

COVID-19 Educational settings – management of cases guidance G646k

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1. Introduction and document updates

This guidance document details the actions that Educational Settings must follow in order to plan for, manage and respond to one or more suspected or confirmed case(s) of COVID-19. This guidance forms part of the coordinated approach control between Public Health England, Norfolk County Council and Educational Settings with the aim of:

- reducing transmission and limiting spread of the disease
- enabling children and young people to attend their educational setting and continue their education
- providing reassurance to staff, pupils and parents
- enabling parents to return to work
- protecting the vulnerable

Educational Settings must stringently follow Government guidance (as interpreted in the compliance code and risk assessment control measures for LA maintained settings), in order to reduce the of virus transmission by:

- Grouping/cohorting staff and pupils in order to reduce the number of people each individual has close contact with.
- Maintain physical distance between and within groups as much as possible
- Limit visitors to the setting and manage their activity on site
- Undertaking enhanced environmental cleaning and disinfection paying particular attention to hand contact points
- Ensuring good personal hygiene of everyone at all times (hand washing, use of hand sanitiser and applying catch it, bin it, kill it)
- Use PPE where it is safe and appropriate to do so as outlined in the PPE guidance

This document provides guidance on what to expect and what will be required of settings when a suspected or positive case of COVID-19 associated with the setting is identified.

Date of change	Section, Page and Change
11/06/2020	New document
16/06/2020	New information – highlight removed
10/07/2020	Contact records now require to be kept for 21 days (this was previously 14 days). Information relating to testing of children Information relating to home test kits Information relating to preparing for implementation of outbreak control plans in the wider community (local lockdown) Information relating to isolation requirements for close contacts Requirement to update the settings privacy policy relating to record keeping

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03/08/2020	Updated information on home test kits and what to do if a parent refuses to get their child tested
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2. Definitions

Possible or suspected case	Staff member or child with a new continuous cough and/or high temperature and/or a loss of, or change in, normal sense of taste or smell
Confirmed case	staff member or child with a positive test for COVID-19 with or without symptoms
Cluster	Two or more confirmed cases of COVID-19 among children or staff in a setting within 14 days or an increase in background rate of absence due to suspected or confirmed cases of COVID-19 (does not include absence rate due to individuals shielding or self-isolating as contacts of cases)
Outbreak	Two or more confirmed cases of COVID-19 among children or staff who are direct close contacts, proximity contacts or in the same cohort or 'bubble'* in the school/college within 14 days.
Close contact	<p>People who:</p> <ul style="list-style-type: none"> • had face-to-face contact of any duration (less than 1 metre away) with the case or • were coughed or sneezed on by the case or • had unprotected physical contact (skin to skin) with case or • Spent more than 1 minute within 1 metre of the case or • spent more than 15 minutes within 2 metres of the case or • travelled in a car or other small vehicle (even on a short journey <p>with a person confirmed as having COVID-19</p>
Infectious period	from 48 hours prior to symptom onset to 7 days after, or 48hrs prior to test if asymptomatic

* a cohort or 'bubble' might be a class, year group or other defined group within the setting. This definition aims to distinguish between transmission occurring in the community versus transmission occurring within the school/college setting.

3. Responsibilities

Public Health England Health Protection Team (PHE HPT)

- Work with NCC and the setting to deliver effective control and management of outbreaks including the provision of infection control advice and the identification of relevant close contacts
- Gather information on notification of confirmed cases, clusters and outbreaks in Education Settings from settings and carry out a specific assessment which will

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include a review of the existing infection control arrangements against the NCC Compliance Code and PHE standards.

- Where deemed necessary, call an outbreak control team meeting
- Transfer management of a case to NCC if and when it is appropriate or advise the setting directly.

NCC (as the coordinating point for local outbreak control for all educational settings)

- Respond to advice provided by PHE HPT.
- Formally manage single cases, cluster and outbreaks with the setting, once it has been risk assessed and handed over by PHE HPT.
- Provide advice to settings around operational issues such as staffing and viability of keeping a school or part thereof open.
- Receive notifications from settings regarding cases including where a single case changes to an outbreak or a cluster and notify PHE HPT.
- Notify PHE HPT where there are concerns relating to (but not limited to):
 - Significant health impacts for a member of staff, child or young person
 - Large number of clinically vulnerable children
 - High number of cases
 - Outbreak remains ongoing despite the required control measures
 - Concern about infection control measures impacting on safe operations
 - Factors that require multi-agency co-ordination and decision making

Education Setting

- Implement PHE infection control requirements (for LA maintained schools via the implementation of the compliance code and Risk Assessment)
- Maintain records of absence to enable timely flagging of cases with PHE HPT and NCC
- Maintain contact records in line with this guidance and provide said data when required by NCC/PHE HPT to help identify close contacts following a positive case.
- Direct staff and pupils who have symptoms to their appropriate test service and request that parents and staff provide test result information.
- Where the settings has been provided with home test kits, offer these to parents of children who become ill at the setting, at the time of collection of the child to support the test and trace programme
- Implement contact isolation in the event of a confirmed case of a pupil or staff member as directed by PHE HPT.
- Contact PHE HPT and NCC when you:
 - are aware of cases relating to your setting
 - are concerned about a rise in absence that may be related to COVID-19
 - suspect a cluster or outbreak at the setting
- Keep parents, staff and pupils informed:
 - of the actions which are required in order to keep everyone safe
 - expectations regarding notifications of cases to the setting

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- when there is a suspected, positive case or outbreak associated with the setting making use of template letters
- developments relating to cases

4. Maintaining accurate records, data review and escalation

Contacts

Records of contacts must be kept by settings and kept up to date on daily basis, noting that it may need to be retrieved for the previous 21 days. This includes recording all visitors to the setting. A template is available for your use.

Prompt isolation of contacts is essential to preventing the spread of infection in Education Settings. Risk assessments have already established groups or “bubbles”. These groups are key to proactively reducing the risk by limiting contact with others as well as to enable effective isolation arrangements if needed. Therefore, the following contact records are required:

- Accurate details of pupil and staff “bubbles” on a daily basis (including residential information where applicable).
- Accurate details of extended groups or bubbles where used for example in Secondary Schools, to provide specialist teaching, wraparound care or for transport needs on a daily basis, Occasions when groups or bubbles have been breached by other individuals or groups.
- Any other occasions of close contact made outside of bubbles or groups within the setting

As settings return to full occupancy levels it is recognised that settings will not be able to keep records of every close contact that occurs outside of groups e.g. when children stop in corridors to talk to each other. However, by implementing the controls outlined in the Compliance Code, settings will be able to minimise these interactions. Staff and children should be encouraged to report such interactions for the purposes of record keeping.

When a positive case has been confirmed to the school PHE HPT and NCC must be informed of the following information as soon as it is known, therefore accurate records to enable this must be kept:

At risk staff and pupils

Details of staff and pupils who are considered at increased risk, confirming a specific assessment has been completed.

Absence increase

Settings must record and monitor their absenteeism rate, and if concerned that an increase could be related to COVID-19, should notify PHE HPT and NCC. Notification is not required if absenteeism is increased due to individuals shielding or self-isolating as contacts of cases.

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Confirmed cases

Details of the member of staff or pupil that has tested positive.

Cluster cases

Changes from a single case to cluster as soon as possible

Outbreak

Changes from a single case to an outbreak as soon as possible

In addition, PHE HPT and NCC must be informed as soon as possible in the event of:

- Significant health impacts for a member of staff or pupil
- concerns relating to the ability to follow the control measures required in the compliance code

Settings must update their Privacy Policy as required by the Data Protection Act so that anyone attending the setting is aware of what information the setting will hold and how that will be used to support the identification and management of outbreaks as well as the test and trace programme. Further information is [provided here](#).

5. Having a suspected case

Preparing a room for responding to a person becoming ill at the setting

A suitable room should be identified to wait in which is large enough to keep a 2 metre distance between the ill person and any supervising staff (where it is possible) for use in the event of a pupil or staff member who is awaiting collection. Where possible this room should have separate use of a toilet and handwashing facilities or ensure that they are close by. The supervising member of staff should wear a face mask during this time. It is recommended therefore that the nominated member of staff is a first aider as they will already have familiarised themselves with putting on and taking off face masks in a hygienic way (see planning for emergencies in the *Compliance Code*).

If anyone becomes unwell at the school i.e. the onset of a new, continuous cough, a high temperature and/or a loss or change in their sense of smell, they should leave the premises and go home as soon as possible. In an emergency, call 999 if they are seriously ill or injured or their life is at risk.

Complex needs residential settings should refer to *COVID-19 Guidance for complex needs residential educational settings* in order to plan their response to when a pupil who is a resident becomes unwell with symptoms.

Following a person becoming ill at the setting

It is not necessary for staff or pupils that briefly came into contact with the affected person to self-isolate unless they develop symptoms themselves or are advised by PHE HPT or NCC to do so because the contact is considered significant or the affected person subsequently tests positive. It is however good practice for them to wash their hands thoroughly after any contact with someone who is unwell.

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All surfaces that the person has come into contact with whilst symptomatic must be cleaned using disposable cloths and a cleaning/disinfectant solution at a dilution of 1000 parts per million available chlorine including:

- All potentially contaminated high-contact areas such as toilet facilities if these were used, door handles, hand rails etc in the areas they visited/used such as on the way to/from the toilet or in the room they were waiting in
- All surfaces and objects which are visibly contaminated with body fluids

Public areas where the person has passed through and spent minimal time in (such as corridors) but which are not visibly contaminated with body fluids do not need to be specially cleaned and disinfected.

Where there are soft surfaces such as sofas and soft furnishings that are visibly contaminated or have been in high contact these should be steam cleaned. The minimum PPE to be worn for cleaning an area where a person with possible or confirmed coronavirus (COVID-19) is that normally worn when undertaking any cleaning duties are disposable gloves and an apron. Hands should be washed with soap and water for 20 seconds after all PPE has been removed.

The disposable gloves, apron and cleaning cloths used must all be put in a bin bag along with any tissues used by the symptomatic person. The bin bag should then be bagged again and tied. It must be kept at the premises for 72 hours and then put into the normal waste.

Where it is possible to undertake this cleaning with the setting open then you do not need to close to do this, for example, if a specific occupied area such as a classroom needs cleaning, pupils and staff can move to a different room while cleaning is being carried out.

If you do need to close the school to undertake the necessary cleaning or as a result of Public Health England advice, please notify NCC via:
<http://schools.norfolk.gov.uk/go/myschool>.

Action following someone from the setting developing symptoms

As soon as a pupil or staff member develops symptoms, the following actions must be taken (where they apply) and their household must follow isolation and testing arrangements. The following actions should be taken as soon as a person develops symptoms at the setting:

Symptomatic pupil

- Parents are notified and must collect the symptomatic pupil as soon as possible.
- Parents are asked to collect all siblings, no matter which setting they attend and to notify the setting as soon as they are aware of this (you can offer to notify the setting on their behalf).
- Parent asked to arrange for testing and notify the setting as soon as they know the results

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Please note: Where settings have been supplied with home test kits by PHE they should offer one of these to the parent/carers at the time of collection so as to actively support the test and trace programme

Symptomatic staff member

Actions for staff in the event of falling ill while at work are outlined in COVID-19 *Your health and safety when working in education settings*

Where a setting is aware that a member of staff has household members who work or children that attend other settings you should offer to notify them on the persons behalf to support appropriate isolation action.

Managers must check contact records for the previous 48 hours as soon as they are aware of a symptomatic staff member. Where they identify other staff members who are not part of that person's bubble or group who have been close contacts e.g. unintentional or adhoc close contacts, managers must ensure that these **close contact** member of staff work arrangements are altered in order to ensure they:

- Avoid staff who are at increased risk of contracting COVID-19, or becoming seriously ill if they do
- Take extra care in practising social distancing, practice good universal hygiene and watch out for symptoms. This may mean they can no longer work with the group they are assigned to e.g. because they are very young children who cannot socially distance as easily

Employer referral process for testing

Rapid testing is available to all key workers, which includes educational setting staff. Anyone with symptoms must be advised to be tested.

The employer (the setting) needs to register with the local testing service to receive their unique employer code by emailing: NorfolkRegistercovidtesting@nuh.nhs.uk providing [the name of the employing organisation, their job title and a contact telephone number.](#)

Or if preferred you can be tested at any of the national drive-through testing centres, such as Ipswich, Stansted, Peterborough and Norwich, then you must use the national booking service. For self-referrals, this is via <https://self-referral.test-for-coronavirus.service.gov.uk>.

Please note:

- Testing should be in **the first three days of the onset of COVID-19 symptoms** at the time the swab is taken.
- The service will test all individuals with COVID-19 symptoms in your household.
- To visit a test centre you must attend the appointment in your own vehicle, with only the people who have COVID-19 symptoms and have arranged an appointment for testing.
- By attending a test you must agree that the test provider shares results with the setting in order to follow the appropriate course of action

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You can also follow this link to provide staff with a short video about the drive through testing process: [COVID-19 Getting Tested.](#)

Pupil process for testing

Where a child becomes ill at school and the school have available home testing kits (the Government have indicated they will be sending these to schools), the setting should offer a kit to parents when they collect their children. Settings should encourage parents/carers to get their child tested as soon as possible.

Alternatively, parents should order a test immediately through www.nhs.uk/coronavirus or calling 119 if they have no internet access

Further information for parents and carers on testing is available via <https://www.justonenorfolk.nhs.uk/test-trace> Settings should share this link with parents/carers to help engage them with the test and trace service.

In the unlikely event that a parent/carer refuses testing for their child settings can seek advice from the NCC incident room. This will be escalated to the PHE HPT who will undertake an assessment of the risk and advise the setting accordingly.

Contact tracing

The government test and trace system will enable them to trace people who have had close contact with someone who has tested positive for COVID-19. The test and trace programme plays an important role in helping to minimise the spread of coronavirus as stay at home restrictions are reduced.

Anyone with a positive test will be contacted and asked about people they have been in contact with for the 2 days before symptoms and up to 7 days afterwards. They will then seek to notify those people that they may have been exposed and that they should self-isolate.

As soon as they identify that the person has a connection with your setting (they are a member of staff, a pupil or a recent visitor) they will notify the local PHE HPT so a rapid investigation can take place and you can be advised of the most appropriate action to take.

If you are made aware of a member of staff or child in a cohort that has tested positive by means other than through PHE HPT you should take action to notify them straight away so a risk assessment can be conducted and instruction given regarding isolation requirements.

In some cases, a larger number of other children, young people or members of staff will be required to self-isolate at home as a precautionary measure – perhaps the whole class, site or year group, for example where a setting utilizes extended bubbles or groups Where settings are observing guidance on infection prevention and control,

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which will reduce risk of transmission, closure of the whole setting will not generally be necessary.

Contact tracing may result in individual pupils or members of staff being asked to isolate due to contacts outside of the setting, the only pupils or staff who need to isolate in this instance is where they are advised to via the tracing programme. The absence should be recorded, there is no need to carry out increased cleaning when a person develops symptoms away from the setting. Please refer to the following section for actions to take on receipt of test results.

Please note: where a pupil or member of staff isolates because someone in their household has symptoms, or because of contact tracing outside of the setting you do not need to take any further action unless the pupil or member of staff develops symptoms (see below).

Asymptomatic and antibody testing

Testing is more reliable when undertaken for people with symptoms and therefore asymptomatic testing (testing where you do not have symptoms) is currently only available for health and social care settings, as part of research or trials or under specific other circumstances and therefore would not generally be available for staff or pupils in educational settings unless the PHE HPT require it. You may however be offered testing where you have atypical symptoms (none of the 3 main symptoms) but are feeling unwell.

Similarly, antibody testing is not currently widely available. Antibody testing indicates whether or not you have had COVID-19. It cannot tell you when you had it, how immune you may be to further infection or how long any immunity you have may last. Therefore, having antibodies does not impact on control measures. You must still maintain distancing and implement hygiene measures.

6. Test result actions

Positive results

Settings should plan how they will sensitively respond to receiving confirmation of a positive case involving a pupil or member of staff.

On receiving confirmation of a positive case from a test and trace service for a staff member or pupil the setting should notify NCC by calling 07623912974. The PHE HPT team will receive notification direct from the test and trace team.

Where a staff or pupil isolates because a member of their household has symptoms and/or is tested positive, the associated grouping does not need to isolate (unless required through contact tracing).

If the notification came directly from the parent or carer of a pupil or a member of staff the setting should notify both PHE HPT of the positive case on: 0300 303 8537 and NCC on: 07623912974

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If positive result confirmation is received while close contacts are at the setting then arrangements must be made for them to leave the setting as soon as possible to start their isolation (see above).

Contacting the NCC education incident room

All educational settings are required to contact the NCC education incident room where they have been notified of a positive case associated with the setting, where they have identified an increased level of absence relating to COVID-19 (a cluster) or where they think there may be an outbreak relating to the setting.

The education incident room phone number will connect you to an operator service who will take a message and relay it to the NCC education incident room. The education incident room hours of operation are 8am to 6pm, Monday to Friday. Outside of those hours your message will be forwarded to the education incident room and responded to on the next working day. Alternatively contact the PHE HPT team. Please ensure you have all the relevant details to hand before you make the call:

- Name of the setting
- Address and post code
- Name of main contact
- Contact phone number (main setting and alternative landline/mobile number)
- Brief outline of the situation

The education incident room contact number is for use by settings only and should not be shared with parents or carers.

For advice and guidance relating to management of your setting during this COVID-19 pandemic please email covid.schools@norfolk.gov.uk

Communication

Letter 1 should be provided to all parents in the setting when there is a single case (where their child is not required to isolate with their group).

Letter 2 should be provided to all parents where their child has been asked to isolate due to their close contact. Ensure that parents are aware of the need to notify you if their child develops symptoms and is tested positive during the isolation period.

Letter 3 should be provided to all parents where an outbreak has been declared

Letter 4 should be used to inform all parents of a possible case in the setting

Letter 5 should be used to inform parents following the use of letter 4 where the case has been tested as negative

Staff communication.

Settings should ensure staff are kept informed of any developments relating to cases in a timely way. In particular, where letters are sent to parents/pupils they should be aware of the contents therein.

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Settings may also be informed that visitors to the setting have subsequently tested positive. In such cases the setting should use records to identify close contacts of these visitors and take action accordingly.

Negative result

The person who was isolating can return to the setting providing that:

- Their result is negative (and further testing is not required)
- They are fit to return (due to other illness)
- They are not isolating as a result of being a close contact
- Other members of their household do not have symptoms and waiting for test results.

A template letter is available to notify parents (letter 5)

Inconclusive result

Isolation must continue where an inconclusive result has been provided. The person must follow arrangements for re-testing.

Action for close contacts

Close contacts of positive cases must isolate for 14 days. Close contacts will not ordinarily be eligible for testing unless and until they develop symptoms (see above for exceptions). Where a close contact subsequently develops symptoms and tests negative they must continue their 14 day isolation period as they may still have contracted the virus but it was not detected.

Outbreaks

As soon as you are aware of an outbreak, Letter 3 *Outbreak advice for parents* must be provided to all parents instead of Letter 1 which is intended for a single case in the setting.

The **outbreak can be declared over** once no new cases (symptomatic or asymptomatic) have occurred in the 28 days since the appearance of symptoms /from the date of testing in the most recent case. NCC/PHE HPT will confirm when this is the case

7. Provision of education contingency planning

Remote education was a significant feature of the previous restricted opening of settings. Settings should be prepared and able to provide remote education to children who are:

- Isolating as a symptomatic, positive or close contact case
- Staying at home following instruction to do so under localised outbreak control arrangements

Further information on the arrangements expected to be in place are [available here](#)

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8. PHE HPT actions

In the event of a positive case, cluster, outbreak or increased absenteeism due to COVID-19 the following actions will be taken:

- PHE HPT will complete a risk assessment
- Provide guidance where appropriate
- Initiate contact tracing within the setting

In addition, PHE HPT will:

- Provide case information to the NCC Public Health Team
- Call an Outbreak Control Team where it is needed
- Transfer management of the case to NCC if and when they deem it appropriate.

Actions as a result may include:

- Partial or whole closure, this may be required where settings need to review their infection control arrangements to ensure that they meet with the Compliance Code or additional more stringent measures are required for a time.
- Advising to carry out increased cleaning.

9. Contacting PHE and NCC

The single point of contact for PHE HPT is ee.crc@phe.gov.uk or 0300 303 8537.

Please note: enquiries regarding operational issues are forwarded to NCC, settings should try to send these enquiries to the appropriate NCC contact in the first instance. The NCC education incident room phone number is: 07623912974 and operates between 0800 – 1800 Monday to Friday.

The NCC email contact for operational and other enquiries is covid.schools@norfolk.gov.uk