

## INFECTIOUS DISEASES COVID-19 STEP 4 – SPRING TERM 2022

DfE Schools COVID-19 [operational guidance](#) explains the actions school leaders should take to reduce the risk of transmission of coronavirus (COVID-19) in their school. This includes public health advice, endorsed by Public Health England (PHE). The [Actions for early years and childcare providers](#) also explains the actions they should take to reduce the risk of transmission of coronavirus (COVID-19) in their setting. This includes public health advice, endorsed by Public Health England (PHE).

Advice or support, can be obtained by contacting the DfE helpline on 0800 046 8687 or email: [dfecoronavirushelpline@education.gov.uk](mailto:dfecoronavirushelpline@education.gov.uk). It is not mandatory to contact this helpline if educational settings are comfortable managing their own cases. However, the DfE helpline has an escalation process with the PHE Health Protection Teams and will notify them of any complex cases and issues which might require their input.

Helpline opening hours: Monday to Friday from 8am to 6pm (plus Saturday-Sunday 10am-6pm for advice about cases or other COVID-19 related issues).

There is no routine requirement to report COVID 19 cases to the local HPT, however, please contact them if you meet the criteria below, they can help with your risk assessments and give you further advice. Sometimes you might also require a multiagency response to support you. Email: [ICC.TVPHEC@phe.gov.uk](mailto:ICC.TVPHEC@phe.gov.uk)

If you have 2 or more confirmed cases within 10 days, or an overall rise in sickness absence where COVID-19 is suspected, you may have an outbreak.

The re-introduction of some additional protective measures may be a necessary response to a potential outbreak in school. In all cases, any educational drawbacks should be balanced with the benefits of managing transmission in line with wider government guidelines.

The updated framework includes the new thresholds at which you might consider seeking public health advice and taking further action to reinforce measures already in place and has annexed guidance for managing cases in settings from 23 August.

**TVPH threshold for seeking public health advice is:**

- **10% or more (approximately) of a class or year group (or equivalent other group) been confirmed as positive for COVID-19 in the previous 10 days\***
- **5 or more confirmed COVID-19 cases in a single class or year group (or other equivalent groups) in the previous 10 days\***
- **10% or more (approximately) of all staff been confirmed as positive for COVID-19 in the previous 10 days\***
- **2 or more cases in 10 days in students who are boarding in a school or in a residential setting such as holiday camp or in a SEND educational setting\***
- **If your educational setting is experiencing interest from the media.**
- **There have been any admissions to hospital or deaths in your student or staff population due to COVID-19.**

\*At least one of these cases should be PCR positive i.e., laboratory confirmed.

Schools [operational guidance](#) states that if you have a substantial increase in the number of positive cases in your school (see [Stepping measures up and down](#) section for more information), a director of public health might advise you that face coverings should temporarily be worn in communal areas or classrooms (by pupils staff and visitors, unless exempt). Contingency plans should cover this possibility.

The actions that educational settings might consider in an increase of positive cases are set out in the [Contingency Framework](#) with Public health advice and circumstances in which local health protection teams or directors of public health might recommend you introduce some additional measures. Additional considerations could be activities taking place outdoors, including exercise, assemblies, or classes; improving ventilation indoors, where this would not significantly impact thermal comfort and one-off enhanced cleaning focussing on touch points and any shared equipment

If the setting meets the threshold criteria previously noted and support or advice is requested by the setting from TVHPT, additional measures may be identified via this route and risk assessments may require updating by settings.

Schools and settings should continue to report all Covid-19 cases to the Local Authority as they continue to monitor the situation within their local area and impacts on local services. In addition, for Local Authority maintained schools, the Local Authority is the employer for staff members.

What are the hazards?	Persons at risk	Risk	Control measures in use	Risk L/M/H	Further Action Required	
<b>Awareness of policies and procedures</b>	Staff Children Parents Others	Inadequate information	<p>All staff, parents, governors, visitors, and volunteers are aware of all relevant policies and procedures.</p> <ul style="list-style-type: none"> <li>• All staff have access to all relevant guidance and legislation including, but not limited to, the following:</li> <li>• The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 2013.</li> <li>• The Health Protection (Notification) Regulations 2010.</li> <li>• Public Health England (PHE) (2017) 'Health protection in schools and other childcare facilities'.</li> <li>• DfE and PHE (2020) 'COVID-19: guidance for educational settings'.</li> <li>• Relevant staff receive necessary training that helps minimise the spread of infection, e.g., infection control.</li> </ul> <p><b>The school keeps up to date with advice issued by, but not limited to, the following:</b></p> <ul style="list-style-type: none"> <li>• DfE – NHS - Dept for Health &amp; Social Care - PHE</li> <li>• Staff are made aware of the school's infection control procedures in relation to coronavirus via email / staff meetings and contact / school as soon as possible if they believe they have been exposed to coronavirus.</li> <li>• Parents are made aware of the school's infection control procedures in relation to coronavirus via letter and social media – they are informed that they must contact the school as soon as possible if they believe their child has been exposed to coronavirus.</li> <li>• Pupils are made aware of the need to tell a member of staff if they feel unwell.</li> </ul>	LOW		<b>No</b>

<b>Disruption to the running of the school in cases of local outbreak</b>	Staff Children Others	Infection control	<ul style="list-style-type: none"> <li>• A contingency plan is in place.</li> <li>• The school adheres to and keeps up to date with the latest local and national advice about school closures – advice is sought from the local HPT or DfE helpline where required.</li> <li>• Follow Government advice / instructions.</li> </ul>	MED	Yes	
<b>Use of Transport</b>	Staff Children Others	Infection Control	<ul style="list-style-type: none"> <li>• It is recommended that facemasks are worn in enclosed / crowded spaces where contact with people you don't normally meet occurs. This includes public transport and dedicated transport to school.</li> <li>• School will follow director of public health advice in cases of local outbreak.</li> <li>• School will put into place any actions or precautions advised by their local HPT.</li> </ul>	MED		<b>No</b>
<b>Cleaning of school</b>	Staff Children Others	Infection Control	<p>All hard surfaces to be cleaned on a regular basis, this will include:</p> <ul style="list-style-type: none"> <li>➤ All door handles</li> <li>➤ All tables and chairs used by staff and pupils</li> <li>➤ Toilet flushes and regular cleaning of toilets.</li> <li>• All classrooms to have spray disinfectant and where possible disposable cloths. If disposable cloths are not available, use once and then put in wash.</li> <li>• Regular cleaning of surfaces to reduce the risk of spreading the virus.</li> <li>• All used cloths thrown away to be double bagged and then placed in a secure area i.e. lockable bin.</li> </ul>	MED		<b>No</b>

<b>Ventilation class/office</b>	Staff Children Others	Infection Control	<ul style="list-style-type: none"> <li>• Identify any poorly ventilated spaces - take steps to improve fresh air flow.</li> <li>• Where appropriate open external windows, internal doors, external doors to improve natural ventilation.</li> <li>• If external doors are opened, ensure that they are not fire doors and are safe to do so.</li> </ul>	MED		<b>No</b>
<b>Poor hygiene practice</b>	Staff Children Others	Ill Health	<ul style="list-style-type: none"> <li>• Ensure that children clean their hands regularly, this can be done with soap and water or hand sanitiser.</li> <li>• Staff and visitors are encouraged to wash their hands with soap or alcohol -based sanitiser (that contains no less than 60% alcohol) and follow infection control procedures in accordance with the DfE and PHE's guidance.</li> <li>• Sufficient amounts of soap (or hand sanitiser where applicable), clean water and paper towels are supplied in all toilets and kitchen areas.</li> <li>• Children are supervised by staff when washing their hands to ensure it is done correctly, where necessary.</li> <li>• Children are discouraged from sharing cutlery, cups or food.</li> <li>• All cutlery and cups are thoroughly cleaned before and after use.</li> <li>• Cleaners to carry out daily, thorough cleaning that follows national guidance and is compliant with the COSHH Policy and the Health and Safety Policy.</li> <li>• The Headteacher arranges enhanced cleaning to be undertaken where required – advice about enhanced cleaning protocols is sought from the HPT/PHE and contractor</li> </ul>	MED		<b>No</b>

<b>Spread of infection</b>	Staff Children Others	Lack of infection control	<ul style="list-style-type: none"> <li>• Spillages of bodily fluids, e.g. respiratory and nasal discharges, are cleaned up immediately in line with guidance, using PPE at all times.</li> <li>• Parents are informed not to bring their children to school or on the school premises if they show signs of being unwell and believe they have been exposed to coronavirus.</li> <li>• Staff and children do not return to school before the minimum recommended exclusion period (or the 'self -isolation' period) has passed, in line with national guidance.</li> <li>• Children who are unwell are not taken on school trips or permitted to enter public areas used for teaching, e.g. swimming pools.</li> <li>• Parents must notify school if their child has an impaired immune system or a medical condition that means they are vulnerable to infections.</li> <li>• The school, in liaison with medical professionals where necessary, reviews the needs of children who are vulnerable.</li> </ul>	MED		<b>No</b>
<b>Classroom management</b>	Children Staff	Infection control	<ul style="list-style-type: none"> <li>• Class teachers and TA support to no longer operate purely from the front of the classroom.</li> <li>• It is no longer required for forward facing tables - care should still be taken on table management in a classroom setting.</li> <li>• Outbreak management plans could mean the possibility of reintroduction of restrictions on mixing for a temporary period in case of local outbreak.</li> <li>• We will revert back to previous control measures in the event of a local outbreak, e.g. logistics from March 2021 including staggered start / finishes, class bubbles, separate toilet facilities, masks worn by adults, good ventilation, increased hygiene measures, teachers stand to the side of children, desks facing the front of the class room.</li> </ul>	MED	Yes due to an outbreak in one classroom	

			<ul style="list-style-type: none"> <li>• We will continue to use a cautious approach with arrangements.</li> </ul>			
<b>Teaching staff become ill</b>	Children Staff	Infection control	<ul style="list-style-type: none"> <li>• BB/SB or RG initially would be asked to provide supply cover.</li> <li>• TA staff would need to be redeployed if SEND children need support</li> </ul>	MED		<b>No</b>
<b>Assemblies and singing</b>	Children Staff	Infection control	<ul style="list-style-type: none"> <li>• There are no restrictions in place for holding assemblies and singing in the school hall.</li> <li>• In the case of restrictions being reintroduced we would revert to previous COVID risk assessment and stagger assemblies and restrict singing.</li> </ul>	MED	w/b 31 <sup>st</sup> January reverted to no whole school assembly or singing. In class assemblies	
<b>Personal Protective Equipment Face Coverings</b>	Children Staff Visitors Parents	Infection control	<ul style="list-style-type: none"> <li>• Face coverings are advised for staff and visitors in classrooms / communal areas due to high infection rate up until the February half-term break.</li> <li>• It is recommended that face masks are worn in enclosed and crowded spaces where you may come into contact with people you don't normally meet. This includes dedicated transport to school.</li> <li>• School will follow director of PH advice in cases of local outbreak.</li> <li>• School will put into place any actions/precautions advised by local HPT.</li> <li>• <a href="https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/999722/PPE_in_education_childcare_and_childrens_social_care_settings.pdf">https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/999722/PPE_in_education_childcare_and_childrens_social_care_settings.pdf</a> MED ✓ Ill Health Staff Pupils Others Coronavirus Symptoms</li> </ul>	MED	04/01/22 Reverted to face masks in communal areas due to outbreak	<b>No</b>

<b>Safeguarding of vulnerable children and implications of COVID19</b>	Children Staff	Safeguarding	<ul style="list-style-type: none"> <li>• New KCSIE statutory guidance 2021 shared with all staff in September.</li> <li>• Safeguarding to remain an agenda item at all staff meetings.</li> </ul>	MED		<b>No</b>
<b>Ill Health – possible coronavirus</b>	Children Staff Others	Coronavirus Symptoms	<ul style="list-style-type: none"> <li>• Staff are informed of the symptoms of possible coronavirus infection, e.g. a cough, loss or change to sense of smell or taste and high temperature and are kept up -o date with national guidance about the signs, symptoms and transmission of coronavirus.</li> <li>• Any child or member of staff who displays signs of being unwell with COVID symptoms, a persistent cough, fever or a loss/change to sense of smell or taste, and believes they have been exposed to coronavirus, is immediately taken out of the class and placed in an area where they will not come into contact with others and are supervised at all times.</li> <li>• For children the relevant member of staff calls for emergency assistance (HT) immediately if child's symptoms worsen. The parents of unwell children are informed as soon as possible of the situation by LD/CH only.</li> <li>• Where contact with a child's parents cannot be made, appropriate procedures are followed in accordance with governmental guidance.</li> <li>• Unwell children waiting to go home are kept in an area where they can be socially distanced from others.</li> <li>• Areas used by unwell staff and children who need to go home are appropriately cleaned once vacated, using a disinfectant and care to be taken when cleaning all hard surfaces.</li> <li>• If unwell children and staff are waiting to go home, they are instructed to use different toilets</li> </ul>	MED		<b>No</b>

			<p>to the rest of the school to minimise the spread of infection.</p> <ul style="list-style-type: none"> <li>• Children who display signs of infection are taken home as soon as practicable, by parents – parents are advised to contact NHS 111 immediately or 999 if the child becomes seriously ill / their life is at risk.</li> <li>• Members of staff who display signs of infection are sent home immediately and are advised to contact NHS 111 immediately or call 999 if they become seriously ill or their life is at risk.</li> <li>• Any medication given to ease the unwell individual's symptoms, e.g. Paracetamol, is administered in accordance with the Administering Medications Policy.</li> </ul>			
<b>Autumn Term Asymptomatic testing</b>	Children Staff	Infection control	<ul style="list-style-type: none"> <li>• Primary aged children can now be tested using an LFD test and results reported to school if positive.</li> <li>• Staff should test twice weekly</li> </ul>	MED	Staff testing daily from 31/01/22	<b>No</b>
<b>Positive Cases</b>	Children Staff	Infection control	<ul style="list-style-type: none"> <li>• School no longer need to do contact tracing as close contacts will be identified via NHS Test and Trace.</li> <li>• School inform parents of positive cases in the classroom and close contacts</li> <li>• School will support NHS Test and Trace if required to help identify close contacts.</li> <li>• From 16 August 2021, children under the age of 18 years old will no longer be required to self-isolate if contacted by NHS Test and Trace as a close contact of a positive COVID - 19 case. Instead, children will be contacted by NHS Test and Trace, informed they are a close contact and advised to take a PCR test.</li> <li>• All individuals are encouraged to take a PCR test if advised to do so.</li> </ul>	MED		<b>No</b>



			<ul style="list-style-type: none"> <li>• Staff/children with a positive lateral flow test result should self - isolate in line with the stay at home guidance and get a PCR test to check if they have COVID -19 continue to self - isolate. See below</li> <li>• If the PCR test is taken within 2 days of the positive lateral flow test, and is negative, it overrides the self - test and the children/staff can return to school as long as there are no COVID -19 symptoms.</li> <li>• A positive LFD test is now sufficient to diagnose COVID</li> <li>• Stay at home and self-isolate if you have any of the main symptoms of COVID-19 or if you have a positive LFD or PCR test result.</li> <li>• Self-isolation period starts immediately from when symptoms started, or, if no symptoms, from when the positive LFD or PCR test was taken, whichever test was taken first. The self-isolation period includes the day the symptoms started (or the day your test was taken if no symptoms), and the next 10 full days. It may be possible to end the self-isolation earlier (see below).</li> <li>• People can return to their normal routine and stop self-isolating after 10 full days if the symptoms have gone, or if the only symptoms are a cough or anosmia, which can last for several weeks. If there is still have a high temperature after 10 days or are otherwise unwell, people should stay at home and seek medical advice.</li> <li>• Self-isolation period can end after 10 full days. However, an LFD test can be taken from 5 days after the day of symptoms started (or the day the test was taken if no symptoms), and</li> </ul>			
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			another LFD test on the following day. If both these test results are negative, and there is not symptoms of a high temperature then isolation can cease.			
<b>Poor management of infectious diseases</b>	Children Staff	Lack of infection control	<ul style="list-style-type: none"> <li>• Staff to monitor themselves and others and look for similar symptoms if a child or staff member has been sent home with suspected coronavirus.</li> <li>• Staff are vigilant and report concerns about their own, a colleague's or child's symptoms to the Headteacher as soon as possible.</li> <li>• The school is consistent in its approach to the management of suspected and confirmed cases of coronavirus.</li> <li>• The school is informed by child's parents when a child returns to school after having coronavirus – school informs relevant staff.</li> <li>• Staff inform the Headteacher when they plan to return to work after having coronavirus.</li> </ul>	MED		<b>No</b>
<b>Lack of communication</b>	Staff Children Others	Unsafe practices	<ul style="list-style-type: none"> <li>• Staff report immediately to the Headteacher about cases of suspected coronavirus, even if they are unsure – do not act independently.</li> <li>• The Headteacher contacts the local HPT or follows advice given from and discusses if any further action needs to be taken.</li> <li>• School puts into place any actions or precautions advised by their local HPT.</li> <li>• School keep staff and parents updated about changes to infection control procedures if necessary.</li> </ul>	MED		<b>No</b>

<b>Admitting children into school</b>	Children Staff	Infection control	<ul style="list-style-type: none"> <li>• In most cases, parents and carers will agree that a child with symptoms should not attend the school, given the potential risk to others.</li> <li>• If a parent or carer insists on a child attending your school, we can take the decision to refuse the child if, in our reasonable judgement, it is necessary to protect children and staff from possible infection with COVID -19.</li> <li>• Decision needs to be considered in light of all the circumstances and current PH advice.</li> </ul>	LOW		<b>No</b>
<b>Admitting people into school</b>	Children Staff	Infection control	<ul style="list-style-type: none"> <li>• Children, staff and other adults should not come into school if they have symptoms, have had a positive test result or have been instructed to quarantine.</li> <li>• Staff or children within the school who appear to have COVID -19 symptoms are sent home, advised to avoid using public transport and, wherever possible, be collected by a member of their family or household and to follow PH advice.</li> <li>• In the case of a child awaiting collection, they should be taken to a room away from other children and supervised.</li> <li>• If the member of staff is in close contact with the child, then they should wear appropriate PPE.</li> <li>• Fresh air ventilation if possible.</li> <li>• Any rooms that have been used for this purpose should be cleaned when vacated.</li> <li>• As household s follow PHE guidance with possible or confirmed COVID -19 infection.</li> </ul>	MED		<b>No</b>

<b>Educational visits</b>	Children Staff	Financial risk	<ul style="list-style-type: none"><li>• If booking new visits, ensure that the school have adequate financial protection in place.</li><li>• The school should have a contingency plan in place to account for any changes in the government travel list.</li><li>• Full risk assessments must be completed.</li></ul>	MED		<b>No</b>						
<b>Out of school settings parent attendance</b>	Children Parents Staff Others	Infection control	<ul style="list-style-type: none"><li>• Parents are no longer limited to specific number attendance.</li><li>• Ensure up to date contact information is available in the event of an emergency.</li></ul>	MED		<b>No</b>						
<b>Break times use of outdoor areas</b>	Children Staff	Infection control	<p>Morning break</p> <table><tr><td>Reception, Years 1 and 2</td><td>10.30 – 10.45</td></tr><tr><td>Years 3 and 4</td><td>10.30 – 10.45</td></tr><tr><td>Years 5 and 6</td><td>11.00 – 11.15</td></tr></table> <p>During break times and lunchtime classrooms equipment will be disinfected by staff.</p>	Reception, Years 1 and 2	10.30 – 10.45	Years 3 and 4	10.30 – 10.45	Years 5 and 6	11.00 – 11.15	MED		<b>No</b>
Reception, Years 1 and 2	10.30 – 10.45											
Years 3 and 4	10.30 – 10.45											
Years 5 and 6	11.00 – 11.15											
<b>Drop off and collection minimising contact between adults and children</b>	Children Staff Parents	Infection control	<ul style="list-style-type: none"><li>• We only have one access route into school but large space (car park) one adult to drop off and collect if possible.</li></ul> <p><b>Drop off times:</b></p> <ul style="list-style-type: none"><li>• Key Stage 4 classes – 8.40 – 8.45 Children can go straight to their classrooms.</li><li>• Reception and KS1 – 8.40 – 8.50am</li><li>• If a child has a sibling in KS2 they will be able to enter the classroom from 8.40am.</li><li>• If a child is late, they will be taken to the office and brought to their classroom.</li><li>• HT and support staff supervising children from 8.40 – 9.00am in school car park.</li></ul>	MED	Collection - Reviewed and changed (WB 13 <sup>th</sup> Sept) as parents were in car park for longer than necessary.	<b>No</b>						

<b>Lunch times</b>	Children Staff	Infection control	<p>Lunch in hall Tables cleaned between sittings. 4 tables required in the hall. Will be left out to minimise movement. Reception, Years 1 and 2 - 11.45 – 12.15 Hall 11.45 – 12.15</p> <p>Key Stage 2 eating in class due to high infection rates up until the half-term break. Rotas to supervise children arranged by TAs – HT to support where necessary.</p> <p>Supervising staff to distribute cutlery, bread and salad. Staff to clear tables for children to minimise circulation near kitchen staff.</p>	MED	KS2 eat in classrooms until February half-term	<b>No</b>
<b>Movement around the school</b>	Children Staff	Infection control	<ul style="list-style-type: none"> <li>• Children to access classrooms using external doors wherever possible.</li> <li>• Reduce circulation via corridors accessing the hall using a one-way circulation system exiting via external doors only if inclement weather.</li> <li>• Registers will be paper copies and sent down to the office by a member of support staff.</li> </ul>	MED		<b>No</b>
<b>Procedures in the event of a localised outbreak/shutdown and curriculum provision for year group or whole school</b>	Children Staff Parents	Contingency planning	<ul style="list-style-type: none"> <li>• Access to remote learning.</li> <li>• Staff to provide weekly home learning packs – reference to for example National Oak Academy; BBC Bitesize; Mathletics; Active Learn resources, White Rose.</li> </ul>			<b>No</b>

<b>Paediatric First Aid available</b>	Children Staff	First Aid infection control	<ul style="list-style-type: none"> <li>• 15 members of staff are paediatric first aiders.</li> <li>• First Aid must be administered in KS zones. Children must not be sent to administrative staff as this increases the risk of transmission.</li> <li>• First aid books will be located in the two classroom zone.</li> </ul>			<b>No</b>
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