and leave school. Staggered start and finish times should not reduce the amount of overall teaching time. A staggered start may, for example, include condensing/staggering free periods or break time but retaining the same amount of teaching time, or keeping the length of the day the same but starting and finishing later to avoid rush hour.
  - Schools should consider how to communicate this to parents and remind them about the process that has been agreed for drop off and collection, including that gathering at the school gates and otherwise coming onto the site without an appointment is not allowed.
  - Schools should also have a process for removing face coverings when pupils and staff who use them arrive at school and communicate it clearly to them. Pupils must be instructed not to touch the front of their face covering during use or when removing it. They must wash their hands immediately on arrival (as is the case for all pupils), dispose of temporary face coverings in a covered bin or place reusable face coverings in a plastic bag they can take home with them, and then wash their hands again before heading to their classroom.
- Guidance on

- [safe working in education, childcare and children's social care](#) provides more advice.

### Managing Visitors

- Schools should consider how to manage other visitors to the site, such as contractors, and ensure that the risks associated with managing contractors, visitors, catering staff and deliveries, as well as cleaning staff on site who may be working throughout the school and across different groups, are addressed. This will require close cooperation between both schools and the other relevant employers. Schools should have discussions with key contractors about the school's control measures and ways of working as part of planning for the autumn term. Schools should ensure site guidance on physical distancing and hygiene is explained to visitors on or before arrival. Where visits can happen outside of school hours, they should. A record should be kept of all visitors.

### Equipment and Resources

- For individual and very frequently used equipment, such as pencils and pens, it is recommended that staff and pupils have their own items that are not shared. Classroom based resources, such as books and games, can be used and shared within the bubble; these should be cleaned regularly, along with all frequently touched surfaces. Resources that are shared between classes or bubbles, such as sports, art and science equipment should be cleaned frequently and meticulously and always between bubbles, or rotated to allow them to be left unused and out of reach for a period of 48 hours (72 hours for plastics) between use by different bubbles.
- Outdoor playground equipment should be more frequently cleaned. This would also apply to resources used inside and outside by wraparound care providers. It is still recommended that pupils limit the amount of equipment they bring into school each day, to essentials such as lunch boxes, hats, coats, books, stationery and mobile phones. Bags are allowed. Pupils and teachers can take books and other shared resources home, although unnecessary sharing should be avoided, especially where this does not contribute to pupil education and development. Similar rules on hand cleaning, cleaning of the resources and rotation should apply to these resources.





## 6. When is Personal Protective Equipment Required.

The majority of staff in education settings will not require PPE beyond what they would normally need for their work. PPE is only needed in a very small number of cases, including:

- Where an individual child or young person becomes ill with coronavirus (COVID-19) symptoms while at schools, and only then if a distance of 2 metres cannot be maintained
- Where a child or young person already has routine intimate care needs that involves the use of PPE, in which case the same PPE should continue to be used
- If required to undertake cleaning after a person with suspected COVID-19 has left the building see [COVID-19: cleaning in non-healthcare settings outside the home](#)

The PPE that should be used in the following situations when caring for someone with symptoms of coronavirus (COVID-19) is:

- Fluid-resistant surgical face masks if a distance of 2 metres cannot be maintained
- If contact is necessary, then gloves, an apron and fluid-resistant surgical face masks should be worn
- Eye protection if a risk assessment determines that there is a risk of fluids entering the eye, for example, from coughing, spitting or vomiting.

When PPE is used, it is essential that it is used properly. This includes scrupulous hand hygiene and following guidance on how to put PPE on and take it off safely in order to reduce self-contamination.

Face masks must:

- Cover both nose and mouth
- Not be allowed to dangle around the neck
- Not be touched once put on, except when carefully removed before disposal
- Be changed when they become moist or damaged
- Be worn once and then discarded - hands must be cleaned after disposal

Staff who require PPE must be trained on the correct methods of putting it on and taking it off (Donning and Doffing).

[PPE request form through Worcestershire County Council](#)

[Full GOV.UK Guidance regarding PPE](#)

Instructions for [Putting on PPE](#)

Instructions for [Taking off PPE](#)

Poster for [Putting on and taking off PPE](#)

[Training Video](#)

## Face coverings

In the context of the coronavirus (COVID-19) outbreak, a face covering is something which safely covers the nose and mouth. You can buy reusable or single-use face coverings. You may also use a scarf, bandana, religious garment or hand-made cloth covering but these must securely fit round the side of the face.

Face coverings are not classified as PPE (personal protective equipment) which is used in a limited number of settings to protect wearers against hazards and risks, such as surgical masks or respirators used in medical and industrial settings.

Face coverings are instead largely intended to protect others, not the wearer, against the spread of infection because they cover the nose and mouth, which are the main confirmed sources of transmission of virus that causes coronavirus infection (COVID-19). Because face coverings are mainly intended to protect others, not the wearer, from coronavirus (COVID-19) they are not a replacement for social distancing and regular hand washing.

The World Health Organisation (WHO) now advise that children aged 12 and over should wear a face covering when they cannot guarantee at least a 1-metre distance from others and there is widespread transmission in the area. Nationally, the government is not recommending face coverings are necessary in education settings generally because the system of control and preventive measures as described in this document, provides additional mitigating measures. Schools and colleges have the discretion to require face coverings in indoor communal areas where social distancing cannot be safely managed, if they believe that it is right in their particular circumstances.

It is vital that face coverings are worn correctly and that clear instructions are provided to staff, children and young people on [how to put on, remove, store and dispose of face coverings](#) in all of the circumstances above, to avoid inadvertently increasing the risks of transmission.



Safe wearing of face coverings requires cleaning of hands before and after touching – including to remove or put them on – and the safe storage of them in individual, sealable plastic bags between use. Where a face covering becomes damp, it should not be worn and the face covering should be replaced carefully.

On the basis of current evidence, in light of the mitigating measures education settings are taking, and the negative impact on communication, face coverings are not necessary in the classroom even where social distancing is not possible. There is greater use of the system of controls for minimising risk, including through keeping in small and consistent groups or bubbles, and greater scope for

physical distancing by staff within classrooms. Face coverings can have a negative impact on learning and teaching and so their use in the classroom should be avoided.

In line with WHO advice additional precautionary measures should be applied when local areas are defined as [areas of national government intervention](#). Information on areas with a status of 'intervention' can be found in the [National coronavirus \(COVID-19\) surveillance report](#), which is updated every week. In these intervention areas, in education settings where Year 7 and above are educated, face coverings should be worn by adults (staff and visitors) and pupils when moving around indoors, such as in corridors and communal areas where social distancing is difficult to maintain. As above, it will not be necessary to wear face coverings in the classroom, where protective measures already mean the risks are lower, and they may inhibit teaching and learning.

Schools should have a process for removing face coverings when pupils and staff who use them for travel arrive at school and communicate it clearly to them. Pupils must be instructed not to touch the front of their face covering during use or when removing it. They must wash their hands immediately on arrival (as is the case for all pupils), dispose of temporary face coverings in a covered bin or place reusable face coverings in a plastic bag they can take home with them, and then wash their hands again before heading to their classroom. Guidance on [safe working in education, childcare and children's social care](#) provides more advice.

### **Wearing a face covering**

A cloth face covering should cover the mouth and nose while allowing the person to breathe comfortably. It can be as simple as a scarf or bandana that ties behind the head. Those wearing face coverings should:

- Wash hands or use hand sanitiser before putting it on and after taking it off. Avoid touching eyes, nose, or mouth at all times and store used face coverings in a plastic bag until there is an opportunity to wash them.
- Not touch the front of the face covering, or the part of the face covering that has been in contact with your mouth and nose. Once removed, make sure any surfaces are cleaned the face covering has touched.
- Wash face coverings regularly. It can go in with other laundry, using your normal detergent.
- When wearing a face covering, take care to tuck away any loose ends.



### **Guidance on how to wear a face covering:**

[How-to-wear-and-make-a-cloth-face-covering](#)

[Full Guidance which includes information regarding PPE](#)

## 7. Engage with the NHS Test and Trace process

Schools must ensure they understand the NHS Test and Trace process and how to contact their local Local Outbreak Response Team and Public Health England health protection team.

A Local Outbreak Response Team (LORT) for Worcestershire schools has been stood up to support schools and other settings. [The Worcestershire Standard Operating Procedure - Management of cases and local outbreaks in education settings including early years and childcare settings, schools or Post 16 provision and associated flow charts are accessible from the Worcestershire County Council website.](#)

The documents include:

- Local Area Key Contacts
- COVID-19 Key messages
- Management of a suspected case
- Management of a confirmed case
- Arrangements for management of a possible outbreak
- Frequently Asked Questions
- National Guidance Documents
- Suggested Datasets/Records

Schools must ensure that staff members and parents/carers understand that they will need to be ready and willing to:

- [Book a test](#) if they or their child are displaying symptoms. Staff and pupils must not come into the school if they have symptoms, and must be sent home to self-isolate if they develop them in school. All children can be tested, including children under 5, but children aged 11 and under will need to be helped by their parents/carers if using a home testing kit. Results are quicker if use local test site.
- Provide details of anyone they or their child have been in close contact with if they were to test positive for coronavirus (COVID-19) or if asked by NHS Test and Trace
- [Self-isolate](#) if they have been in close contact with someone who tests positive for coronavirus (COVID-19), or if anyone in their household develops symptoms of coronavirus (COVID-19)
- Anyone who displays symptoms of coronavirus (COVID-19) can and should get a test. Tests can be booked online through the NHS [testing and tracing for coronavirus website](#) or ordered by telephone via NHS 119 for those without access to the internet. Essential workers, which includes anyone involved in education or childcare, have priority access to testing.
- Schools should ask parents and staff to inform them immediately of the results of a test:

- If someone tests negative, if they feel well and have not had a fever for 48 hours and they are not a contact of a confirmed positive case, they can stop self-isolating and return to school. Other members of their household can also stop self-isolating. If they are a contact of a confirmed positive case they must stay off school/setting for the 14-day isolation period, even if they test negative. This is because they can develop the infection at any point up to day 14 (the incubation period for COVID-19), so if a child tests negative on day 3 they may still go on to develop the infection.
- If someone tests positive, they should follow the [‘stay at home: guidance for households with possible or confirmed coronavirus \(COVID-19\) infection’](#) and must continue to self-isolate for at least 10 days from the onset of their symptoms and then return to school only if they do not have symptoms other than cough or loss of sense of smell/taste. This is because a cough or anosmia can last for several weeks once the infection has gone. The 10-day period starts from the day when they first became ill. If they still have a high temperature, they should keep self-isolating until their temperature returns to normal. Other members of their household should continue self-isolating for the full 14 days.

## **8. Manage confirmed cases of coronavirus (COVID-19) amongst the school community**

Schools must take swift action when they become aware that someone who has attended has tested positive for coronavirus (COVID-19). Schools should contact either the Worcestershire Local Outbreak Response Team (LORT) or local health protection team. These teams will also contact schools directly if they become aware that someone who has tested positive for coronavirus (COVID-19) attended the school – as identified by NHS Test and Trace.

The health protection team will carry out a rapid risk assessment to confirm who has been in close contact with the person during the period that they were infectious, and ensure they are asked to self-isolate.

The health protection team will work with schools in this situation to guide them through the actions they need to take. Based on the advice from the health protection team, schools must send home those people who have been in close contact with the person who has tested positive, advising them to self-isolate for 14 days since they were last in close contact with that person when they were infectious. Close contact means:

- Direct close contacts - face to face contact with an infected individual for any length of time, within 1 metre, including being coughed on, a face to face conversation, or unprotected physical contact (skin-to-skin)
- Proximity contacts - extended close contact (within 1 to 2 metres for more than 15 minutes) with an infected individual
- Travelling in a small vehicle, like a car, with an infected person

The health protection team will provide definitive advice on who must be sent home. To support them in doing so, we recommend schools keep a record of pupils and staff in each group, and any close contact that takes places between children and staff in different groups. This should be a

proportionate recording process. Schools do not need to ask pupils to record everyone they have spent time with each day or ask staff to keep definitive records in a way that is overly burdensome.

A template letter will be provided to schools, on the advice of the health protection team, to send to parents and staff if needed. Schools must not share the names or details of people with coronavirus (COVID-19) unless essential to protect others.

Household members of those contacts who are sent home do not need to self-isolate themselves unless the child, young person or staff member who is self-isolating subsequently develops symptoms. If someone in a class or group that has been asked to self-isolate develops symptoms themselves within their 14-day isolation period they should follow 'stay at home: guidance for households with possible or confirmed coronavirus (COVID-19) infection'. They should get a test, and:

- If the test delivers a negative result, they must remain in isolation for the remainder of the 14-day isolation period. This is because they could still develop the coronavirus (COVID-19) within the remaining days.
- If the test result is positive, they should inform their setting immediately, and should isolate for at least 10 days from the onset of their symptoms (which could mean the self-isolation ends before or after the original 14-day isolation period). Their household should self-isolate for at least 14 days from when the symptomatic person first had symptoms, following 'stay at home: guidance for households with possible or confirmed coronavirus (COVID-19) infection'

Schools should not request evidence of negative test results or other medical evidence before admitting children or welcoming them back after a period of self-isolation.

Further guidance is available on [testing and tracing for coronavirus \(COVID-19\)](#).

## **9. Contain any outbreak by following local health protection team advice**

If schools have two or more confirmed cases within 14 days, or an overall rise in sickness absence where coronavirus (COVID-19) is suspected, they may have an outbreak, and must continue to work with their local health protection team and Local Outbreak Response Team who will be able to advise if additional action is required.

In some cases it may recommend that a larger number of other pupils self-isolate at home as a precautionary measure – perhaps the whole site or year group. If schools are implementing controls from this list, addressing the risks they have identified and therefore reducing transmission risks, whole school closure based on cases within the school will not generally be necessary, and should not be considered except on the advice of health protection teams.

In consultation with the local Director of Public Health, where an outbreak in a school is confirmed, a mobile testing unit may be dispatched to test others who may have been in contact with the person who has tested positive. Testing will first focus on the person's class, followed by their year group, then the whole school if necessary, in line with routine public health outbreak control practice.

## **National Guidance:**

[Guidance for schools: coronavirus Covid-19](#)

[Guidance for full opening: schools](#)

[Coronavirus \(COVID-19\): guidance for schools and other educational settings](#)

[Actions for educational and childcare settings to prepare for wider opening from 1 June 2020](#)

[GOV.UK Preparing for the wider opening of schools](#)

[GOV.UK Actions for schools during the coronavirus outbreak](#)

[GOV.UK Coronavirus \(COVID-19\): guidance for schools and other educational settings](#)

[Coronavirus \(COVID-19\): guidance for children's social care services](#)

[Coronavirus \(COVID-19\): implementing protective measures in education and childcare settings](#)

[Coronavirus \(COVID-19\): guidance for educational settings](#)

[Actions for educational and childcare settings to prepare for wider opening from 1 June 2020](#)

[Supporting vulnerable children and young people during the coronavirus \(COVID-19\) outbreak](#)

[Covid-19 stay at home guidance](#)

[Cleaning in a non – health care setting](#)

[Coronavirus infection prevention and control and Covid-19 personal protective equipment ppe](#)