# COVID-19 Public Health Resource Pack for Secondary Schools and FE Colleges in Cumbria

Version 1.0

April 2021

This document has been created using information taken directly from the Public Health England North West (PHE NW) COVID-19 Template Resource Pack for Schools (Version 6.0 24March 2021) 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 in section 7.  This guidance applies to secondary schools and colleges in Cumbria.  Separate resource packs are available for primary/junior schools, nurseries/pre-schools, and childminders. |

# 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)

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 of Education Helpline for COVID-19 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 1000-1800)

# Section 2: COVID-19 Key Messages

## Symptoms of COVID-19

The main symptoms of COVID-19 are:

* New continuous cough and/or
* Fever (temperature of 37.8°C or higher)
* Loss of or change in, normal sense of taste or smell (anosmia)

## Mode of transmission

COVID-19 is passed from person to person by respiratory droplets containing viral particles. These droplets may be inhaled by people in direct contact with an infected person, usually by close contact within a metre of each other such as sitting together or having a face-to-face conversation. Droplets can also land on surfaces which other people may touch, leading to infection if they then touch their nose, mouth or eyes. The virus can also be transmitted via aerosol transmission in poorly ventilated indoor spaces.

## 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 time of 5 days.

## Infectious period

A person is thought to be infectious from two days before symptoms appear, and up to 10 days after they start displaying symptoms. The onset of the infectious period is now counted from the morning of the 2 days before the onset of symptoms (and NOT 48 prior to the time of onset of symptoms). For example, a person who developed symptoms at 2pm on 16 March would be asked to identify contacts from the start of the 13 March onwards.

## Risk of infection in children and young people

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

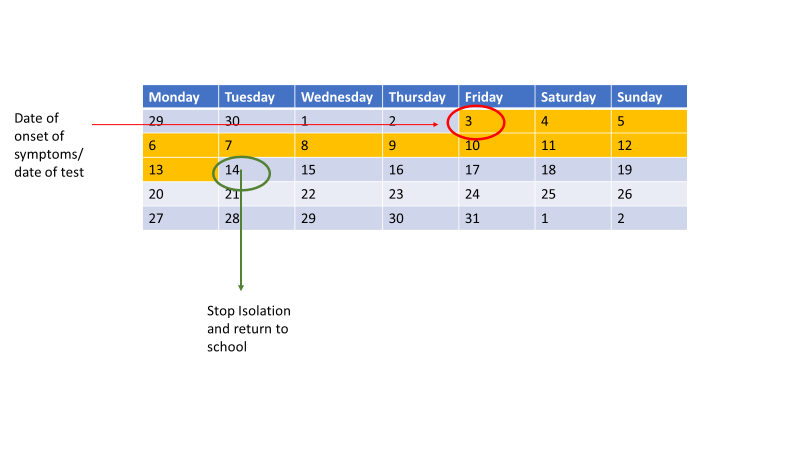
## Types of test

Two different types of COVID-19 tests are now available:

1. Lateral Flow Device (LFD) tests are processed immediately in a plastic test kit and give results in 30 minutes. They are used to detect cases in people without symptoms. A positive LFD test should be followed up with a full PCR test within 2 days.
2. Polymerase Chain Reaction (PCR) tests are processed in a laboratory, and give results within 48 hours. They are used to confirm suspected cases of COVID-19, for example in people with symptoms or asymptomatic people with a positive LFD test result.

## Self-Isolation timings for positive cases

If a pupil, student or staff member has a positive PCR test result, they must not leave home for **10 full days** from the onset of symptoms. If the person is asymptomatic, use the date that the test was taken to calculate the isolation period. The isolation period includes the day a person’s symptoms started (or the date of the test if asymptomatic) and the next 10 full days.

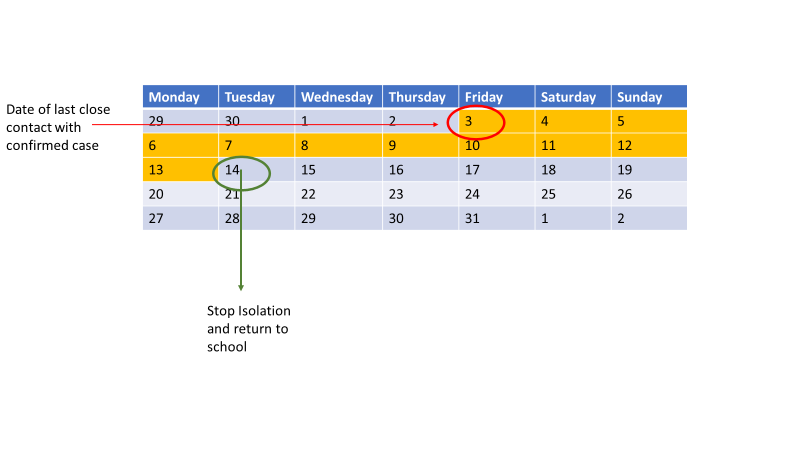
For example, if symptoms started at any time on the 3rd of the month, the isolation period would end at 23:59 hrs on the 13th.

If a pupil, student or staff member has a positive LFD test result, they also need to stay at home for 10 full days from the date of the test, unless they have a negative follow-up PCR test carried out in the 2 days following the positive LFD.

## Self-Isolation timings for close contacts

If a person is identified as a close contact of a positive case, they must not leave home for **10** **full days** from the date they last had contact with the case. Positive cases include any individual with:

* A positive PCR test
* A positive LFD test awaiting a PCR test result
* A positive LFD test without a negative follow-up PCR test taken within 2 days of the positive LFD test

For example, if the date of last close contact with the case was any time on the 3rd of the month, the isolation period would end at 23:59 hrs on the 13th.

If an individual with no symptoms tests positive and then goes on to develop symptoms within their 10 day isolation period, they and their household need to restart the 10 day isolation period, with the 10 days counted from the day following the onset of symptoms. Non-household close contacts do not need to restart their 10-day isolation period, as long and the last date of contact with the positive case has not changed.

## Definition of a close contact

People with COVID-19 are considered to be infectious from 2 days before the onset of symptoms (or date of testing if asymptomatic) and for 10 days afterwards. Close contact is therefore defined as any one of the following interactions occurring during the infectious period:

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

* Being coughed on
* Having a face-to-face conversation
* Having skin-to-skin physical contact

1. Being within 1 metre of a positive case for 1 minute or longer without face-to-face contact
2. Being within 2 metres of a positive case for more than 15 minutes, either all at once or cumulatively over 1 day
3. Travelling in a vehicle with a positive case. Contact Public Health via [EducationIPC@cumbria.gov.uk](mailto:EducationIPC@cumbria.gov.uk) for support in risk assessing contacts who have shared a vehicle with a positive case. Also see FAQ section relating to transport.
4. Spending a significant amount of time in the same household as a positive case

## Meaning of self-isolation

Self-isolation means the pupil/staff member should

1. Not go to school, work or public places
2. Not attend any other out of school activities or go around to a friends house
3. Not use public transport or taxis
4. Not go out to shop – order it online or ask a friend to bring it to your home
5. Not have visitors in your home except for people providing essential care
6. Not go out to exercise – exercise at home or in your garden, if you have one
7. Inform GP practice or hospital or other healthcare setting that they are self-isolating if they must attend in person

## Face Coverings

From 17 May face coverings will no longer be recommended for pupils in classrooms or communal areas in all schools. Face coverings will also no longer be recommended for staff in classrooms as can be seen in [Government guidance](https://www.gov.uk/government/publications/actions-for-schools-during-the-coronavirus-outbreak/guidance-for-full-opening-schools).

In all schools we continue to recommend that face coverings should be worn by staff and visitors in situations outside of classrooms where social distancing is not possible (for example, when moving around in corridors and communal areas).

Children and young people aged 11 and over must still wear a face covering on public transport. In accordance with advice from PHE, they must also wear a face covering when travelling on dedicated transport to secondary school or college. This does not apply to children and young people who are exempt from wearing face coverings.

Face coverings (whether transparent or cloth) should fit securely around the face to cover the nose and mouth and be made with a breathable material capable of filtering airborne particles.

Where appropriate, education settings should discuss with pupils and parents the types of reasonable adjustments that are being considered to support an individual.

Face visors or shields can be worn by those exempt from wearing a face covering but they are not an equivalent alternative in terms of source control of virus transmission.

**Safe wearing of face coverings includes:**

* face coverings (whether transparent or cloth) should fit securely around the face to cover the nose and mouth and be made with a breathable material capable of filtering airborne particles
* cleaning hands before and after touching face coverings – including to remove or put them on
* store face coverings in individual, sealable plastic bags between use
* not touching the front of face coverings during use or removal

The reintroduction of face coverings for pupils, students or staff may be advised for a temporary period in response to particular localised outbreaks by local directors of public health, including variants of concern. In all cases, any educational drawbacks should be balanced with the benefits of managing transmission.

# Section 3: Establishing a COVID-secure educational setting

[Government guidance](https://www.gov.uk/government/publications/actions-for-schools-during-the-coronavirus-outbreak/guidance-for-full-opening-schools) is available detailing the public health advice that educational setting schools must follow to minimise the risks of COVID-19 transmission.

The following prevention and response measures should be put in place:

1. Minimise contact with suspected cases by ensuring that people do not come to school if they or anyone in their household has COVID-19 symptoms
2. Encourage PCR testing for suspected cases, and use the results to inform isolation requirements for close contacts
3. Use face coverings inside schools where recommended
4. Clean hands thoroughly and more often than usual
5. Ensure good respiratory hygiene by promoting ‘catch it, bin it, kill it’
6. Introduce enhanced cleaning with standard products such as detergents and bleach, paying special attention to frequently touched surfaces
7. Minimise contact between people by maintaining social distancing of 2 metres whenever possible
8. Keep occupied indoor spaces well ventilated
9. Wear appropriate personal protective equipment (PPE) where necessary
10. Promote and engage in asymptomatic testing where available

# Section 4: Suspected or confirmed cases of COVID-19

This section provides local guidance on the management of staff, pupils or students with suspected or confirmed COVID-19 infection. The local procedure is summarised in the flow chart on page 11.

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

People with COVID-19 are considered to be infectious from 2 full days before the onset of symptoms and for 10 full 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. If a person does not have symptoms at the point of testing positive, but goes on to develop symptoms during their 10-day isolation period, they, and their household need to restart the 10-day isolation period (counted from the day following the onset of symptoms). Non-household members do not need to extend their isolation period.

To prevent ongoing transmission within the setting, 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
2. Being within 1 metre of a positive case for 1 minute or longer without face-to-face contact
3. Being within 2 metres of a positive case for more than 15 minutes, either all at once or cumulatively over 24 hours
4. Travelling in a vehicle with a positive case
5. 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 10 full days following their last contact with the case. Close contacts do not need to be tested (with a PCR test) unless they develop symptoms. Secondary school pupils, college students and staff can continue to complete LFD (rapid) testing twice a week during their isolation period. Household members of **close contacts** do not need to self-isolate unless the contact develops symptoms. A letter template to send to the households of a close contact is available in Appendix 4.

## 4.2 Suspected and confirmed cases of COVID-19 in secondary schools/colleges

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| 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) during the 2 days beforehand? | |
|  | |
| **Yes** | **No** |
| * If individual is still in setting: isolate and arrange for them to go home immediately. If supporting staff cannot maintain 2m distance - wear [Personal Protective Equipment](https://www.gov.uk/government/publications/safe-working-in-education-childcare-and-childrens-social-care) (PPE). * Send all siblings/other household members home too. * Advise that the individual needs to stay 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 book a **PCR** test [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 no internet access).   Quickest way to test is via a local testing site – you must book in advance and appointments are available between 8am and 1.30pm for PCR tests.   * If the individual does not get tested, they and their household need to isolate for 10 full days (day the individual developed symptoms is counted as day ‘zero’). * 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. * Record absence info. * Make a note of staff, students/children who had [close contact](https://www.gov.uk/government/publications/actions-for-schools-during-the-coronavirus-outbreak/schools-coronavirus-covid-19-operational-guidance) with the individual whilst they were showing symptoms, or during the full 2 days before they developed symptoms. This is your ‘close contact list’ and you will need it if a test comes back positive. Remember to think of possible contacts at break times, on school transport and on the way to and from school. * If the individual has tested positive via an LFD test, advise close contacts to stay at home immediately (pending PCR result) and follow flow-chart for LFD testing. | * Contact staff member/student or parent/carer – advise to follow [stay at home guidance](https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance) and arrange **PCR** testing. * Ask the member of staff/student or parent/carer to inform you of test date and results. * Not getting PCR tested? Advise of need for individual and household to isolate for 10 full days (day after symptoms developed counted as day 1) * Record absence info * Individual tested positive via LFD? - close contacts stay at home immediately (pending PCR result). |
| Please email any queries to [educationIPC@cumbria.gov.uk](mailto:educationIPC@cumbria.gov.uk) (monitored by CCC Public Health team Mon-Fri) | |
|  | |
| Individual receives their **PCR** test result (if inconclusive – PCR retest required) | |
|  | |
| **PCR test result is positive (or no PCR within 2 days of positive LFD)** | **Test result is negative** |
| * Individual and household need to complete full 10-day stay at home period. * Individual can return to setting after 10 full days (as long as no high temperature for 48 hours). * Close contacts from the bubble/setting will need to stay at home for 10 full days from last date in contact with the individual who has tested positive (household members of close contacts do **NOT** need to isolate). Provide details on financial support available to families having to stay at home. * Inform all parents within the bubble/setting to ensure they watch for symptoms. * PCR testing will not routinely be offered to close contacts, but they can continue to LFD test twice per week where appropriate (LFD testing **NOT** recommended for children of primary school age and younger). * Contact the Cumbria County Council COVID-19 Call Centre on 0800 783 1968 or email [EducationIPC@cumbria.gov.uk](mailto:EducationIPC@cumbria.gov.uk) in order to notify them of the test result. Give details about the positive case so they can be followed up. 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.  Further local follow up may take place in order to manage local incidents/outbreaks. * If you have more than one individual in the setting with a positive test result, outbreak support will be provided to you via local public health services. They will contact you with advice. * For confirmed staff cases of **work related** COVID-19: report via the accident/incident report form and submit to the Cumbria County Council health and safety team mail box [healthandsafety@cumbria.gov.uk](mailto:healthandsafety@cumbria.gov.uk) | * Agree return date with staff member/student or parent/carer. * Individual can return to the setting straight away as long as:   - no high temperature, vomiting or diarrhoea for 48 hours  - NOT a close contact of a positive case  - NOT a household contact of possible/confirmed case   * Other household contacts can also come out of isolation * Negative PCR test taken within 2 days of positive LFD test? Individual and contacts can end stay at home isolation. If PCR more than 2 days after positive LFD – individual and contacts continue to stay at home for 10 days |

**\*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

**What about if individual has recently received the COVID-19 vaccine?**

If staff develop a high temperature in the 48 hrs after having the vaccine, they are able to come back to work as soon as they feel well enough to do so.

If the high temperature lasts longer than 48 hours, or is accompanied by any of the other symptoms of COVID-19 (i.e. change to/loss of sense of taste/smell or a new continuous cough) the individual should isolate and get a PCR test to check they do not actually have COVID-19. The vaccine will not influence the result of the test.

The [Green Book](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/961287/Greenbook_chapter_14a_v7_12Feb2021.pdf) contains very detailed information about vaccines, including expected side effects.

The most common side effects we expect to see (and the approximate % of people being vaccinated who are likely to experience these symptoms) are:

* Injection site pain (up to 80%)
* Fatigue (up to 60%)
* Headache (up to 50%).
* High temperature (>38°C) within the first 48 hours (10-25%)
* Muscle aches and/or joint pains

Side effects are generally less common in those aged over 55 than those aged 16 to 55 years. Taking paracetamol can help manage any side effects. If staff develop any side effects that they are worried about, they should contact their GP or call NHS 111. They should also report their side effects to the regulatory agency [here](https://coronavirus-yellowcard.mhra.gov.uk/).

## 4.3 Isolating symptomatic individuals within the setting

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

* The individual must be sent home immediately (along with any household members)
* Individual should be isolated within the setting behind a closed door until collection. If this is not possible, the individual must move to an area which is at least 2 metres away from other people.
* If the individual 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 (type IIR) 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 type IIR surgical face mask
  + Eye protection (goggles, visor) if there is a risk of fluids entering the eye, for example from coughing, spitting or vomiting

4.4 Management of a possible group of cases or outbreak

**What to do if there are 2 or more confirmed cases at the school:**

Continue to promptly notify any positive cases to the public health team at Cumbria County Council, either by calling the COVID-19 call centre (0800 783 1968) or by emailing [EducationIPC@cumbria.gov.uk](mailto:EducationIPC@cumbria.gov.uk). A member of the team will contact the setting and talk through situation. If it is identified that the COVID-19 (coronavirus) cases are likely to be linked, the team may advise you on additional measures that need to be taken to reduce further transmission (e.g. wider testing or isolation).

Any confirmed incidents or outbreaks are also reviewed by the Cumbria COVID-19 Educational Outbreak Control Team to ensure that settings are receiving all the support possible from a range of teams and organisations including public health, environmental health, health & safety, Learning, Improvement & Skills and school transport.

It is not unusual for self-isolating children, students or staff who have been identified as close contacts of a case to report a couple days later that they have developed symptoms or tested positive for COVID-19 (coronavirus). If the close contact was self-isolating for the two days before they developed symptoms/tested positive if no symptoms, the only recommended actions are:

* Check they have not had social contact with anyone else from the setting during their infectious period
* Contact the Public Health team (via the Call Centre number of email address above) and provide details of any additional positive cases, so we can ensure the individuals social contacts are traced and common exposures assessed.

# Section 5: LFD (rapid) testing in **Secondary Schools and Colleges**

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| **Pupil, student or member of staff carries out LFD test at home or at school/college** | | | |
| * Follow instructions carefully. Test twice weekly, ideally 3-4 days apart. * Test night before or on morning of attending the setting (no further back than this). * Swab both the tonsils (or area tonsils would have been) AND nose. * Wait full 30 minutes before reading test result. Do not go into setting until you know test result. * Individuals testing positive via PCR within the past 90 days are exempt from LFD testing. * Individuals with symptoms of COVID-19 should not LFD test. Follow flow chart for ‘managing suspected and confirmed cases’. * Vaccinated individuals are encouraged to participate in regular LFD testing. * LFD testing is NOT recommended for children of primary school age or younger. | | | |
|  |  | | |
| **LFD Test result negative** | **LFD Test result positive** | | **LFD Test Result void** |
| * Staff member, parent/carer or college student records test result for NHS Test and Trace [here](https://www.gov.uk/report-covid19-result) (or call 119). * Individual can attend setting as normal. * Setting records result on test result register (optional). * Continue testing twice per week. * All individuals should continue to follow COVID-safe practices (e.g. ‘Hands/Face/Space’). * Test result negative but individual develops symptoms? - they should get a [PCR test](https://www.gov.uk/guidance/coronavirus-covid-19-getting-tested) and isolate with their household until result known. * LFD accidentally recorded as positive? Complete another LFD test and record accurate result immediately. | * Staff member, parent/carer or college student records test result for NHS Test and Trace [here](https://www.gov.uk/report-covid19-result) (or call 119) and informs school/college. * Advise that the individual needs to stay 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 to get a **PCR** test WITHIN 2 DAYS of LFD – book [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 no internet access). * Quickest way to test is via a local testing site – you must book in advance and appointments are available between 8am and 1.30pm for PCR tests. * Identify close contacts from setting and instruct them to stay at home (don’t wait for PCR result). * Contact CCC Call Centre on 0800 783 1968 to notify of positive LFD test result. * Record LFD test result on your test result register. * Remind individual or parent/guardian to contact setting to inform of PCR test result. | | * Individual records test result for NHS Test and Trace [here](https://www.gov.uk/report-covid19-result) (or call 119). * Advise individual to complete another rapid test (using LFD) as soon as possible. |
|  | | | |
| **Confirmatory PCR Test result negative** | | **Confirmatory PCR Test positive or NOT carried out within 2 days of positive LFD** | |
| * **RISK ASSESS!** Check individual does not have any symptoms of illness or known contact with positive case. If ‘no’ follow steps below. Contact public health for advice if required via email: [EducationIPC@cumbria.gov.uk](mailto:EducationIPC@cumbria.gov.uk) * Individual can return to school as long as no high temperature, vomiting or diarrhoea for 48 hours. * Individual (and their household) + non-household close contacts can end isolation. Contact non-household contacts to inform them. * Continue testing twice per week (if any LFD test comes back positive again in next 10 days contact Public Health for advice). * Continue to follow all COVID-safe practices (e.g. ‘Hands/Face/Space/Fresh Air). * School should record test result and call result through to the CCC call centre on 0800 783 1968. | | * Advise individual and household to stay at home for full 10 days (count day following LFD test as day 1’). Follow [‘stay at home’ guidance](https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance). * Contact close contacts and confirm they should stay at home and isolate for full 10 days (day following last day of contact with positive case counted as day 1). Provide details on financial support available to families having to stay at home. * Close contacts can continue to LFD test twice weekly. If any close contacts develop symptoms, they should get a PCR test (and rest of household should now isolate). * If the individual who has tested positive develops symptoms during their 10-day stay at home period, they and their household members need to restart their full 10 days ‘stay at home’ (day following onset of symptoms counted as day 1) * When individual returns to setting, they are exempt from LFD testing for 90 days from the date of the positive PCR test. | |
| Any queries or questions: contact the Cumbria County Council Public Health Team: [EducationIPC@cumbria.gov.uk](mailto:EducationIPC@cumbria.gov.uk) | | | |

# Section 6: Frequently asked questions

## 6.1 Cases and contacts

**Should a child/student/staff member come to school if a member of their household is unwell?**

No. If a member of the household is unwell with COVID-19 symptoms then the child/student/staff member should isolate immediately until the result of a PCR test (by the individual with symptoms) is known. The PCR test should be taken within 5 days of symptom onset.

Where the PCR result is positive (or where NO PCR test is taken) the isolation period includes the day the household member(s) became unwell and the next 10 full days. If the symptomatic household member’s PCR test is negative, the child/student/staff member can return to the setting.

If the child/student/staff member subsequently develops symptoms, then they should get a COVID-19 PCR test and if the result is positive the child should isolate for a further full 10 days from the date, they developed symptoms. See [Stay-at-home-guidance](https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance).

**If I am notified by a parent that their child is ill do I need to exclude the other children in their class/bubble?**

No, classmates and staff can attend school/college as normal. The child/young person who is ill should stay at home ([Stay-at-home-guidance](https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance)) and be advised to get a PCR test. If they have any siblings who attend the setting, they should also be self-isolating at home for 10 days. If the individual tests positive for COVID-19 via PCR test, close contacts should be excluded for 10 days. If the individual tests negative for COVID-19 via PCR, there is no further action for close contacts from the setting.

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

The child 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). Siblings from the same household must also self-isolate for 10 days. Non-household close contacts do not need to be isolated, however please contact the public health team via [EducationIPC@cumbria.gov.uk](mailto:EducationIPC@cumbria.gov.uk) if you have any concerns.

**Who is considered a contact in a school setting?**

A contact is defined as a person who has had contact (see below) at any time from two days before onset of symptoms (or time of test if asymptomatic) to 10 days after onset of symptoms (or test). For example, a person who developed symptoms at 2pm on the 15th November would be asked to identify contacts from the morning of 13th November onwards.

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

1. Being within 1 metre of a positive case for 1 minute or longer without face-to-face contact
2. Being within 2 metres of a positive case for more than 15 minutes, either all at once or cumulatively over 24 hours
3. Travelling in a vehicle with a positive case (see next FAQ for details)
4. Spending a significant amount of time in the same household as a positive case

**How should I assess if pupils/students/staff that travelled in the same vehicle should be classed as close contacts?**

If other pupils or staff travelled in the same car as a case, they would be considered to be close contacts.

In a larger vehicle such as a school bus (dedicated school transport) a risk assessment should be carried out. Close contacts would include those individuals sitting within a 2m radius of the case in the same way contacts are identified from seating plans in classroom areas.

If there is no seating plan and the case cannot remember who their close contacts are, consideration may be given to isolating individuals who sat in a particular section of the bus. Other factors to consider as part of the risk assessment are ventilation, length of journey and compliance with wearing face coverings. You may also wish to consider sending a warn and information letter to parents/guardians of those on the bus who are not considered close contacts to raise awareness that COVID-19 is circulating, the signs and symptoms and when to seek a test.

If the case uses public transport and not a dedicated school transport service, then contact tracing by the school is not expected as a default. If the case is able to remember clearly, then close contacts should be asked to self-isolate where the case is able to recall sitting within a 2m radius of the contacts in the same way as for seating plans in classroom areas. If you need assistance in risk assessing please email: [EducationIPC@cumbria.gov.uk](mailto:EducationIPC@cumbria.gov.uk)

**Which contacts need to self-isolate?**

Where the child, young person or staff member *tests positive* by either Lateral Flow Test or PCR test and they had attended the school in the two days prior to developing symptoms, direct and close contacts will be identified and advised regarding self-isolation.

Please note: The other household members of that wider class or group do not need to self-isolate unless the child, young person or staff member they live with in that group subsequently develops symptoms.

**A pupil/student/staff member has been advised by Test and Trace to isolate for longer than 10 days from the start of their symptoms, why?**

If the date of onset of symptoms is more than 5 days before the test date, self-isolation must continue for a further 5 full calendar days after the test date. Isolation periods are also extended if symptoms develop at a point following a positive test result if the individual did not have symptoms at the time of the test.

**A pupil/student/staff member was isolating because of a positive test result and did not have any symptoms but then developed symptoms during their isolation period when does their isolation period end?**

If a pupil/student/staff member is isolating because of a positive test result but did not have any symptoms, and then they develop COVID-19 symptoms within their isolation period, they must start a new 10-day isolation period by counting 10 full days from the day following their symptom onset.

**If a further member of the household develops symptoms while the child/student/staff member is already in self-isolation does the child/student/staff member need to restart their self-isolation period?**

No. If the child/student/staff member has already tested positive than they only need to self-isolate for 10 days after the date of onset of symptoms or the date of the test.

If the child/student/staff member is another household contact without symptoms then if they remain well, they can return to their normal routine at the end of the 10-day period. The child/student/staff member does not need to isolate for longer than 10 days, even if other household members develop symptoms during this period.

After 10 days, if any of the household members develop symptoms then the whole household needs to start a new 10-day self-isolation period.

**Can the siblings of a child or young person who is isolating, because they are a contact of a case, attend school or college?**

Yes, other household members of the contact do not need to self-isolate unless the child, young person or staff member they live with in that group subsequently develops symptoms

**A child/student/parent reports to us that they have had contact with someone with symptoms – what should we do?**

There is no action required of the school. No one with symptoms should be attending school/college and anyone who develops symptoms whilst in the setting should be isolated and sent home as soon as possible. Settings should regularly remind parents of the government guidance on staying at home and the importance of a household self-isolating if anyone in the household develops symptoms.

**If an individual has COVID-19 symptoms, gets tested and tests negative, can they return to school/college even if they still have symptoms?**

If the individual is NOT a known contact of a confirmed case the child can return to school if the result (specifically from a PCR test) is negative, provided they have been fever-free for 48 hours and feel well. Individuals with symptoms should not use LFD (rapid) tests.

If an individual is a contact of a confirmed case, they must stay off school for the 10-day isolation period, even if they test negative. This is because they can develop the infection at any point up to day 10 (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 a child who was a contact of a confirmed case tests negative, can they return to school?**

No, the child should complete 10 days of isolation.

**Does a child who was identified as a contact need to have a negative test before they can return to school?**

No, schools should not request evidence of a negative test result or other medical evidence before admitting children after a period of self-isolation.

Any individual (staff / pupil) who remains asymptomatic within 90 days of testing positive needs no further test for clinical or public health reasons unless they develop symptoms. They are therefore exempt from LFD (rapid) testing.

**If I get confirmed cases does the setting need to close?**

The school does not need to close on public health grounds. Schools and colleges will generally only need to close if they have staff shortages due to illness or being identified as contacts. It is expected that only the class of a confirmed case will need to be excluded. If there are a number of confirmed cases across different classes and year groups at the same time, then the school/college may be advised to close by public health in consultation with other partners.

**If I get more cases in a bubble do I need to do anything further?**

No. Further cases among contacts that have already been excluded are likely to arise and do not need any further action if appropriate action has already been taken and the child, student or staff member has no additional contacts in the two days prior to developing symptoms.

**Should children with diarrhoea and vomiting be considered possible cases of COVID-19?**

No. The clinical definition for COVID-19 still remains the same; new and continuous cough, fever and loss of taste or smell. The case definition is kept under review and guidance will be updated if the case definition changes. If a child has diarrhoea and/or vomiting they should remain off school while symptomatic and until they have been free of symptoms for 48 hours. They do not meet the case definition for testing for COVID-19.

**Should pupils or students with respiratory symptoms not in the case definition (e.g. sore throat, congestion) be considered possible cases of COVID-19?**

No. The clinical definition for COVID-19 still remains the same; new and continuous cough, fever and loss of taste or smell. The case definition is kept under review and guidance will be updated if the case definition changes. If an individual has other respiratory symptoms then generally, they can return to the setting when well enough to do so. There is no need for the child to get tested unless they develop one of the COVID-19 symptoms, or if specifically asked to do so as part of outbreak management arrangements. Schools and colleges should not ask for evidence of a negative test as only those with COVID-19 symptoms should be tested. Guidance on exclusion periods for common childhood diseases can be found [here](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/789369/Exclusion_table.pdf)

## 6.2 Testing

Schools and colleges should promote and engage in asymptomatic testing where available. Please check the links below for the latest guidance:

* [Asymptomatic testing for primary schools and nurseries](https://www.gov.uk/government/publications/coronavirus-covid-19-asymptomatic-testing-for-staff-in-primary-schools-and-nurseries/rapid-asymptomatic-coronavirus-covid-19-testing-for-staff-in-primary-schools-school-based-nurseries-and-maintained-nursery-schools)
* [Asymptomatic testing in secondary schools and colleges](https://www.gov.uk/government/publications/coronavirus-covid-19-asymptomatic-testing-in-schools-and-colleges/coronavirus-covid-19-asymptomatic-testing-in-schools-and-colleges)

**A member of staff, pupil or student has carried out an LFD test, which was negative, but they have accidentally recorded it as a positive result. What should they do?**

The member of staff or pupil should carry out another LFD test as soon as possible. Recording the negative result will overrule the previously recorded incorrect result.

**Why does a follow-up PCR test need to be completed within 2 days of a positive LFD test result?**

Any PCR test carried out more than 2 days after the positive LFD test may not accurately reflect the individual’s infectiousness at the time of the LFD test. Therefore, if a PCR is not completed within 2 days, you will have to err on the side of caution and act on the LFD test result. This will normally mean identifying and isolating close contacts and advising the individual with the positive LFD test result and their household to also isolate for the full 10 days

**Why do we identify close contacts and ask them to stay at home before the PCR result is known?**

The most effective way to reduce onward transmission of COVID-19 is to act as quickly as possible once we are aware of a positive test result. This includes identifying close contacts and asking them to stay at home. Close contacts from the full 2 days prior to the positive LFD test result should stay at home.

**Is there a legal obligation to stay at home (isolate) when an individual tests positive via LFD?**

An individual who has tested positive via LFD (and their household) are ***strongly advised*** to stay at home until the result of the follow-up PCR test is known. The legal obligation to stay at home (isolate) is triggered once a person receives a positive PCR test result.

**Is it OK to continue to participate in LFD testing once an individual has been vaccinated?**

Yes, individuals who have been vaccinated should continue to participate in twice-weekly LFD testing. This is because the evidence is still developing around how the vaccine protects you and reduces your risk of transmitting COVID-19 to other people. Whether or not you have had the vaccine will not affect your LFD test result.

**Can close contacts continue to LFD test twice a week during their 10-day stay at home period?**

Yes, they can continue to LFD test twice a week. If they develop symptoms of COVID-19 they should book a PCR test straight away.

## 6.3 High risk groups

**Should pupils, students or staff who are shielding (classed as clinically extremely vulnerable due to pre-existing medical conditions) attend school?**

The most up to date guidance on shielding and protecting people who are clinically extremely vulnerable from COVID-19 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).

Clinically extremely vulnerable pupils and students should have returned to their school or other educational setting from 1 April 2021.

Where parents are concerned about their child’s attendance, they should speak to their child’s school about their concerns and discuss the protective measures that have been put in place to reduce the risk. They should also discuss other measures that can be put in place to ensure their children can regularly attend school.

**What specific steps should be taken to care for children with complex medical needs, such as tracheostomies?**

New guidance has been published and is available [here](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) which states ***that oral or nasal suction are no longer classified as Aerosol Generating Procedures (AGPs***).

**Can our pregnant members of staff work? What if staff have pregnant household members?**

Pregnant women are in the “clinically vulnerable” category and can return to work at school.

All clinically vulnerable staff should take particular care to observe good hand and respiratory hygiene, maintain 2 metre distance from others and where this is not possible 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 (RCOG) has published [Occupational Health advice for employers and pregnant women](https://www.rcog.org.uk/en/guidelines-research-services/guidelines/coronavirus-pregnancy/). This document includes advice for women from 28 weeks gestation or with underlying health conditions who may be at greater risk. The Department of Education guidance advises pregnant women and employers to continue to monitor for future updates to it. Pregnant women with no underlying health conditions should return to work as normal.

**Should children or staff who have family in the shielding group be coming to school/work?**

Children or staff who live with people who are clinically extremely vulnerable can continue to attend school/work.

## 6.4 Staff

**We have had a child confirmed as a case and had contact with staff, including catering staff at lunch, do they need to be excluded?**

It depends on the level of contact. Staff would need to be excluded only if they had face to face contact with a case for any length of time, including being coughed on or talked to. This includes exposure within 1 metre for 1 minute or longer OR the staff member had extended close contact (within 2 metres for more than 15 minutes) with the case. The public health team at Cumbria County Council can advise and help the school to identify contacts that need to be excluded. They can be emailed via [EducationIPC@cumbria.gov.uk](mailto:EducationIPC@cumbria.gov.uk)

**Can the school still have supply teachers come in if there have been multiple cases?**

Local risk assessment should be undertaken and staff excluded if in direct contact with a symptomatic case according to the national guidance.

If a supply teacher has not been identified as a close contact in any of their workplaces then exclusion will not be necessary, and they should be able to work.

**Can non-teaching staff, for example cleaners and caterers, work for 2 or more schools?**

Local risk assessment should be undertaken and staff excluded if in direct contact with a positive case according to the national guidance.

If a staff member has not been identified as a close contact in any of their workplaces then exclusion will not be necessary.

[Schools are being advised](https://www.gov.uk/government/publications/actions-for-schools-during-the-coronavirus-outbreak/guidance-for-full-opening-schools) to adopt preventative measures including small class sizes and social distancing to minimise contact between students and teachers.

## 6.5 Transport to and from school

**Public Transport**

Individuals who come to school and college via public transport are required to wear face coverings, and to observe social distancing.

**Designated school transport**

The approach to dedicated transport should align wherever possible with the principles underpinning the system of controls set out in this document and with the approach being adopted for your school. It is important, wherever it is possible, that:

* social distancing should be maximised within vehicles
* children either sit with their ‘bubble’ on school transport, or with the same constant group of children each day
* If the designated school transport includes children outside the ‘bubble’ then face coverings should be recommended
* children should clean their hands before boarding transport and again on disembarking
* additional cleaning of vehicles is put in place
* organised queuing and boarding is put in place
* through ventilation of fresh air (from outside the vehicle) is maximised, particularly through opening windows and ceiling vents

***While waiting for school transport social distancing must be maintained***

## 6.6 Immunisations

**Do staff members that have been vaccinated still need to isolate if identified as a contact?**

Yes, staff members should follow the guidance for self-isolation regardless of COVID vaccination status.

**Do staff members that have been vaccinated still need to get tested?**

Yes. All staff should continue to participate in asymptomatic testing and if they should develop symptoms arrange to have a PCR test.

**Should school-based immunisations take place?**

It is really important that school-based immunisation programmes take place as normal. These programmes are essential for children’s health and wellbeing and can also provide benefits for staff. Schools should engage early with their local immunisation providers to facilitate this and advice should be sought from their Local Authority.

**A child has developed a fever following vaccination do they need to isolate?**

No. Vaccines may cause a mild fever in children. This is a common and expected reaction, and isolation is not required unless coronavirus (COVID-19) is suspected. Parents and carers should monitor side effects from a vaccination, and if they are concerned about their child’s health, they should seek advice from their GP or NHS 111.

## 6.7 Music

**Can music lessons go ahead?**

When planning music provision, schools should consider additional specific safety measures. These include

* Playing instruments and singing in groups should take place outdoors wherever possible.
* Pupils should be positioned back-to-back or side-to-side when playing or singing
* Avoid sharing instruments and equipment (including scores and scripts). If instruments and equipment must be shared, disinfect regularly (including any packing cases, handles, props, chairs, microphones and music stands) and always between users.
* Singing, wind and brass playing should not take place in larger groups such as choirs and ensembles, or assemblies unless significant space, natural airflow (at least 10l/s/person for all present, including audiences) and strict social distancing and mitigation can be maintained

## 6.8 Physical Education

Schools have the flexibility to decide how physical education, sport and physical activity will be provided whilst following the measures in their system of controls.

Schools should refer to the following guidance:

* [Guidance on the phased return of Sport and Recreation](https://www.gov.uk/government/publications/coronavirus-covid-19-guidance-on-phased-return-of-sport-and-recreation) and guidance from [Sport England](https://www.sportengland.org/how-we-can-help/coronavirus) for grassroot sport
* advice from organisations such as the [Association for Physical Education](https://www.afpe.org.uk/physical-education/wp-content/uploads/COVID-19-Interpreting-the-Government-Guidance-in-a-PESSPA-Context-FINAL.pdf) and the [Youth Sport Trust](https://www.youthsporttrust.org/coronavirus-support-schools)
* guidance from Swim England on school swimming and water safety lessons available at [returning to pools Guidance Documents](https://www.swimming.org/swimengland/pool-return-guidance-documents/)

## 6.9 Cleaning

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

It is important to concentrate on regular cleaning of frequently touched items/surfaces. This is likely to be highly effective as high contact surfaces will present the main risk in terms of indirect transmission. So long as regular cleaning is thorough and maintained at all times there is no need for additional cleaning.

* Cleaning an area with normal household disinfectant after someone with suspected coronavirus (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.
* Using a disposable cloth, first clean hard surfaces with warm soapy water. 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 the disposable materials should be double-bagged, then 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.

**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, but not after every use (except if used by a symptomatic person whilst waiting to go home).

Increase the frequency of cleaning toilets to at least five times a day:

* before school starts
* after morning break
* after lunch
* after afternoon break
* at the end of day.

Apart from gloves and apron, there is no need for additional PPE.

Use disposable cloths or paper roll and disposable mop heads, to clean all hard surfaces, floors, chairs, door handles and sanitary fittings, following one of the options below:

* use 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.

6.10 Test and Trace Support Payments

**Are parents and carers of children who have been advised to self-isolate by the school or by NHS Test and Trace eligible for support payment?**

Yes, parents/carers are now eligible to apply for a [Test and Trace Support Payment](https://eur01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.gov.uk%2Fgovernment%2Fpublications%2Ftest-and-trace-support-payment-scheme-claiming-financial-support%2Fclaiming-financial-support-under-the-test-and-trace-support-payment-scheme%3Futm_source%3D22%2520March%25202021%2520C19%26utm_medium%3DDaily%2520Email%2520C19%26utm_campaign%3DDfE%2520C19&data=04%7C01%7CEmma.Savage%40phe.gov.uk%7C6213d2860e4349b7270f08d8ed3c681d%7Cee4e14994a354b2ead475f3cf9de8666%7C0%7C0%7C637520190988624265%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C1000&sdata=PzwGqLTbQXn8ehd0SplTzbZmVp0aY%2B3%2B5DYHnhbVsDI%3D&reserved=0) or discretionary payment of £500, if they meet the eligibility criteria. Schools will need to provide a letter to all parents/carers of children advised to self-isolate to support their application. Parents/carers will then need to contact their local district council to apply for the grant.

Section 7: National Guidance

This local guidance document has been based on national PHE, NHS and government guidance. Hyperlinks to key national guidance are displayed here for reference (click on the link to be taken to the relevant guidance/information online).

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 schools and other educational settings](https://www.gov.uk/government/collections/coronavirus-covid-19-guidance-for-schools-and-other-educational-settings)
* [Guidance for full opening of schools](https://www.gov.uk/government/publications/actions-for-schools-during-the-coronavirus-outbreak/guidance-for-full-opening-schools)
* [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)
* [Guidance on isolation for residential educational settings](https://www.gov.uk/government/publications/coronavirus-covid-19-guidance-on-isolation-for-residential-educational-settings/coronavirus-covid-19-guidance-on-isolation-for-residential-educational-settings)
* [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/)
* [Asymptomatic testing for primary schools and nurseries](https://www.gov.uk/government/publications/coronavirus-covid-19-asymptomatic-testing-for-staff-in-primary-schools-and-nurseries/rapid-asymptomatic-coronavirus-covid-19-testing-for-staff-in-primary-schools-school-based-nurseries-and-maintained-nursery-schools)
* [Asymptomatic testing in secondary schools and colleges](https://www.gov.uk/government/publications/coronavirus-covid-19-asymptomatic-testing-in-schools-and-colleges/coronavirus-covid-19-asymptomatic-testing-in-schools-and-colleges)

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 school 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 school

|  |
| --- |
| 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 at school | 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 setting, Head Teachers and other 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 school setting

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

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: Information required when reporting a positive case

When speaking to the call centre or education IPC team, please have the following information available:

|  |  |
| --- | --- |
| **Setting details** | DfE number |
| **Case details** | Full name |
| Date of Birth |
| Address |
| Role (pupil, teacher, catering staff etc.) |
| **Test details** | Type of test (PCR or LFT) |
| Date of test |
| **Symptom details** | Type of symptoms if applicable |
| Date of symptom onset if applicable |
| **Potential contacts** | Date when last in setting |
| Number of close contacts identified |
| Number of bubbles affected |
| Total number of cases in setting |
| **Vaccination details** | Has the case been vaccinated? |
| Brand of vaccine |
| Number of doses |
| Date of second dose if applicable |

# Appendix 5: Letter templates for communication with parents/carers

|  |  |  |
| --- | --- | --- |
|  | Secondary | College |
| Pupil/Student has suspected symptoms of COVID-19 |  |  |
| Pupil/Student has tested positive for COVID-19 |  |  |
| Pupil/Student is a close contact of a confirmed case of COVID-19 (when a PCR test is positive) |  |  |
| Pupil/Student is a close contact of a confirmed case of COVID-19 (when an LFD test is positive, awaiting PCR result) |  |  |
| Individual in setting has tested positive, but has not been in setting during their infectious period |  |  |