COVID-19 Public Health Resource Pack for Private, Voluntary and Independent Early Years Settings

Version 1

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This document has been created using information taken from national guidance and supplemented with additional information about the local test and trace systems in Cumbria. Common queries from educational settings are addressed in the FAQ section.

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Please Note

As COVID-19 is a rapidly evolving situation, guidance may change at short notice. In addition to familiarising yourself with this document, please also refer to the national guidance listed in section 8.

# Section 1: Local Area Key Contacts

COVID-19 queries or to notify Cumbria County Council of confirmed case(s)

Cumbria COVID-19 call centre: 0800 783 1968 (Mon-Fri, 0900-1700) (Saturday and Sunday 1000 -1400) (Please note the call centre will be closed over the Christmas weekend and the New Year weekend)

Public health team enquiries: [educationIPC@cumbria.gov.uk](mailto:educationIPC@cumbria.gov.uk) (Mon-Fri, 0900-1700)

School transport queries: [school.transport@cumbria.gov.uk](mailto:school.transport@cumbria.gov.uk) (Mon-Fri, 0900-1700)

Additional national/out of hours support

The Department for Education has a helpline for COVID-19 enquiries which can support with managing single confirmed cases in educational settings.

Helpline Number: 0800 046 8687 (Mon-Fri 0800-1800; Sat-Sun 1000-1600)

# Section 2: COVID-19 Key Messages

## 2.1 Symptoms of COVID-19

The main symptoms of COVID-19 are:

• New continuous cough and/or

• Fever (temperature of 37.8°C or higher) and/or

• Loss of or change in, normal sense of taste or smell

## 2.2 Mode of transmission

COVID-19 is passed from person to person mainly by large respiratory droplets and direct contact (close unprotected contact, usually less than one metre). These droplets can be directly inhaled by the person, or can land on surfaces which another person may touch which can lead to infection if they then touch their nose, mouth or eyes.

## 2.3 Incubation period

The incubation period is the time between being exposed to the virus and developing symptoms. This is between 1-14 days, with an average of 5 days. This is why close contacts of confirmed cases are instructed to self-isolate for 14 days following exposure, as symptoms can emerge at any point during this period.

## 2.4 Infectious period

A person is thought to be infectious for 48 hours before symptoms appear, and up to 10 days after they start displaying symptoms.

## 2.5 Risk of infection in children

Children of all ages can catch the infection. However, children make up a very small proportion of COVID-19 cases with about 1% of confirmed cases in England aged under 19 years. Children also have a much lower risk of developing symptoms or severe disease.

## 2.6 Risk of transmission amongst children

There is some uncertainty about how much asymptomatic or mildly symptomatic children can transmit the disease, but the evidence so far from a number of studies suggests children are less likely to pass it on and do not appear to play a major role in transmission. Most children with COVID-19 have caught the infection from adults and not the reverse.

# Section 3: Establishing a COVID-secure educational setting

## 3.1 Public health advice

[Government guidance](https://www.gov.uk/government/publications/coronavirus-covid-19-early-years-and-childcare-closures/coronavirus-covid-19-early-years-and-childcare-closures) is available detailing the public health advice that early years setting must follow to minimise the risks of COVID-19 transmission.

## 3.2 Additional national lockdown considerations

Early years settings can stay open to all children. You can therefore accept children regardless of whether the parents are key workers, working from home, or furloughed.

## 3.3 Music in early years settings

This guidance relates to organised group activity, not to spontaneous singing, dance and role-play that young children may naturally do, and should be encouraged to do, by early years practitioners.

Music, dance and drama build confidence, help children live happier, more enriched lives, and discover ways to express themselves. There may, however, be a cumulative risk of infection in environments where organised singing, chanting, playing wind instruments, dance and drama takes place.

Organised singing and wind instrument playing can be undertaken in line with this and other guidance, in particular guidance provided by the Department for Culture, Media and Sport (DCMS) for professionals and non-professionals in the performing arts. Singers and players should be 2 metres apart to limit both droplet and aerosol risks. For aerosol risks, ventilation should also be encouraged. DCMS is continuing to develop a more detailed understanding of how to mitigate this potential aggregate risk, but in that context, organisations should follow this guidance.

Minimising mixing groups and volume control

Settings should take particular care in music, dance and drama lessons that children remain in their usual groups.

Additionally, settings should keep any background or accompanying music to levels which do not encourage participants to raise their voices unduly. If possible, use microphones to reduce the need for shouting or prolonged periods of loud speaking or singing. If possible, do not share microphones. If they are shared, follow the guidance on handling equipment.

# Section 4: Managing suspected or confirmed cases of COVID-19 within an early-years setting

This section provides local guidance on the management of suspected or confirmed infections amongst children and staff within an early-years setting. This may differ from the national guidance in some respects, because Cumbria has established its own local test and trace system as well as additional testing capacity. The local procedure is summarised in the flow chart on page 7.

## 4.1 Identifying suspected cases of COVID-19

The case definition of COVID-19 includes having 1 or more of the following symptoms:

1. **A high temperature of 37.8°C or above.** If a thermometer is not available, feeling hot to the touch on the chest or back is a good indicator of a high temperature.
2. **A new,\* continuous cough.** This means coughing a lot for more than an hour, or 3 or more coughing episodes in 24 hours.
3. **Loss of, or change in, sense of smell or taste.** This means that the person cannot smell or taste anything, or things smell or taste different from normal.

\* Some people usually have a cough. In this case, a worsening cough would be considered part of the case definition.

## 4.2 Children with suspected or confirmed COVID-19

If a child develops 1 or more of the above symptoms, parents or carers should be instructed not to bring their child to any childcare setting. The parent or carer must keep the child at home and arrange [testing online](https://www.nhs.uk/conditions/coronavirus-covid-19/testing-and-tracing/get-a-test-to-check-if-you-have-coronavirus/), or by calling 119 if they do not have internet access. If the child tests positive for COVID-19, they must stay at home for 10 days. Members of the same household will have to isolate for 14 days. If the child tests negative, they can return to the childcare setting provided they are well and have not had a high temperature for at least 48 hours.

## 4.3 Staff with suspected or confirmed COVID-19

If a staff member develops 1 or more of the above symptoms, they must self-isolate and not attend the setting. They must stay at home should arrange [testing online](https://www.nhs.uk/conditions/coronavirus-covid-19/testing-and-tracing/get-a-test-to-check-if-you-have-coronavirus/), or by calling 119 if they do not have internet access. If the staff member tests positive, they must stay at home for 10 days and all members of the same household. Members of the same household will have to isolate for 14 days. If the staff member tests negative, they can return to the setting provided they are well and have not had a high temperature for at least 48 hours.

## 4.4 Identifying close contacts of confirmed (positive) cases

People with COVID-19 are considered to be infectious from 2 days (48 hours) before the onset of symptoms and for 10 days afterwards. If the person tests positive but does not have symptoms, the infectious period is measured from 2 days before the test was taken until 10 days afterwards. To prevent ongoing transmission, it is important to identify and isolate anyone who has come into close contact with confirmed case within this timeframe. Close contact is therefore defined as:

1. Having had face-to-face contact (within 1 metre) with a positive case, including:

* Being coughed on, OR
* Having a face-to-face conversation, OR
* Having skin-to-skin physical contact, OR
* Being within 1 metre for 1 minute or longer without face-to-face contact

1. Being within 2 metres of a positive case for more than 15 minutes
2. Travelling in a small vehicle with a positive case
3. Travelling in a large vehicle near a positive case
4. Spending a significant amount of time in the same household as a positive case

People who have been identified as close contacts of a positive case must self-isolate immediately. This means that they must stay at home for 14 days following their last contact with the case. Close contacts do not need to be tested unless they develop symptoms. Household members of contacts do not need to self-isolate unless the contact develops symptoms.

## 4.2 Managing suspected and confirmed cases of COVID-19

|  |  |
| --- | --- |
| Member of staff or child is showing one of more symptoms of COVID-19 (temperature of 37.8°C or above, new continuous cough, change to or loss of sense of taste/smell). *Check wider description of symptoms\** | |
|  | |
| Has the individual been in the setting whilst a) showing symptoms or b) in the 48 hours before showing symptoms | |
|  | |
| **Yes** | **No** |
| * If the individual is still in the setting, isolate them and arrange for them to go home immediately. It is recommended that staff wear [Personal Protective Equipment](https://www.gov.uk/government/publications/safe-working-in-education-childcare-and-childrens-social-care) (PPE) if supporting a symptomatic child and 2 metres distance cannot be maintained. * Send all siblings/other household members home too. * Advise that the individual needs to isolate at home along with all other household contacts and follow [stay at home guidance](https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance). Advise the staff member or parent/carer to arrange testing [online](https://www.nhs.uk/conditions/coronavirus-covid-19/testing-and-tracing/get-a-test-to-check-if-you-have-coronavirus/), or by calling 119 if they do not have internet access. * If the individual is unable to access testing after numerous attempts, settings can contact the Cumbria COVID-19 call centre on 0800 783 1968 to request local testing, which is available for people aged 2+. * If the individual does not get tested, they need to isolate for 10 days from the time they developed symptoms. Household members will need to isolate for 14 days from the same date. * Thoroughly [clean](https://www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-settings) any areas the individual has been in contact with. * Ask the member of staff or parent/carer to keep you informed of test results. * Determine which people had [close contact](https://www.gov.uk/government/publications/actions-for-schools-during-the-coronavirus-outbreak/guidance-for-full-opening-schools) with the individual whilst they were showing symptoms, or during the 48 hours before they developed symptoms/ had their test if asymptomatic. This is your ‘close contact list’ which you will need if a test comes back positive. * You do not need to send any contacts home or shut any bubbles/the setting at this stage. You only need to consider further actions like this if a case is confirmed to be positive. | * Contact staff member or parent/carer - ensure the individual is following the [stay at home guidance](https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance) and arranging testing. * If no testing is available after numerous attempts, follow the process below for local testing. * Ask the member of staff or parent/carer to inform you of testing date and results. * If the individual is not tested, they must follow the [stay at home guidance](https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance). |
| If you have a query about a suspected case, please email [educationIPC@cumbria.gov.uk](mailto:educationIPC@cumbria.gov.uk) (Mon-Fri 9-5) or call the Department for Education helpline (0800 046 8687) | |
|  | |
| Individual receives their test result | |
|  | |
| **Test result is positive** | **Test result is negative** |
| * Advise the individual to continue with their 10 day isolation at home. They can return to the setting after 10 days if they are feeling well and have not had a high temperature for 48 hours. * Other household members must continue their 14 day isolation period, and should only get tested if they develop symptoms of COVID-19. * Notify close contacts that they need to go home and isolate for 14 days from the date they were last in contact with the individual who has tested positive. Their wider household do **NOT** need to isolate unless they develop symptoms. * Inform all parents that there has been a positive case so that they can watch for symptoms. * Testing will not routinely be offered to individuals who do not have symptoms, so contacts do **NOT** need to be tested, unless informed otherwise by a public health team. * If you have more than one individual in the setting with a positive test result, outbreak support will be provided to you via local health protection services. They will contact you with advice. * Contact the local COVID-19 Call Centre on 0800 783 1968 to notify them of the case. This number is for professional use only; please do not share with parents or wider public. * A contact tracer from a local health protection service may then get in touch with you, the staff member or the parent/carer to provide advice and identify further contacts * Inform your Early Years Adviser and Ofsted of the confirmed case(s). * If the setting has a confirmed case, either child or staff member, and/or the setting has to close as a result, use the Ofsted online reporting form for [reporting a serious childcare incident](https://www.gov.uk/guidance/report-a-serious-childcare-incident#history) as an ‘event likely to impact on the smooth running of the setting.’ * If the affected person is a staff member, consider whether it is likely that they acquired the infection at work. If so, this should be reported to [RIDDOR](https://www.hse.gov.uk/coronavirus/riddor/index.htm) as outlined in the FAQs section. | * The individual can return to the setting straight away as long as they are well and have not had a high temperature within 48 hours. * Other household contacts can come out of isolation |

**\*COVID-19 Symptoms**

Most people with coronavirus have at least 1 of these symptoms.

* + A high temperature of 37.8°C or above. If you don’t have a thermometer, feeling hot to the touch on your chest or back is a good indicator of a high temperature
  + 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)
  + Loss or change to your sense of smell or taste. This means you've noticed you cannot smell or taste anything, or things smell or taste different to normal

It is vital that educational settings only recommend testing for children or staff who develop these symptoms. The capacity of the NHS Test and Trace system must be protected for those with symptoms of the virus.

**It is vital that educational settings only recommend children or staff to get a test if they develop these symptoms - the capacity of the NHS Test and Trace system must be protected for those with symptoms of the virus.**

|  |  |
| --- | --- |
| **Accessing testing for children or staff**  Please note: demand for testing is currently very high, so it is important that tests are only conducted when clinically necessary | |
| Step 1 | Check that the child or staff member has symptoms of COVID-19 and definitely needs to isolate and access testing. Only children and adults with one or more of the symptoms described above needs to get tested |
| Step 2 | Advise the parent or staff member to try and arrange testing via one of the following routes:   * The testing [website](https://www.nhs.uk/conditions/coronavirus-covid-19/testing-and-tracing/get-a-test-to-check-if-you-have-coronavirus/) * Telephone – by dialling 119 if the family do not have access to the internet |
| Step 3 | If parents or staff members have not been able to access testing as advised under step 2, encourage them to keep trying because testing slots and home testing kits are released in batches at regular intervals |
| Step 4 | If the parent or staff member has been unable to access testing as advised under the above steps, professional childcare providers can call the Cumbria COVID-19 Call Centre on 0800 783 1968. The Call Centre can refer the individual for testing at an NHS site in Cumbria. This testing is limited and subject to availability, but is equipped to test adults and children from 2 years onwards.  **Please note this call centre number is for professional use only. Please do not share with parents or wider public.**  Parents and staff should only attend NHS testing sites if they have a pre-booked appointment.  In order to arrange testing the call centre will need the following information: Child’s/staff member’s name, date of birth, address, contact details for parents (if child), date of onset of symptoms, description of symptoms, child or staff member’s GP practice. Testing cannot be arranged without these details.  Let the parent or staff member know you have referred them. If the local testing sites are very busy, it may take a while for the parent or staff member to be contacted. |

## 4.3 Isolating symptomatic individuals within the setting

The following measures should be taken if a person develops symptoms of COVID-19 within the educational setting:

* The individual must be sent home immediately
* Those awaiting transport should be isolated within the setting until collection behind a closed door. If this is not possible, the individual must move to an area which is at least 2 metres away from other people.
* If the individuals needs to go to the bathroom whilst awaiting collection, they should use a separate bathroom if possible. The bathroom should be cleaned and disinfected using standard cleaning products before being used by anyone else.

Depending on their age and needs, adult supervision may be required for symptomatic children. In this case:

* A window should be opened for ventilation if possible
* Staff should wear Personal Protective Equipment (PPE) if a distance of 2 metres cannot be maintained, such as for a very young child or a child with complex needs. In this case, the supervising staff member should wear a fluid-resistant surgical face mask.
* If direct contact with the child is necessary, and there is significant risk of contact with bodily fluids, then the following PPE should be worn by the supervising staff member:
  + Disposable gloves
  + Disposable plastic apron
  + Fluid-resistant surgical face mask
  + Eye protection (goggles, visor) if there is a risk of fluids entering the eye, for example from coughing, spitting or vomiting

# Section 5: Management of a possible group of cases or outbreak

## 5.1 What to do if there are 2 or more confirmed cases in the setting

If there are more confirmed cases linked to the setting, the local public health and environmental health teams will work together to investigate and advise on any further actions which may be required.

If a setting has come across two or more confirmed cases, or there is a high reported absence which is suspected to be COVID-19 related, please notify the Cumbria COVID-19 call centre promptly (0800 783 1968). Following this, you will be advised what additional action may be taken if required, in addition to the usual steps of ensuring suspected or confirmed cases are isolating for 10 days and contacts are isolating for 14 days.

Active clusters and outbreaks within educational settings are discussed daily in an Outbreak Control Team meeting, and the public health team will get in touch if there are any new recommendations for particular childcare settings.

# Section 6: Planning for local restrictions

Educational settings are expected to plan for the possibility of local restrictions, and how they will ensure continuity of education in exceptional circumstances where there is some level of restriction applied to education or childcare in a local area. Under the current system, educational settings are expected to remain operational at all local alert levels. However, in exceptional circumstances some restrictions may be required, as detailed in the [full guidance](https://www.gov.uk/government/publications/containing-and-managing-local-coronavirus-covid-19-outbreaks/covid-19-contain-framework-a-guide-for-local-decision-makers#tier-1).

**Tiers of restriction for educational settings**

Tier 1 – The default position for areas in national government intervention is that education and childcare settings will remain open. An area moving into national intervention with restrictions short of education and childcare closure is described as ‘tier 1’. There are no changes to childcare, and the only difference in education settings is that where pupils in year 7 and above are educated, face coverings should be worn by adults and pupils when moving around the premises, outside of classrooms, such as in corridors and communal areas where social distancing cannot easily be maintained.

Tier 2 - Early years settings, primary schools and alternative provision (AP) providers, special schools and other specialist settings will continue to allow all children/pupils to attend on site. Secondary schools move to a rota model, combining on-site provision with remote education. They continue to allow full-time attendance on site to vulnerable children and young people and the children of critical workers. All other pupils should not attend on site except for their rota time. Further education (FE) providers should adopt similar principles with discretion to decide on a model that limits numbers on site but works for each individual setting.

Tier 3 - Childcare, nurseries, primary schools, AP, special schools and other specialist settings will continue to allow all children/pupils to attend on site. Secondary schools, FE colleges and other educational establishments would allow full-time on-site provision only to vulnerable children, the children of critical workers and selected year groups (to be identified by Department for Education). Other pupils should not attend on site. Remote education to be provided for all other pupils.

Tier 4 – All nurseries, childminders, mainstream schools, colleges and other educational establishments allow full-time attendance on site only to our priority groups: vulnerable children and the children of critical workers. All other pupils should not attend on site. AP, special schools and other specialist settings will allow for full-time on-site attendance of all pupils. Remote education to be provided for all other pupils

# Section 7: Frequently asked questions

## 7.1 Cases and contacts

* Who do I need to notify about positive cases in our setting?

The following organisations should be notified:

1. The Cumbria County Council COVID-19 call centre (0800 783 1968) who will upload details of the case onto the local system for follow-up by contact-tracers and the public health team
2. Public Health England via the Department for Education helpline (0800 0468687)
3. [Ofsted](https://www.gov.uk/guidance/tell-ofsted-if-you-have-a-covid-19-incident-at-your-childcare-business) with the details of the confirmed case and impact on the running of the setting
4. Your Early Years Adviser so that they can provide you with the necessary advice and support

If the affected person is a staff member, consider whether it is likely that they acquired the infection at work. Cases of COVID-19 acquired as a result of occupational exposure should be reported under The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 ([RIDDOR](https://www.hse.gov.uk/coronavirus/riddor/index.htm)). There is no requirement to report cases amongst children attending the setting, or where the employee is likely to have acquired COVID-19 from another source.

* If a person with symptoms has difficulty getting tested, do I need to exclude the other children in their class/bubble?

The person with symptoms must isolate for 10 days from onset of symptoms if they do not test negative for whatever reason (e.g. refuse testing, delays in testing). Members of the same household must also self-isolate for 14 days. If the person is unable to access national testing, consider referring them for local testing system as described on page 9. If the person is still unable to access testing or declines to be tested, please contact the local authority for further advice regarding the class/bubble.

* Can the siblings of a child who has been sent home because they are a contact of a case continue to attend educational settings?

Yes. Other household members of the contact do not need to self-isolate unless the contact or another household member subsequently develops symptoms.

* What should we do if a child or parent reports that they have had contact with someone with symptoms of COVID-19?

No action is required of the educational setting in this situation. No one with symptoms should be attending the setting and anyone who develops symptoms while in the setting should be isolated and sent home as soon as possible. Settings should regularly remind parents of the government guidance on self-isolation if following close contact with a confirmed case, and whole-household isolation if anyone in the household develops symptoms.

* If a close contact of a confirmed case tests negative, can they return to the setting?

No. The person must stay at home 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 they may still go on to develop the infection.

* If a child or staff member has a test because of COVID-19 symptoms and the results are negative, can they return to the educational setting?

They can return provided are feeling well and have not had a fever for 48 hours. However, if they are a contact of a confirmed case, they must complete the entire 14-day isolation period regardless of a negative test result.

* Does a person who has tested positive or was identified as a contact need to have a negative test before they can return to an educational setting?

No. Children and staff can return after completing their isolation period, provided that they are feeling well with no fever for at least 48 hours. Settings should not request evidence of a negative test results or other medical evidence before re-admitting people after a period of self-isolation.

* Does our setting need to close if we get confirmed cases?

No, it does not need to close on public health grounds. Settings will generally only need to close if they have staff shortages due to illness or being identified as contacts. It is expected that only close contacts of a confirmed case will need to be excluded. This would usually include people within the same class or bubble, but may also include contacts from school transport, breakfast clubs, or after-school clubs. If there are a number of confirmed cases across different classes and year groups at the same time, then the setting may be advised to close by the Health Protection Team in consultation with other partners.

* What should I do if more cases arise within a bubble that is isolating?

Further cases are expected amongst close contacts. No further action is required provided the affected person is already isolating and has not been in the setting within 48 hours prior to developing symptoms. If the new case(s) has additional close contacts within the setting during this 48 hour period, these contacts should be identified and asked to self-isolate.

* In addition to the 3 main symptoms, should any other symptoms be considered a possible indication of COVID-19?

The clinical definition of COVID-19 is currently restricted to the 3 main symptoms: new and continuous cough, fever, or loss of taste or smell. This definition is kept under review and guidance will be updated if the case definition changes.

Other respiratory symptoms, such as sore throat and runny nose, do not fit this case definition. If a child is unwell with other respiratory symptoms, they should remain at home

until recovered, however they do not need to be tested for COVID-19

If a child has diarrhoea and/or vomiting they should remain at home while symptomatic and are free of symptoms for 48 hours. However, they do not meet the case definition for COVID-19 and do not need to be tested for this.

## 

## 7.2 Testing

* Who should get tested?

Staff or pupils should get tested if they have one or more of the 3 main symptoms of COVID-19. People who do not have symptoms should not be tested, regardless of whether they have been in close contact with a positive case, unless advised to by the Public Health Team.

* Will the setting be informed of test results?

The setting will be informed if a child or staff member tests positive as part of NHS Test and Trace. The setting will not be informed of negative results.

We recommend asking parents/staff members to keep the setting updated on the results of tests so that contacts can be identified and isolated as quickly as possible and return to the setting can be planned for those who are isolating. However, settings should not request evidence of a negative test results or other medical evidence before re-admitting people after a period of self-isolation.Template letters for communication with parents regarding this are available in Appendix 4**.**

## 7.3 High risk groups

* Should children or staff who are classed as clinically extremely vulnerable due to pre-existing medical conditions (shielding) attend educational settings?

Shielding measures have been paused since the 1st August 2020 due to decreased transmission rates and improved infection prevention measures within the community. Under all local COVID alert levels, almost all children and staff who have previously been shielding can attend so long as COVID-secure measures are in place. A very small number of pupils under specialist medical care may be been advised by their clinician not to attend an education setting. Detailed guidance regarding clinically extremely vulnerable staff and students can be found [here](https://www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19).

Children or staff who live with people who were previously in the shielding group can return to the setting/work.

* Can pregnant members of staff come to work?

Yes, pregnant members of staff can attend work provided COVID-secure measures are in place. Pregnant people are classed as ‘clinically vulnerable,’ and should therefore take particular care to observe good hand and respiratory hygiene, maintain 2 metre distance from others, avoid close face to face contact, and minimise time spent within 1 metres of others. If a staff member lives with someone who is pregnant, they can work.

The Royal College of Obstetrics and Gynaecology has published [occupational health advice](https://www.rcog.org.uk/en/guidelines-research-services/guidelines/coronavirus-pregnancy/) for employers and pregnant women. This includes advice for women from 28 weeks gestation or with underlying health conditions who may be at greater risk.

## 7.4 Staff and personal protective equipment

* Can we still use supply staff even if there have been multiple cases in our setting?

Supply staff can continue to work provided they have not been identified as a close contact of a positive case in any setting. Use of supply staff should be included in your setting’s local risk assessment. Contact with students and other teachers should be minimised by adhering to COVID-secure guidelines.

Supply staff who are identified as close contacts of a positive case within your setting should be notified and asked to isolate just as permanent staff would be. Supply staff who test positive for COVID-19 should notify any educational setting that they have attended within 48 hours of developing symptoms, so that close contacts can be identified and isolated.

* Can non-teaching staff, for example cleaners and caterers, work in more than 1 setting?

Non-teaching staff can work across settings provided they have not been identified as a close contact of a positive case in any setting. This should be included in your setting’s local risk assessment. Contact with other staff and children should be minimised by adhering to COVID-secure guidelines.

Staff who work across settings who are identified as close contacts of a positive case within your setting should be notified and asked to isolate in line with national guidance. If a member of staff who works in multiple settings tests positive for COVID-19, they should notify any setting that they have attended within 48 hours of developing symptoms, so that close contacts can be identified and isolated.

## 7.5 Cleaning and facilities

* What additional cleaning is necessary following a symptomatic or confirmed case?

So long as regular cleaning is thorough and maintained at all times, there is no need for additional cleaning following a suspected or confirmed case. Regular cleaning of frequently touched items and surfaces is likely to be highly effective, as high contact surfaces will present the main risk in terms of indirect transmission.

The following measures may be used to reduce the risk of transmission via surfaces:

* Cleaning an area with normal household disinfectant after someone with suspected COVID-19 has left will reduce the risk of passing the infection on to other people.
* Wear disposable or washing-up gloves and aprons for cleaning.
* First clean hard surfaces with warm soapy water using a disposable cloth, then disinfect these surfaces with the cleaning products you normally use. Pay particular attention to frequently touched areas and surfaces, such as bathrooms, grab-rails in corridors and stairwells and door handles.
* If an area has been heavily contaminated, such as with visible bodily fluids, use protection for the eyes, mouth and nose, as well as wearing gloves and an apron.
* All disposable materials should be double-bagged, stored securely for 72 hours, then thrown away in the regular rubbish after cleaning is finished.
* Wash hands regularly with soap and water for 20 seconds, and after removing gloves, aprons and other protection used while cleaning.

Full guidance on routine and additional cleaning is available [here](https://www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-settings/covid-19-decontamination-in-non-healthcare-settings).

* Do toilets need to be cleaned after every use?

No. Toilets are frequently touched surfaces, so they need to be cleaned frequently throughout the day. Apart from gloves and apron, there is no need for additional PPE for this task. The frequency of toilet-cleaning should be increased to at least five times a day.

Additional cleaning after a single use is only required if used by a symptomatic person whilst waiting to go home.

* What cleaning materials are recommended?

Disposable cloths or paper roll and disposable mop heads should be used to clean all hard surfaces, floors, chairs, door handles and sanitary fittings, following one of the following:

Either

* A combined detergent disinfectant solution at a dilution of 1,000 parts per million available chlorine

Or

* A household detergent followed by disinfection (1000 parts per million available chlorine). 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, this should be checked and ensure that it is effective against enveloped viruses

Avoid creating splashes and spray when cleaning.

All the disposable materials should be double-bagged, then stored securely for 72 hours then thrown away in the regular rubbish after cleaning is finished.

Full guidance on routine and additional cleaning is available [here](https://www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-settings/covid-19-decontamination-in-non-healthcare-settings).

Section 8: National Guidance

Social distancing for different groups:

* [Stay at home: guidance for households with possible coronavirus (COVID-19) infection](https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance/stay-at-home-guidance-for-households-with-possible-coronavirus-covid-19-infection#ending-isolation)
* [Guidance on social distancing for everyone in the UK](https://www.gov.uk/government/publications/staying-alert-and-safe-social-distancing)
* [Guidance on shielding and protecting people who are clinically extremely vulnerable from COVID-19](https://www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19)

Guidance for contacts:

* [Guidance for contacts of people with possible or confirmed COVID19](https://www.gov.uk/government/publications/guidance-for-contacts-of-people-with-possible-or-confirmed-coronavirus-covid-19-infection-who-do-not-live-with-the-person/guidance-for-contacts-of-people-with-possible-or-confirmed-coronavirus-covid-19-infection-who-do-not-live-with-the-person)

Specific guidance for educational settings:

* [Guidance for early years Settings](https://www.gov.uk/government/publications/coronavirus-covid-19-early-years-and-childcare-closures/coronavirus-covid-19-early-years-and-childcare-closures)
* [Guidance for schools and other educational settings](https://www.gov.uk/government/collections/coronavirus-covid-19-guidance-for-schools-and-other-educational-settings)
* [Opening schools and educational settings to more pupils: guidance for parents and carers](https://www.gov.uk/government/publications/closure-of-educational-settings-information-for-parents-and-carers/reopening-schools-and-other-educational-settings-from-1-june#how-will-risks-to-children-teachers-and-families-be-managed)
* [COVID-19: implementing protective measures in education and childcare settings](https://www.gov.uk/government/publications/coronavirus-covid-19-implementing-protective-measures-in-education-and-childcare-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](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)
* [E-bug online resource](https://eur01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.e-bug.eu%2F&data=02%7C01%7CMartin.Bewley%40phe.gov.uk%7C33bb7343141d4d1753f708d8556eb21e%7Cee4e14994a354b2ead475f3cf9de8666%7C0%7C0%7C637353281201135382&sdata=mfFhD5OHvSf75lR6vyQ6mO1nMuov14hiIHPhpxbeXUU%3D&reserved=0), including [COVID-19](https://eur01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.e-bug.eu%2Feng_home.aspx%3Fcc%3Deng%26ss%3D1%26t%3DInformation%2520about%2520the%2520Coronavirus&data=02%7C01%7CMartin.Bewley%40phe.gov.uk%7C33bb7343141d4d1753f708d8556eb21e%7Cee4e14994a354b2ead475f3cf9de8666%7C0%7C0%7C637353281201135382&sdata=UASb5zVUEltjCTBaMZRAqB1rfjfep4VAMCFvGHNGL%2Bg%3D&reserved=0) specific information

Testing:

* [NHS: Testing for coronavirus](https://www.nhs.uk/conditions/coronavirus-covid-19/testing-for-coronavirus/)

Infection prevention and control:

* [Safe working in education, childcare and children’s social care settings including the use of PPE](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)
* [Cleaning in non-healthcare settings](https://www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-settings/covid-19-decontamination-in-non-healthcare-settings)
* [5 moments for hand hygiene: with how to hand rub and how to handwash. Posters](https://www.who.int/infection-prevention/campaigns/clean-hands/5moments/en/)
* [Catch it. Bin it. Kill it.](https://campaignresources.phe.gov.uk/resources/campaigns/34/resources/2665) Poster

[Coronavirus Resource Centre posters](https://coronavirusresources.phe.gov.uk/):

* [Available Here](https://coronavirusresources.phe.gov.uk/)

Appendix 1: Template to record absences

|  |
| --- |
| **In the event of a COVID-19 outbreak, the table will ensure that important information is recorded in one place and is easily accessible** |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Date | Name | Class | Reason for absence\* | Date of onset of symptoms | Symptoms \*\* | Has the child/staff been assessed by GP, NHS 111 etc? Y/N/NK | Has the child/staff been tested?  Y/N/NK | Is the child/staff reporting a positive test result? Y/N/NK | Is the child/staff in hospital? Y/N/NK |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |

**Reason for absence\*:** Ill, Household member ill, Contact of a confirmed/suspected case, Shielding, Other e.g. dental appointments

**Symptoms \*\*** T = Temp (>=37.8 C), C = Cough, D = Diarrhoea, V = Vomiting, ST = Sore Throat, H = Headache, N = Nausea, LST = Loss of smell/taste, Other

# Appendix 2: Template to record incidents when a child develops symptoms at the setting

|  |
| --- |
| In the event of a COVID-19 outbreak, the table will ensure that important information is recorded in one place and is easily accessible |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Date | Name | Class | Date/Time of onset of symptoms | Symptoms\* | Time between detection of symptoms and isolation | Did staff member wear PPE?\*\*  Y/N |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

**Symptoms \*** T = Temp (>=37.8 C), C = Cough, D = Diarrhoea, V = Vomiting, ST = Sore Throat, H = Headache, N = Nausea, LST = Loss of smell/taste, Other

**\*\* Only required if social distancing could not be observed**

# Appendix 3: Seeking consent to share personal information with Cumbria County Council

The Public Health team at Cumbria County Council has developed local COVID-19 Outbreak Control arrangements, which covers educational settings.

When there is a **confirmed** case of COVID-19 in an educational or childcare setting, setting leaders should contact the Cumbria County Council COVID-19 Call Centre on 0800 783 1968 with details about the individuals involved. This information is then used to support settings, staff and families with advice, carry out contact tracing if required, and manage possible outbreaks.

Before contacting the call centre, it is important that the parent/carer has given consent for details to be shared. Consent can be requested at the time, but please consider proactively varying/updating your consent arrangements to specifically mention data sharing for the purposes of COVID-19.

If you would like to contact parents specifically in relation to COVID-19 data sharing consent, we suggest using the following wording on the next page.

Test results: It is up to each individual setting to decide whether or not to request written proof of a test result when a child has been tested. Parents and carers are not obliged to disclose this information, but you can ask for it.

If you have any queries, please email [educationIPC@cumbria.gov.uk](mailto:educationIPC@cumbria.gov.uk)

**COVID-19: Consent to share information if your child tests positive for COVID-19**

If your child tests positive for COVID-19 we have been asked to inform the Cumbria County Council COVID-19 call centre. This information will be used to help:

* Support us and you with advice and information
* Contact you to identify possible close contacts (if a test result is positive)
* Prevent wider spread of the virus

This support is coordinated across a range of teams. Therefore these details may be shared with Environmental Health teams in District Councils, the Public Health team at Cumbria County Council and the Local Health Protection Team at Public Health England / National Institute for Health Protection.

The call centre will ask us to provide the following details about your child:

* Name
* Date of Birth
* Address and parent/carers contact telephone number
* Symptoms and the date the symptoms started, date of test
* When the individual was last in the childcare setting

If you are happy to give consent for details to be shared, please complete the section below and return it to myself.

Name of Child: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Child’s Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

In the event that my child tests positive for COVID-19, I consent to details about my child (and my contact details) being shared with Cumbria County Council and partner organisations supporting the management of COVID-19.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Appendix 4: Letter templates for communication with parents/carers

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| --- | --- |
| **Scenario** | **Template letter** |
| Child has suspected symptoms of COVID-19 |  |
| Child has tested positive for COVID-19 |  |
| Child is a close contact of a confirmed case of COVID-19 |  |
| Bubble closure due to COVID-19 outbreak |  |
| Whole setting closure due to a COVID-19 outbreak |  |