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

Version 4b

May 2021

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 specific to PVI 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 7.

This guidance applies to PVI settings in Cumbria.

Separate resource packs are available for Secondary Schools, Specialist Residential Settings, Primaries, Junior 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) (Saturday and Sunday 1000 -1400)

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

## 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 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 also have a much lower risk of developing symptoms or severe disease than older adults.

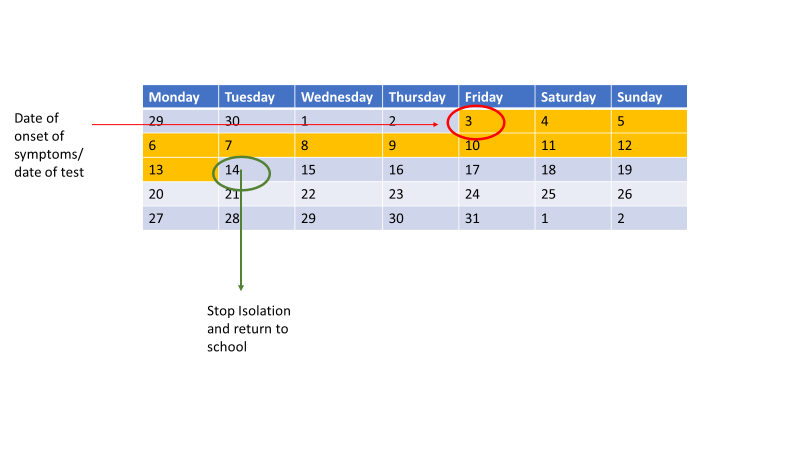
## Types of test

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. Rapid testing is now available for primary school staff members, as well as parents, carers, and households of primary school-aged children. Primary pupils not being asked to be tested as they are unlikely to get seriously unwell from COVID-19.
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 staff or pupils with symptoms, or asymptomatic staff who have had a positive LFD test.

## 2.7. Self-Isolation timings for positive cases

If a child or staff member tests positive for COVID-19 via PCR test, 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.

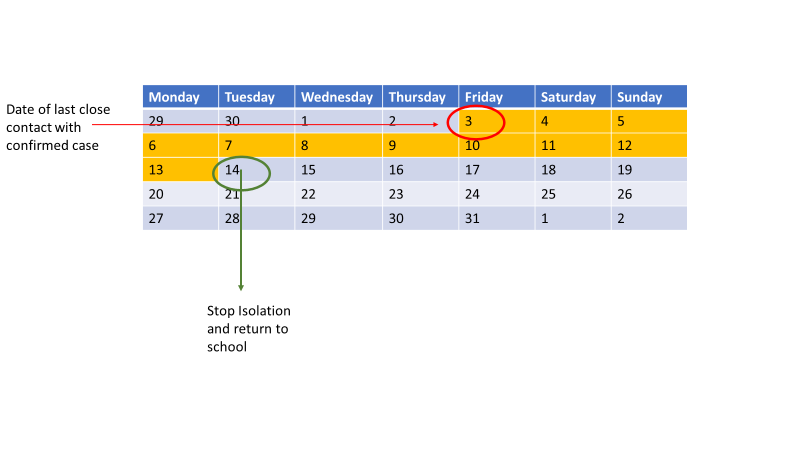
For example, if symptoms started at any time on the 3rd of the month, the isolation period would end at 23:59 hrs on the 13th.

If a 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.

## 2.8. Self-Isolation timings for close contacts

If an individual 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 asymptomatic case goes on to develop symptoms within their 10-day isolation period, they and their household need to restart their isolation period for 10 full days from symptom onset. 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.

## 2.9. 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 of the positive case.

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. See below for guidance on how to risk assess contacts who have shared a vehicle with a positive case. Please contact Public Health via [EducationIPC@cumbria.gov.uk](mailto:EducationIPC@cumbria.gov.uk) if further support or advice is required.
4. Spending a significant amount of time in the same household as a positive case

## Meaning of self-isolation

Self-isolation means the child or staff member should:

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

# Section 3: Establishing a COVID-secure childcare setting



## Public health advice

[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 and childcare settings 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 the setting if they or anyone in their household has COVID-19 symptoms
2. Encourage PCR testing for suspected staff member cases, and use the results to inform isolation requirements for close contacts
3. Use face coverings inside the setting 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 for staff

## 3.2. Adult Use of Face Coverings

In Early Years Settings the system of controls provides some mitigating measure. However, we recommend that face coverings should be worn by staff and adults (including visitors) in situations where social distancing between adults is not possible (for example, when moving around in corridors and communal areas). It is advisable that parents and carers continue to wear face coverings when picking up and dropping off children at the school, and on public transport if used.

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

Children in early years settings should not wear face coverings.



## Music in childcare 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 their carers.

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 guidance provided by the Department for Culture, Media and Sport (DCMS):

* Singers and players should be 2 metres apart, and ventilation should be encouraged
* Children should remain in their usual groups during dance and music sessions
* Keep any background or accompanying music low to avoid encouraging participants to raise their voices unduly. If possible, use microphones to reduce the need for shouting or prolonged periods of loud speaking or singing.
* Avoid sharing equipment where possible. Where sharing is necessary, follow the guidance on handling equipment.

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

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 10.



## 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.

In an outbreak situation, we may consider other symptoms on a case by case basis. For further advice if concerned about any other symptoms of illness, please contact the Cumbria County Council Public Health team by emailing [EducationIPC@cumbria.gov.uk](mailto:EducationIPC@cumbria.gov.uk)

## 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 full days, with day ‘1’ being counted as the day following the day that symptoms first started. Members of the same household will also have to isolate for 10 full 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.

## 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 and 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, with day ‘1’ being counted as the day following the day when symptoms first started. All household members also need to isolate for 10 full 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.

## Identifying close contacts of confirmed positive cases

People with COVID-19 are considered to be infectious from 2 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 full days afterwards. To prevent ongoing transmission, it is important to identify and isolate anyone who has come into close contact with a confirmed case within this timeframe.

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 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.

## 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 **2 days** 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 individuals aged 2+Years. * If the individual does not get tested, they need to isolate for 10 full days following the onset of symptoms. Household members will also need to isolate for 10 full days from the same date. * Record absence info. * 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 2 days 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. * If the staff 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 individual and advise to follow [stay at home guidance](https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance) and arrange **PCR** testing. * Ask them to inform you of test date and results. * Not getting PCR tested? Advise that individual and household to isolate for 10 full days * Record absence info * Individual tested positive via LFD? close contacts stay at home pending PCR result. |
| If you have a query about a suspected case, please email E[ducationIPC@cumbria.gov.uk](mailto:ducationIPC@cumbria.gov.uk) (Mon-Fri 9-5)  or call the Department for Education helpline (0800 046 8687) | |
|  | |
| Staff receives their test result | |
|  | |
| **Test result is positive** | **Test result is negative** |
| * Advise the individual to continue with their 10 full day isolation at home. They can return to the setting after 10 full days if they are feeling well and have not had a high temperature for 48 hours. * Other household members must continue their 10 full 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 10 full 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 Cumbria County Council 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 * 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 staff member 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

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

It’s quite common to develop a fever after a vaccination. This normally happens within 48 hours of the vaccination and usually goes away within 48 hours. If staff develop a high temperature in the 48 hrs after having the vaccine, they do not have to self-isolate unless they are a close contact of a positive case or live with someone with suspected or confirmed COVID-19 infection.

However, if the fever starts more than 48 hours after the vaccination or lasts longer than 48 hours, or is accompanied by other symptoms of COVID-19, the staff member should self-isolate and book a PCR test. This is because they may have contracted COVID-19 shortly before or after having the vaccine, before they had time to develop immunity to the virus. Having had the vaccine will not affect the result of a PCR 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 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 Government’s [Medicines and Healthcare products Regulatory Agency](https://coronavirus-yellowcard.mhra.gov.uk/).

## Isolating symptomatic individuals within the setting

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

* The individual must be isolated within the setting behind a closed door, and arrangements made for them to go home immediately.
* If isolation behind a closed door is not possible, the symptomatic individual should 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
* The supervising adult should maintain a distance of at least 2 metres at all times
* If this cannot be maintained, the supervising adult should wear a Type IIR fluid-resistant surgical face mask
* If direct contact is required, then the following PPE should be worn by the supervising adult:
  + Disposable gloves
  + Disposable plastic apron
  + Type IIR Fluid-resistant surgical face mask
  + Eye protection e.g. goggles or visor if there is a risk of bodily fluids entering the eye, for example from coughing, spitting or vomiting

## Management of a possible group of cases or outbreak

Continue to promptly notify any positive cases to the public health team at Cumbria County Council COVID-19 call centre (0800 783 1968). This information will be passed to the Public Health team who may get in touch to discuss the cases. For specific queries or general advice, please contact the team via [EducationIPC@cumbria.gov.uk](mailto:EducationIPC@cumbria.gov.uk).

Close contacts of a case may develop symptoms or test positive for COVID-19 within a few days after contact. Provided they have been isolating for the two days prior to developing symptoms (or testing positive if asymptomatic), then 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: Lateral Flow Device (LFD) Testing

## 



## Asymptomatic workplace testing

Some people infected with COVID-19 do not show symptoms, but may still be able to pass the virus on to other people. Asymptomatic testing aims to detect these cases so that they and their contacts can be isolated as soon as possible to prevent ongoing transmission within the school. The process is summarised in the flow chart on page 14.

Participation in testing is not mandatory, but is strongly encouraged. Primary school staff should be offered twice-weekly asymptomatic testing using a Lateral Flow Device (LFD), which will be provided in individual test kits for staff to take home. Staff should be instructed to swab and process the tests themselves at home, and notify the school of any positive results. Setting leaders should ensure all testing follows standard operating procedure and risk assessment protocols.

**If the result is negative** the staff member can attend work as normal. Please note that a negative LFD test cannot entirely rule out infection, therefore if the staff member develops symptoms they must still isolate and book a PCR test. Similarly, if the staff member is identified as a close contact of a positive case, they must follow the stay at home guidance and self-isolate for 10 full days regardless of their LFD test results.

**If the result is positive** the staff member should inform the school and begin their 10 full day isolation period straight away, along with all other members of their household. All close contacts at school should be identified and asked to isolate. The result should be confirmed by PCR test taken within 48 hours of the positive LFD test. If the confirmatory PCR is also positive, the 10 full day isolation period continues, with day 1 counted as the day after the original positive LFD test. However, if confirmatory PCR testing is negative, the staff member and close contacts can come out of isolation and return to school, provided that they have not developed symptoms. A template letter explaining this system is available in Appendix 5.

**LFD testing within 90 days of a positive PCR result:**

Individuals who have recently had a positive PCR test for COVID-19 are likely to have developed some immunity. Staff are therefore exempt from testing by both PCR and LFD within 90 days of a positive PCR test, unless they develop new symptoms. If they test positive or are identified as a close contact of a positive case, they will be required to self-isolate again even if this is within the 90-day window.

If you would like any advice in relation to LFD testing, please contact the Public Health team at Cumbria County Council at [EducationIPC@cumbria.gov.uk](mailto:EducationIPC@cumbria.gov.uk%20)

## Flowchart for asymptomatic staff testing in early years settings

|  |  |  |  |
| --- | --- | --- | --- |
| **Member of staff carries out LFD test at home** | | | |
| * 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. Symptomatic children of this age should be tested via PCR. | | | |
|  |  | | |
| **LFD Negative** | **LFD Result positive** | | **LFD Result Void** |
| * Staff member 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. * Test accidentally recorded as positive? Complete another LFD test and record accurate result immediately. | * Staff member records test result for NHS Test and Trace [here](https://www.gov.uk/report-covid19-result) (or call 119) and informs setting. * 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 test – 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 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 Negative** | | **Confirmatory PCR Positive or NOT carried out within 48 hrs** | |
| * **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 contact the Cumbria County Council Public Health Team: [EducationIPC@cumbria.gov.uk](mailto:EducationIPC@cumbria.gov.uk) | | | |

# Section 6: Frequently asked questions

## 



## 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.

* Should a child or staff member come to school if a member of their household has symptoms of COVID-19?

No. If a member of their household is unwell with COVID-19 symptoms then the child or staff member should isolate immediately until the result of a PCR test is known.

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

If the child or staff member subsequently develops symptoms, then they should isolate immediately and get a PCR test. If this is positive, they should isolate for a further full 10 days from the date they developed symptoms.

* If I am notified that a child or staff member is ill, do I need to exclude the other children in their class/bubble?

No, classmates and staff can attend school as normal. The person who is ill should [stay at home](https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance/stay-at-home-guidance-for-households-with-possible-coronavirus-covid-19-infection) and get a PCR test, and their household members should also isolate until the test results are known. If the PCR test is positive, close contacts should isolate for 10 full days from the date that they last had contact with the case.

* 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.

* Which contacts need to self-isolate?

If the positive case has attended the school during their infectious period, close contacts from during that period should be identified and advised to self-isolate. The other household members of that wider class or group do not need to self-isolate unless the child or staff member they live with in that group subsequently develops symptoms.

* Why might Test and Trace advise a person to isolate for longer than 10 days?

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 or staff member is already in self-isolation does the child or staff member need to restart their self-isolation period?

No. If the child or 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 or 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 or 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 who has been sent home because they are a contact of a case attend school?

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

* What should we do if a child or parent reports to us that they have had contact with someone with symptoms?

There is no action required of the school. No one with symptoms should be attending school 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 household self-isolating if anyone in the household develops symptoms.

* If an individual has COVID-19 symptoms but tests negative by PCR test, can they return to school 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 PCR result 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 contact of a confirmed case tests negative, can they return to school?

No, they must complete 10 full days of isolation. This is because they can develop the infection at any point up to day 10 (the incubation period for COVID-19), so they may still go on to develop the infection.

* In addition to the 3 main symptoms, should any other symptoms be considered a possible indication of COVID-19 (e.g. diarrhoea, vomiting, other respiratory symptoms)?

No. The clinical definition for COVID-19 still remains the same: new and continuous cough, fever, and loss of taste or smell. Individuals with symptoms other than these do not need to get tested unless they develop one of the 3 main COVID symptoms. They can usually return to school when they feel well enough, provided they have not had any diarrhoea or vomiting within the last 48 hours. 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).

In some outbreak situations, the public health team may advise wider testing, however this is on a case-by-case basis. If you are concerned about any other symptoms of illness in children, please email Public Health via [EducationIPC@cumbria.gov.uk](mailto:EducationIPC@cumbria.gov.uk) and we will work with you to assess the risk.

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

They can return to school 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 10-day isolation period regardless of their test results.

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

No. Children and staff can return to school after completing their isolation period, if they are feeling well with no fever for at least 48 hours. Schools should not request evidence of a negative test results or other medical evidence before re-admitting people after a period of self-isolation. Anyone who tests positive via PCR test is exempt from testing for the subsequent 90 day, unless they develop symptoms.

* 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 2 days prior to developing symptoms. If the new case(s) does have additional close contacts within the school during this 2 day period, these contacts should be identified and asked to self-isolate.

* How do the parents/carers of children who have been asked to self-isolate access support payments?

Parents and carers are now eligible to apply for a Test and Trace Support Payment 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.

## Testing

Schools should promote and engage in asymptomatic testing where available, by following the latest [guidance](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).

* A member of staff has accidentally recorded a negative LFD test as a positive. What should they do?

The member of staff 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 48 hours of a positive LFD test result?

Any PCR test carried out more than 48 hours after the positive LFD test may not accurately reflect the individual’s infectiousness at the time of the LFD test. If a PCR is not completed within 48 hours, the positive LFD result will stand, meaning that the case and their contacts must complete 10 days of isolation.

* 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 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.

* Is participation in the workplace LFD testing programme mandatory?

Participation in testing programmes is optional but is strongly encouraged.

* How soon can staff members recommence LFD testing following a positive PCR test?

Staff members who have tested positive for COVID-19 by PCR test are exempt from LFD testing for 90 days following their positive test. If they develop symptoms of COVID-19 within this 90 day period, they should have a PCR test. They must isolate again if this is positive, or if they are identified as a close contact.

* Is a negative LFD test required for staff returning from self-isolation after testing positive?

No. Staff who have self-isolated for the required amount of time may return to the setting, provided they feel well enough to do so and have not had a high temperature for 48 hours. These individuals are exempt from workplace LFD testing for 90 days.

* Can LFD testing be used for staff who have symptoms?

No. LFD testing is for asymptomatic use only. If a member of staff develops symptoms, they should isolate along with their household and get a PCR test as soon as possible.

## High risk groups

* Should children or staff who are clinically extremely vulnerable (shielding) 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](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) has been produced indicating which care tasks are considered to be Aerosol Generating Procedures (AGPs). Oral or nasal suction are no longer classified as 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.

## 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. Anyone who meets the criteria of a close contact should be asked to self-isolate. The public health team can advise 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.

## Infection Prevention and Control

* 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 effective, as these surfaces present the main risk for indirect transmission. 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).

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.
* Do toilets need to be cleaned after every use?

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:

* Before school starts
* After morning break
* After lunch
* After afternoon break
* At the end of 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?

Avoid creating splashes and spray when cleaning. Disposable cloths or paper roll and disposable mop heads should be used to clean all hard surfaces, floors, chairs, door handles and sanitary fittings, followed by 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

If an alternative disinfectant is used, this should be checked and ensure that it is effective against enveloped viruses. 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).

## Vaccination

* Do staff members that have been vaccinated against COVID-19 still need to isolate if identified as a close contact of a positive case

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

* Do staff members that have been vaccinated against COVID-19 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 routine school-based immunisations take place?

Yes. 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.

* Does a child need to isolate and be tested for COVID-19 if they develop a fever following a routine childhood vaccination?

No. Mild fever is a common and expected response to vaccines in children, and isolation is not required unless 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.

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).

General guidance

* [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

Guidance on 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)

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](https://www.who.int/infection-prevention/campaigns/clean-hands/5moments/en/) poster
* [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

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 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 |
|  |  |  |  |  |  |  |  |  |  |
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**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

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 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 suspected case of COVID-19 (LFD positive) |  |
| Child is a close contact of a confirmed case of COVID-19 (PCR positive) |  |
| Bubble closure due to COVID-19 outbreak |  |
| Whole setting closure due to a COVID-19 outbreak |  |