

## Operational Management for Academies

### From 19<sup>th</sup> April 2021

This guidance document has been updated to reflect the current operational requirements for schools in relation to Coronavirus (COVID-19) and the current national restrictions. This guidance must be read in conjunction with the Risk Assessment Pack issued to each school. Headteachers must ensure that all members of staff have access to, and read, this guidance.

The safety of our pupils, staff and other building occupants is of paramount importance within the strategies of this guidance document. Our approach will be in accordance with Government, Public Health England, and associated local guidelines, supported by our risk assessments. Stakeholders, including staff and unions, are being consulted to assist with the production of this document.

It is essential to remember that Coronavirus (COVID-19) is not the only safety risk to our school sites and buildings. Other safety issues, such as bacteria in our water systems, or the risk of fire, remain and they present a risk to life if not properly managed. Statutory servicing, testing and maintenance is to continue to ensure safety, subject to prior risk assessment with GS Musson Associates.

To safely operate schools, there are four stages to follow supporting a policy of systems and controls. These are:

- Stage 1. Risk Assess
- Stage 2. Prepare
- Stage 3. Operate
- Stage 4. Monitor and review

The latest guidance provided by the Government can be found at:

<https://www.gov.uk/government/publications/actions-for-schools-during-the-coronavirus-outbreak/guidance-for-full-opening-schools>

## Policy

Our policy is to follow the Government's published guidance, produce risk assessments based on the requirements of the guidance, which follow a 'system of controls', building on the hierarchy of protective measures that have been in use throughout the Coronavirus (COVID-19) outbreak.

### 1.0 System of Controls

This is the set of actions that all Reach South schools must take. They are grouped into 'prevention' and 'response to any infection' and are outlined in more detail in the sections below.

#### Prevention:

#### 1. Minimise contact with individuals who are required to self-isolate by ensuring they do not attend the school.

##### 1.1 When an individual develops Coronavirus (COVID-19) symptoms or has a positive test

Pupils, staff and other adults must not come into the school if:

- They have one or more [Coronavirus \(COVID-19\) symptoms](#)
- A member of their household (including someone in their [support bubble](#) or [childcare bubble](#) if they have one) has Coronavirus (COVID-19) symptoms
- They are required to [quarantine having recently visited countries outside the Common Travel Area](#)
- They have had a positive test

They must immediately cease to attend and not attend for at least 10 days from the day after:

- The start of their symptoms
- The test date if they did not have any symptoms but have had a positive test (whether this was a [Lateral Flow Device \(LFD\) or Polymerase Chain Reaction \(PCR\) test](#))

You must follow this process and ensure everyone onsite or visiting is aware of it.

Anyone told to isolate by NHS Test and Trace or by their public health protection team has a legal obligation to self-isolate, but you may leave home to avoid injury or illness or to escape risk of harm. More information can be found on [NHS Test and Trace: how it works](#).

If anyone in your school develops a new and continuous cough or a high temperature, or has a loss of, or change in, their normal sense of taste or smell (anosmia), you:

- Must send them home to begin isolation - the isolation period includes the day the symptoms started and the next 10 full days
- Advise them to follow the [guidance for households with possible or confirmed coronavirus \(COVID-19\) infection](#)
- Advise them to [arrange to have a test](#) as soon as possible to see if they have Coronavirus (COVID-19)

Other members of their household (including any siblings and members of their support or childcare bubble if they have one) should self-isolate. Their isolation period includes the day symptoms started for the first person in their household, or the day their test was taken if they did not have symptoms, whether this was a [Lateral Flow Device \(LFD\) or Polymerase Chain Reaction \(PCR\) test](#), and the next 10 full days. If a member of the household starts to display symptoms while self-isolating they will need to restart the 10-day isolation period and book a test.

If anyone tests positive whilst not experiencing symptoms but develop symptoms during the isolation period, they must restart the 10-day isolation period from the day they developed symptoms.

In non-residential schools, if a pupil displays Coronavirus (COVID-19) symptoms, or has a positive test, while at their school they should avoid using public transport and, wherever possible, be collected by a member of their family or household.

In exceptional circumstances, if parents or carers cannot arrange to have their child collected; if age-appropriate and safe to do so the child should walk, cycle or scoot home following a positive test result. If this is not possible, alternative arrangements may need to be organised by the school. The local authority may be able to help source a suitable vehicle

which would provide appropriate protection for the driver, who must be made aware that the individual has tested positive or is displaying symptoms.

If a pupil is awaiting collection:

- They should be moved, if possible, to a room where they can be isolated behind a closed door, depending on the age and needs of the pupil, with appropriate adult supervision if required
- A window should be opened for fresh air ventilation if it is safe to do so
- If it is not possible to isolate them, move them to an area which is at least 2 metres away from other people
- If they need to go to the bathroom while waiting to be collected, they should use a separate bathroom if possible - the bathroom must be cleaned and disinfected using standard cleaning products before being used by anyone else
- Personal Protective Equipment (PPE) must be worn by staff caring for the pupil while they await collection if a distance of 2 metres cannot be maintained (such as for a very young child or a child with complex needs) - more information on PPE use can be found in the [safe working in education, childcare and children's social care settings guidance](#)

In an emergency, call 999 if someone is seriously ill or injured or their life is at risk. Anyone with Coronavirus (COVID-19) symptoms should not visit the GP, pharmacy, urgent care centre or a hospital, unless advised to.

If a pupil in a boarding school shows symptoms, they should initially self-isolate in their residential setting household. Most will benefit from self-isolating in their boarding house so that their usual support can continue. Others will benefit more from self-isolating in their home.

The individual should not use public transport if they are symptomatic. If arranging their return to their family home to isolate, schools should follow advice on transport arrangements in the [safe working in education, childcare and children's social care settings guidance](#).

Public Health England (PHE) has good evidence that routinely taking the temperature of pupils is not recommended as this is an unreliable method for identifying Coronavirus (COVID-19).

Further information is available on how to manage and report confirmed cases of Coronavirus (COVID-19) amongst the school community.

## **1.2 When an individual has had close contact with someone with Coronavirus (COVID-19) symptoms**

Any member of staff who has provided close contact care to someone with symptoms, regardless of whether they are wearing PPE, and all other members of staff or pupils who have been in close contact with that person, do not need to go home to self-isolate unless:

- The symptomatic person subsequently tests positive
- They develop symptoms themselves (in which case, they should self-isolate immediately and [arrange to have a test](#))
- They are requested to do so by NHS Test and Trace or the Public Health England (PHE) advice service (or PHE local health protection team if escalated)
- They have tested positive from an LFD test as part of a community or worker programme

Everyone must wash their hands thoroughly for 20 seconds with soap and running water or use hand sanitiser after any contact with someone who is unwell. The area around the person with symptoms must be cleaned after they have left, to reduce the risk of passing the infection on to other people. See the guidance on the [cleaning of non-healthcare settings](#).

If you are contacted by NHS Test and Trace or your local health protection team and told to self-isolate because you have been a close contact of a positive case, you have a legal obligation to do so.

## **2. Ensure face coverings are used in recommended circumstances**

### **2.1 Secondary (including secondary provision within an all-through setting)**

Where pupils in year 7 (which would be children who were aged 11 on 31 August 2020) and above are educated, we recommend that face coverings should be worn by pupils when moving around the premises, outside of classrooms, such as in corridors and communal areas where social distancing cannot easily be maintained.

In addition, we also recommend in those schools, that face coverings should be worn by adults and pupils in classrooms or during activities unless social distancing can be maintained. This does not apply in situations where wearing a face covering would impact on the ability to take part in exercise or strenuous activity, for example in PE lessons. Face coverings do not need to be worn by pupils when outdoors on the premises.

Subject to the roadmap process, as part of step 3, we expect these precautionary measures to no longer be recommended. This would be no earlier than 17 May and will be confirmed with one week's notice.

In secondary schools, we recommend that face coverings should be worn by staff and adults (including visitors) in situations where social distancing is not possible (for example, when moving around in corridors and communal areas).

### **2.2 Primary**

In primary schools, 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). Children in primary school should not wear face coverings.

### **2.3 All schools**

The use of face coverings may have a particular impact on those who rely on visual signals for communication. Those who rely on visual signals for communication, or communicate

with or provide support to such individuals, are currently exempt from any requirement to wear face coverings in schools or in public places.

Transparent face coverings, which may assist communication with someone who relies on lip reading, clear sound or facial expression to communicate, can also be worn. There is currently very limited evidence regarding the effectiveness or safety of transparent face coverings, but they may be effective in reducing the spread of Coronavirus (COVID-19).

Schools have a duty to make reasonable adjustments for disabled pupils and students, to support them to access education successfully.

The following is a non-exhaustive list of possible adjustments:

- the provision and effective use of assistive listening devices, such as radio aids
- an increased focus on the listening environment, minimising all unnecessary background noise - steps should be taken so that children with hearing loss are taught in classrooms with the best possible acoustic conditions
- allowing the use of speech-recognition apps on mobile devices and tablets in classrooms, taking into account possible variations in the effectiveness of such apps in different classroom situations
- additional communication support, including remote speech-to-text reporters or sign language interpreters
- separate one-to-one teaching and support, without the use of face coverings and in rooms where social distancing can be achieved or through a Perspex panel

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

Face visors or shields should not be worn as an alternative to face coverings, but can be worn in addition to face coverings. The wearing of a face visor or shield is at the discretion of the wearer, except for those activities which require the wearing of a face visor or shield as set out in our risk assessments and this document.

For teaching, such as phonics, the teacher may need to remove their face covering to teach effectively. Where this is the case, and a face covering is removed, social distancing must be maintained.

## **2.4 Face covering exemptions**

Where face coverings are recommended there are some circumstances where people may not be able to wear a face covering. This includes (but is not limited to):

- people who cannot put on, wear or remove a face covering because of a physical or mental illness or impairment, or disability
- where putting on, wearing or removing a face covering will cause you severe distress
- if you are speaking to or providing assistance to someone who relies on lip reading, clear sound or facial expressions to communicate
- to avoid harm or injury, or the risk of harm or injury, to yourself or others – including if it would negatively impact on your ability to exercise or participate in a strenuous activity

The same exemptions will apply in education and childcare settings and you should be sensitive to those needs, noting that some people are less able to wear face coverings and that the reasons for this may not be visible to others.

## **2.5 Access to face coverings**

Due to the increasing use of face coverings in wider society, staff and pupils are already likely to have access to face coverings. PHE has also published guidance on [how to make a simple face covering](#).

For activities that do not require specific PPE, staff and visitors should provide their own face covering. Schools should retain a small contingency supply for people who:

- Are struggling to access a face covering
- Are unable to use their face covering as it has become damp, soiled or unsafe
- Have forgotten their face covering



No pupil should be denied education on the grounds that they are not wearing a face covering.

## **2.6 Safe wearing and removal of face coverings**

Safe wearing of face coverings requires the:

- Cleaning of hands before and after touching – including to remove or put them on
- Safe storage of them in individual, sealable plastic bags between use

Where a face covering becomes damp, it should not be worn, and the face covering should be replaced carefully. Staff and pupils may consider bringing a spare face covering to wear if their face covering becomes damp during the day.

You must instruct pupils to:

- Not touch the front of their face covering during use or when removing it
- Dispose of temporary face coverings in a 'black bag' waste bin (not recycling bin)
- Place reusable face coverings in a plastic bag they can take home with them
- Wash their hands again before heading to their classroom

Separate guidance is available on preventing and controlling infection, including the use of PPE, in [education, childcare and children's social care settings](#)

## **2.7 How to wear a face covering**

A face covering should:

- Cover your nose and mouth while allowing you to breathe comfortably
- Fit comfortably but securely against the side of the face
- Be secured to the head with ties or ear loops
- Be made of a material that you find to be comfortable and breathable, such as cotton
- Ideally include at least two layers of fabric (the World Health Organisation recommends three depending on the fabric used)
- Unless disposable, it should be able to be washed with other items of laundry according to fabric washing instructions and dried without causing the face covering to be damaged

## **2.8 Where necessary, wear appropriate Personal Protective Equipment (PPE)**

PPE should be worn in line with your specific risk assessments. Wearing PPE at the wrong time can contribute to a false sense of security, causing lapses in other measures, such as hand washing and social distancing, which has shown to be the most effective method of decreasing infectious disease risk and spread.

Through risk assessment, we have exceeded the suggestions in current Public Health England (PHE) guidance. In the government/PHE guidance, enhanced PPE is generally recommended when activities are carried out in situations where a person with Coronavirus (COVID-19) symptoms has been present. It is possible that people with Coronavirus (COVID-19) may not present significant symptoms, but may still present a transmission risk. Our stance will bring the risk factors down to the lowest possible whilst still undertaking the work activities. It is however very important that issued PPE is used in the correct way. The use of PPE at the incorrect time could potentially create more risk. Furthermore, we have a social duty not to overuse PPE at a time of unprecedented worldwide demand, and that continued supply is not guaranteed.

The four essential pieces that we require are:

- Disposable gloves – lightweight, single use gloves
- Disposable aprons – lightweight polythene (LDPE, MDPE & HDPE) aprons, single use aprons.
- Face shields/visors – lightweight face shields, REUSABLE
- Respirators – Filtering face piece type respirators with suitable protection ratings (FFP2 or FFP3). Type IIR2 face coverings can also be used, subject to suppliers having sufficient stock to support the NHS. These are Non-Reusable (NR).

Our requirements:

- Staff in school – face covering as appropriate to the primary or secondary setting as outlined above
- Adult visitors to school – face covering
- Food preparation – face covering
- First aid delivery – disposable gloves, disposable apron, respirator, face- shield
- Intimate care – disposable gloves, disposable apron, respirator, face shield

- Physical restraint\* – disposable gloves, disposable apron, respirator, face shield
- Supervising isolation – disposable gloves, disposable apron, respirator, face shield
- Carrying out health questions on admittance – face covering if social distancing cannot be maintained at all times
- To clean areas where there has been a symptomatic person – disposable gloves, disposable apron
- To clean areas where there has been heavy contamination (such as visible bodily fluids) from a person with Covid-19 symptoms – disposable gloves, disposable apron, respirator, face shield

\* Note – the first person to react to a situation requiring restraint may have to do so without PPE to ensure immediate safety of the individual. They should be relieved as soon as possible by a person wearing the defined PPE.

### **2.8.1 Before putting on PPE**

Please follow steps in the order below:

- Perform hand hygiene, make sure you wash your hands for 20 seconds with warm water and soap or use an alcohol gel, before donning PPE.
- Tie hair back if applicable.
- Ensure you are hydrated.
- Remove jewellery, bracelets, watches or stoned rings.
- Check you have the correctly sized PPE.

### **2.8.2 Donning or putting on PPE**

Please follow steps in the order below (see: Diagram 1)

#### **i. Plastic Apron**

The apron provides an additional layer of protection to the front of the body against exposure to body fluids or excrement from the person.

Putting on your single use disposable apron (see: Diagram 1):

- Put on your single-use (disposable) plastic apron, making sure it is tied securely at the back.

ii. Mask – Respiratory Protective Equipment (RPE)

The aim of wearing a facemask is to protect your mouth and nose from another person's respiratory secretions. Wearing a facemask also protects persons by minimising the risk of passing on infection from yourself (via secretions or droplets from your mouth, nose and lungs) to others.

Putting on your single use disposable mask (see: Diagram 2):

- Care must be taken not to touch the inside of the mask
- Make sure the disposable mask is the correct size, new, clean and undamaged before you use it.
- Cup the disposable mask in one hand, with the straps hanging out of the way.
- Hold the disposable mask in place on your face.
- Pull the bottom strap over your head, to the back of your neck.
- Pull the top strap over your head to sit above your ears.
- Check the straps are not twisted. If you need to tighten the straps, pull both ends at the same time, bottom first, then top.
- If there is a nose clip, press this firmly to the shape of your nose.
- Masks must not be touched by hands once mask is in place.
- Masks must be changed if they become moist or damaged.
- Masks must not be removed until task is completed.

iii. Face Shield

A full-face shield over your facemask to provide additional protection to the front and sides of the face, including skin and eyes, face shields provide a useful adjunct to respiratory protection for workers working with persons with respiratory infections. However, they cannot be used as a substitute for respiratory protection when it is needed. Spectacles are not considered an adequate form of protection.

Putting on your re-useable face shield:

- Bending forward, hold on to the face shield with both hands, expand the elastic with your thumbs and place the elastic behind your head, so that the foam rests on your forehead.
- Once the shield is situated, check to make sure it covers the front and sides of the face and no areas are left uncovered.

#### iv. Gloves

Disposable gloves protect you from picking up the Coronavirus (COVID-19) virus from the environment (such as contaminated surfaces) or directly from people with Coronavirus (COVID-19).

Putting on your single use gloves:

- Care must be taken not to touch the face, mouth or eyes when wearing gloves.
- Take out a glove from its original dispenser, holding only the cuff.
- Hold glove at opening with one hand and slide fingers and thumb of opposite hand into glove.
- Pull towards wrist to fully don glove using only knuckles to avoid fingernail puncture.
- Take second glove out of dispenser with bare hand, holding only the cuff.
- Hold glove at opening and slide fingers and thumb into glove. Pull glove towards wrist using knuckles of gloved hand.

#### **2.8.3 Removing of or doffing PPE.**

PPE should be removed in an order that minimises the potential self-contamination, before leaving the room where PPE was required. Remove gloves and apron and dispose of it by double bagging, then store securely for 72 hours, then throw it away in the regular waste receptacle.

Once outside the room, remove disposable facemask and dispose of it by double bagging, then store securely for 72 hours, then throw it away in the regular waste receptacle and clean hands.

Please follow steps in the order below (see: Diagram 3)

- i. Gloves (see: Diagram 4)
  - Remove gloves. Grasp the outside of glove with the opposite gloved hand; peel off. Hold the removed glove in the remaining gloved hand.
  - Slide the fingers of the un-gloved hand under the remaining glove at the wrist.
  - Peel the remaining glove off over the first glove and discard.
  - Clean hands.
- ii. Apron
  - Unfasten or break apron ties at the neck and let the apron fold down on itself.
  - Break ties at waist and fold apron in on itself – do not touch the outside – this will be contaminated. Discard.
- iii. Face shield
  - Remove eye protection if worn. Use both hands to handle the straps by pulling away from face and place down.
  - Clean hands.
- iv. Face mask
  - Remove facemask once your work is completed.
  - Untie or break bottom ties, followed by top ties or elastic, and remove by handling the ties only. Lean forward slightly. Discard.
  - DO NOT reuse once removed.
  - Clean hands with soap and water.
- v. Cleaning a face shield
  - Fresh single use gloves to be worn before cleaning commences.
  - The wearer should clean the inside and outside of the mask using a suitable disinfectant cleaning wipe.
  - Face shield to be kept in a sterile bag to prevent contamination.
  - Clean hands with soap and water.
  - Dispose of gloves by double bagging, then store securely for 72 hours, then throw it away in the regular waste receptacle and clean hands.

Diagram 1



Public Health  
England

# Putting on personal protective equipment (PPE) for non-aerosol generating procedures (AGPs)\*

Please see donning and doffing video to support this guidance: [https://youtu.be/-GncQ\\_ed-9w](https://youtu.be/-GncQ_ed-9w)

## Pre-donning instructions:

- Ensure healthcare worker hydrated
- Remove jewellery
- Tie hair back
- Check PPE in the correct size is available

- 1** Perform hand hygiene before putting on PPE.



- 2** Put on apron and tie at waist.



- 3** Put on facemask – position upper straps on the crown of your head, lower strap at nape of neck.



- 4** With both hands, mould the metal strap over the bridge of your nose.



- 5** Don eye protection if required.



- 6** Put on gloves.



\*For the PPE guide for AGPs please see:

[www.gov.uk/government/publications/covid-19-personal-protective-equipment-use-for-aerosol-generating-procedures](http://www.gov.uk/government/publications/covid-19-personal-protective-equipment-use-for-aerosol-generating-procedures)

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Diagram 2

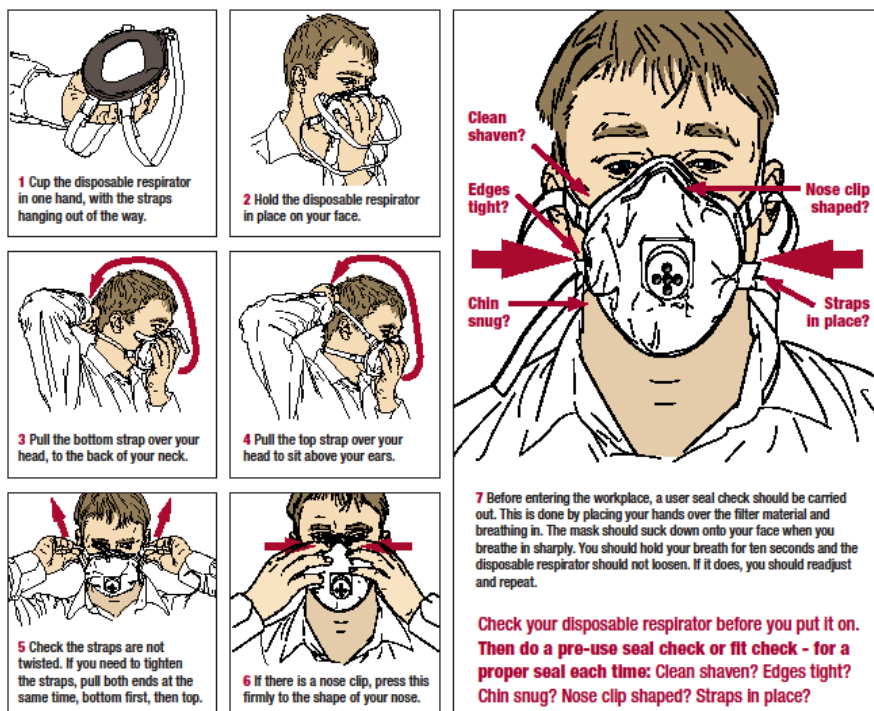


## Using disposable respirators

### Pre-use checks

- You should be clean-shaven around the face seal to achieve an effective fit when using disposable respirators. Beards and stubble will stop the disposable respirator sealing to your face and protecting you properly
- Make sure it is the right disposable respirator for your work and for you - have you passed a face fit test in this disposable respirator?
- Make sure the disposable respirator is clean and undamaged before you use it
- Follow the manufacturer's instructions for checking the disposable respirator and putting it on
- Check the fit every time you put on the disposable respirator to ensure there are no leaks

### Putting the disposable respirator on and checking it fits



This poster illustrates a typical disposable respirator, there are many other types available. Follow the manufacturer's instructions on putting your type of disposable respirator on and checking it fits.


Visit [hse.gov.uk/respiratory-protective-equipment](https://www.hse.gov.uk/respiratory-protective-equipment) for more information

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C100 03/2020



Diagram 3

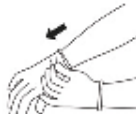









**Public Health England**

## Taking off personal protective equipment (PPE)

### for non-aerosol generating procedures (AGPs)\*

Please see donning and doffing video to support this guidance: [https://youtu.be/-GncQ\\_ed-9w](https://youtu.be/-GncQ_ed-9w)

|  |   |  |  |
|--|---|--|--|
| <p>• PPE should be removed in an order that minimises the risk of self-contamination</p>   |   | <p>• Gloves, aprons (and eye protection if used) should be taken off in the patient's room or cohort area</p>  |  |
| <p><b>1</b> Remove gloves. Grasp the outside of glove with the opposite gloved hand; peel off.</p> <p>Hold the removed glove in the remaining gloved hand.</p>   |   | <p>Slide the fingers of the un-gloved hand under the remaining glove at the wrist.</p> <p>Peel the remaining glove off over the first glove and discard.</p> |  |
| <p><b>2</b> Clean hands.</p>   |  | <p><b>3</b> Apron.</p> <p>Unfasten or break apron ties at the neck and let the apron fold down on itself.</p>  |   |
| <p><b>4</b> Remove eye protection if worn.</p> <p>Use both hands to handle the straps by pulling away from face and discard.</p>   |   |   |  |
| <p><b>5</b> Clean hands.</p>   |   |    |  |
| <p><b>6</b> Remove facemask once your clinical work is completed.</p> <p>Untie or break bottom ties, followed by top ties or elastic, and remove by handling the ties only. Lean forward slightly. Discard. DO NOT reuse once removed.</p> |   |   |  |
| <p><b>7</b> Clean hands with soap and water.</p>   |   |    |  |

\*For the PPE guide for AGPs please see:  
[www.gov.uk/government/publications/covid-19-personal-protective-equipment-use-for-aerosol-generating-procedures](https://www.gov.uk/government/publications/covid-19-personal-protective-equipment-use-for-aerosol-generating-procedures)

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**Diagram 4**



## Health and Safety Executive

## Correct removal of gloves

Single use gloves (splash resistant)

**Follow the steps shown**



[www.hse.gov.uk](http://www.hse.gov.uk)

## 2.9 Disposal of PPE and face coverings

Used PPE and any disposable face coverings that staff, children, young people or students wear should be placed in a refuse bag and can be disposed of as normal domestic waste. If the wearer has symptoms of Coronavirus (COVID-19), disposal of used PPE and face coverings should be in line with [COVID-19: cleaning of non-healthcare settings outside the home](#).

Used PPE and disposable face coverings should not be put in a recycling bin or dropped as litter. Schools should provide extra waste bins for staff and customers to throw away disposable face coverings and PPE and should ensure that staff and customers do not use a recycling bin.

Schools should communicate clearly to pupils, staff and visitors a process for when face coverings should be worn within certain settings.

The safe wearing of face coverings requires cleaning of hands before and after touching – including to remove or put them on – and the safe storage of reusable face coverings in individual, sealable plastic bags between use. Where a face covering becomes damp, it should not be worn and the face covering should be replaced carefully. Staff, pupils and students may consider bringing a spare face covering to wear in the event that their face covering becomes damp during the day. See further guidance on [face coverings in education settings](#).

To dispose of waste such as disposable cleaning cloths, face coverings, tissues and PPE from people with symptoms of Coronavirus (COVID-19), including people who are self-isolating and members of their household:

- Put it in a plastic rubbish bag and tie it when full
- Place the plastic bag in a second bin bag and tie it
- Put it in a suitable and secure place marked for storage for 72 hours

This waste should be stored safely and securely kept away from children. You should not put your waste in communal waste areas until the waste has been stored for at least 72 hours.

Storing for 72 hours saves unnecessary waste movements and minimises the risk to waste operatives. This waste does not require a dedicated clinical waste collection in the above circumstances.

### **3. Ensure everyone is advised to clean their hands thoroughly and more often than usual**

Coronavirus (COVID-19) is an easy virus to kill when it is on skin. This can be done with soap and water or hand sanitiser. You must ensure that pupils clean their hands regularly, including:

- When they arrive at the school
- When they return from breaks
- When they change rooms
- Before and after eating

Consider how often pupils and staff will need to wash their hands and incorporate time for this in timetables or lesson plans.

Staff working with pupils who spit uncontrollably may want more opportunities to wash their hands than other staff.

Pupils who use saliva as a sensory stimulant or who struggle with 'catch it, bin it, kill it' may also need more opportunities to wash their hands.

Continue to help pupils with complex needs to clean their hands properly.

Frequent and thorough hand cleaning should now be regular practice. You should consider:

- Whether you have enough hand washing or hand sanitiser stations available so that all pupils and staff can clean their hands regularly
- If you need to supervise hand sanitiser use given the risks around ingestion – skin friendly skin cleaning wipes can be used as an alternative

- Building these routines into school culture, supported by behaviour expectations and helping ensure younger pupils and those with complex needs understand the need to follow them

**4. Ensure good respiratory hygiene for everyone by promoting the ‘catch it, bin it, kill it’ approach**

The ‘catch it, bin it, kill it’ approach continues to be very important. Make sure enough tissues and bins are available to support pupils and staff to follow this routine. As with hand cleaning, you must ensure younger pupils and those with complex needs are helped to get this right, and all pupils understand that this is now part of how the setting operates. The [e-Bug Coronavirus \(COVID-19\) website](#) contains free resources for schools, including materials to encourage good hand and respiratory hygiene.

Some pupils with complex needs will struggle to maintain as good respiratory hygiene as their peers, for example those who spit uncontrollably or use saliva as a sensory stimulant.

**5. Maintain enhanced cleaning, including cleaning frequently touched surfaces often, using standard products, such as detergents**

In line with the risk assessment and timetabling of the day, put in place and maintain an enhanced cleaning schedule. This should include:

- more frequent cleaning of rooms or shared areas that are used by different groups
- cleaning frequently touched surfaces more often than normal, such as:
  - door handles
  - handrails
  - table tops
  - play equipment
  - toys
  - electronic devices (such as phones)
  - cleaning toilets regularly

- encouraging children, young people and students to wash their hands thoroughly after using the toilet
- if your site allows it, allocating different groups their own toilet blocks

When cleaning, use the usual products, like detergents and bleach, because these are very effective at getting rid of the virus on surfaces.

All education, childcare and children's social care settings should follow the [PHE guidance on cleaning for non-healthcare settings](#). This contains advice on the general cleaning required in addition to the existing advice on cleaning when there is a suspected case.

## **6. Consider how to minimise contact across the site and maintain social distancing wherever possible**

Minimising contacts and mixing between people reduces transmission of Coronavirus (COVID-19). This is important in all contexts.

The overarching principle to apply is reducing the number of contacts between pupils and staff. This can be achieved through keeping groups separate (in 'bubbles') and through maintaining distance between individuals. These are not alternative options and both measures will help, but the balance between them will change depending on the:

- Pupil's ability to distance
- Layout of the building
- Feasibility of keeping distinct groups separate while offering a broad curriculum

Further information on how this can be implemented in each setting is available in the [guidance for schools](#), [guidance for specialist settings](#), [guidance for early years](#), [guidance for further education](#).

### **6.1 How to group children**

Consistent groups reduce the risk of transmission by limiting the number of pupils and staff in contact with each other to only those within the group.

Maintaining distinct groups or 'bubbles' that do not mix makes it quicker and easier in the event of a positive case to identify those who may need to self-isolate and to keep that number as small as possible.

When using larger groups, the other measures from the system of controls become even more important to minimise:

- Transmission risks
- The numbers of pupils and staff who need to self-isolate

Younger pupils and those with complex needs will not be able to maintain social distancing and it is acceptable for them not to distance within their group.

Using small groups can:

- Restrict the normal operation of education
- Present educational and logistical challenges

You will need to consider:

- The cleaning and use of shared spaces, such as:
  - Playgrounds
  - Boarding houses
  - Dining halls
  - Toilets
- The provision of specialist teaching and therapies

Assess your circumstances and try to implement 'bubbles' of an appropriate size to achieve the greatest reduction in contact and mixing.

Whatever the size of the group, they should be kept apart from other groups where possible. Encourage pupils to keep their distance within groups. Try to limit interaction, sharing of rooms and social spaces between groups as much as possible.

Both the approaches of separating groups and maintaining distance are not 'all or nothing' options and will still bring benefits, even if partially implemented.



You may keep pupils in their class groups for most of the classroom time, but also allow mixing in wider groups for:

- Specialist teaching
- Wraparound care
- Transport
- Boarding pupils who may be in one group residentially and another during the school day

Siblings may also be in different groups.

All teachers and other staff can operate across different classes and year groups to facilitate the delivery of the timetable and specialist provision. Where staff need to move between groups, they should try and keep their distance from pupils and other staff as much as they can, ideally 2 metres from other adults. Try to minimise the number of interactions or changes wherever possible.

## **6.2 Measures within the classroom**

Maintaining a distance between people while inside and reducing the amount of time they are in face-to-face contact lowers the risk of transmission. There is strong public health advice that staff in secondary schools maintain distance from their pupils, staying at the front of the class, and away from their colleagues where possible. Ideally, adults should maintain 2-metre distance from each other and from children. This is not always possible, particularly when working with pupils with complex needs, or those who need close contact care. Schools should provide educational and care support for these pupils as normal, with other increased hygiene protocols in place to minimise the risk of transmission.

Where possible, for example with older pupils with less complex needs who can self-regulate their behaviours without distress, they should also be supported to maintain distance and not touch staff and their peers. This will not be possible for the youngest children, and some children and young people with complex needs. It may also not be feasible where space does not allow. Doing this where you can, even some of the time, will help.



When staff and pupils cannot maintain distancing, the risk can be reduced by keeping pupils in the smaller, class-sized groups.

Schools should make small adaptations to the classroom to support distancing where possible. That should include seating pupils side by side and facing forwards, rather than face-to-face or side on. It might also include moving unnecessary furniture out of the classroom to make more space.

### **6.3 Measures elsewhere**

You must avoid large gatherings such as assemblies or collective worship with more than one group.

When timetabling, groups should be kept apart and movement around the school kept to a minimum. While passing briefly in the corridor or playground is low risk, avoid creating busy corridors, entrances and exits. Consider staggered break times and lunch times. Make sure you allow time for cleaning surfaces in the dining hall between groups.

You should also plan how shared staff spaces are set up and used to help staff to distance from each other.

You should minimise the use of staff rooms, although staff must still have a break of a reasonable length during the day.

### **6.4 Measures for arriving at, and leaving the setting**

Consider staggered starts or adjusting start and finish times to keep groups apart as they arrive and leave.

Staggered start and finish times should not reduce the amount of overall teaching time. A staggered start may include:

- Condensing or staggering free periods or break time but retaining the same amount of teaching time
- Keeping the length of the day the same but starting and finishing later to avoid busy periods

You should consider how to communicate any changes to parents. Remind them about the process that has been agreed for drop off and collection, including not to:

- Gather at the gates
- Come onto the site without an appointment

### **Entry to school**

Pupils should be asked when entering school if they feel unwell or if they are presenting any symptoms of Coronavirus (COVID-19). If symptoms are present, entry to school should not be permitted. Whilst some organisations are choosing to take temperatures at point of entry, this may give a false impression of safety. The accuracy of the reading depends on the quality of the equipment used. Furthermore, there is growing evidence that it is possible to have Coronavirus (COVID-19) whilst having a normal temperature. Schools should ask someone how they feel and to also ask (the parent or carer) if the child has come into contact with anyone who is presenting symptoms in the last 10 days. If that is the case, they should self-isolate and entry to school will not be appropriate to ensure the safety of others. Social distancing must be maintained whilst assessing health.

Schools have been provided with the Reach South Daily Health Check Poster (Appendix 2), which schools can choose to use to ease the pressure on entry to school. Pupils must be taught not to automatically do a 'thumbs up' and must consider the questions being asked. Staff members who are asking the questions should wear a face covering if 2 metres social distancing cannot be strictly maintained.

Parents and carers should be discouraged from waiting on site or gathering near to the school gates. Staggering of start and finish times for each teaching 'bubble' will assist. There should be a handwashing station in the school entrance, all teaching spaces, and in other key locations around school (determined by local risk assessment). Schools should use multiple prescribed site entrances where possible at the start and the end of the school day to assist with social distancing on entry to and exit from site.

## 6.5 Travelling to the setting

Pupils and staff may use public transport where necessary, but encourage them to walk, cycle or scoot to and from school wherever it is possible and safe to do so. Where pupils and staff need to use public transport, they should follow the [safer travel guidance for passengers](#).

The [transport to schools and other places of education](#) guidance requires those involved in the provision of dedicated transport to schools to identify the risks. You should adopt measures to address those risks in a way that works in the local circumstances. Distancing should be maximised and mixing of groups should be minimised where possible and practical.

People aged 11 and over must wear a face covering when travelling on public transport. In accordance with advice from PHE, they must also wear a face covering when travelling on dedicated transport to secondary school. People who are [exempt](#) do not need to wear a face covering.

## 6.6 Evacuation and Lockdown

In the event of a building required to be evacuated by activation of the fire alarm, the greatest and most immediate risk to health and safety is the fire or other reason to evacuate. Hence, social distancing during evacuation is not required to be followed, as the priority is to evacuate quickly. Upon exiting the building, occupants should immediately proceed to the assembly point where social distancing between bubbles, adults and visitors should be observed. Social distancing should also be observed whilst reoccupying the building (should it be safe to reoccupy).

Under the requirement to lockdown, occupants should remain in the space they are in unless advised to do otherwise by the nature of the incident, and observe social distancing if safe to do so. The police should be notified immediately should there be any suspected reason to lockdown, and their guidance followed. The Director of Operations should also be notified of the lockdown as soon as it is safe to do so.

## **6.7 Isolation Spaces**

Where possible, each school should maintain its triad of isolation spaces. Where this is not possible, at least one specific isolation space for anyone who may develop Coronavirus (COVID-19) symptoms during the school day must be available. The door to this space (or spaces) must be clearly signed as such and be used for no other purpose. Anyone who displays symptoms of Coronavirus (COVID-19) should leave the school environment as soon as possible. There should also be a dedicated toilet facility for anyone requiring to use the isolation space. Waste from these spaces (such as hand towels) must be disposed of as contaminated waste.

## **6.8 Break times and exercise**

Use of outdoor space is essential for breaks, exercise and mental wellbeing. This should be encouraged. Activities should be selected to reduce the risk of injury and the need for close contact first aid. Safe use of external space relies heavily on supervision and education of safe use, in addition to the timetable reducing numbers outside at any one time. Hand washing or sanitising should be encouraged upon re-entry to the building.

## **6.9 Signage**

All current signage relating to social distancing, health checks, hand washing and good related hygiene should continue to be displayed. A 2-metre zone is to be marked around the teaching point in each teaching space to encourage social distancing. A 2-metre square is to be marked adjacent to the entry point of the teaching space (clear of the door swing) as a safe point for lesson observations etc.

The Reach South Daily Health Check Poster (*Appendix 2*) should be displayed at all entry points to the school site if the school chooses to use this with assisting the health check process. Please remember that adult visitors to the site and all staff must also be asked the health check questions whenever they enter the site.

## **6.10 Lettings**

No lettings or use of space by external bodies can be considered until the second half of the Summer term of 2021. Lettings can only be considered from the second half of the Summer Term of 2021, following review of risk assessments for each use of space. The risk assessments will need to be approved in advance by the Headteacher and the Director of Operations. The financial viability of lettings will need to be reviewed, given that all spaces used will have to be thoroughly cleaned prior to further school use. For clarity, where for example a nursery uses school space during school hours, those arrangements can continue, provided that they follow the requirements of this guidance document as a minimum and their activities are appropriately risk assessed.

## **6.11 Projects**

No construction, alteration, refurbishment or maintenance projects are to proceed without the consent of The Director of Operations and GS Musson Associates. This is to ensure general project safety and Coronavirus (COVID-19) related safety. If possible, information should be provided for consent at least 2 weeks prior to works commencing to allow for information to be checked and if required, amended for further consideration. Where emergency maintenance is required, this period can be reduced as required, but consultation must still occur and approval be given. Where a contractor arrives on site to carry out maintenance without prior risk assessment, they must not be turned away. In this scenario, GS Musson must be contacted and they will advise if the work can proceed or not.

For clarity, statutory servicing, testing and maintenance must continue to ensure safety but must be subject to prior risk assessment with GS Musson Associates prior to the work commencing.

## **6.12 Other considerations**

Some pupils with SEND (whether with EHC plans or on SEN support) will need specific help and preparation for the changes to routine that these measures will involve. Staff should plan to meet these needs, for example using social stories.

To make sure pupils with medical conditions are fully supported, work with:

- Local authorities
- Health professionals
- Regional schools' commissioners
- Other services

Schools should use individual healthcare plans to help pupils receive an education in line with their peers. In some cases, the pupil's medical needs will mean this is not possible, and educational support will require flexibility. Further information is available in the guidance on [supporting pupils at school with medical conditions](#).

Specialists, therapists, clinicians and other support staff for pupils with SEND should provide interventions as usual. They, as well as supply teachers, peripatetic teachers or other temporary staff, can move between settings. They should ensure they minimise contact and maintain as much distance as possible from other staff. Such specialists will be aware of the PPE most appropriate for their role.

Discussions should be held with key contractors about the school's control measures and ways of working. Schools should ensure site guidance on physical distancing and hygiene is explained to visitors on or before arrival. Where visits can happen safely outside of school hours, they should. A record should be kept of all visitors with sufficient detail to support rapid contact tracing if required by NHS Test and Trace.

As normal, you should engage with your local immunisation providers to provide immunisation programmes on site, ensuring these will be delivered in keeping with the school's control measures. These programmes are essential for children's health and wellbeing and can also provide benefits for staff.

Where a pupil routinely attends more than one setting on a part time basis, for example because they are dual registered at a mainstream school and a special setting, the settings should work through the system of controls collaboratively, enabling them to address any risks identified and allowing them to jointly deliver a broad and balanced curriculum for the pupil. Pupils should be able to continue attending both settings. While some adjustment to

arrangements may be required, pupils in this situation should not be isolated as a solution to the risk of greater contact except when required by specific public health advice.

### **6.13 Equipment**

For individual and very frequently used equipment, such as pencils and pens, staff and pupils should have their own items.

Classroom based resources, such as books and games, can be used and shared within the bubble. These should be cleaned regularly, along with all frequently touched surfaces.

Resources that are shared between classes or bubbles, such as sports, arts, music and science equipment should be cleaned frequently. When sharing equipment between different bubbles, you should either:

- Clean it before it is moved between bubbles
- Allow them to be left unused for a period of 48 hours (72 hours for plastics)

Schools will need to assess the ability to clean equipment used in the delivery of therapies, for example, physiotherapy equipment or sensory equipment. Determine whether this equipment can withstand cleaning and disinfecting between each use before it is put back into general use. Where cleaning or disinfecting is not possible or practical, resources will have to be either:

- Restricted to one user
- Left unused for a period of 48 hours (72 hours for plastics) between use by different individuals

Outdoor playground equipment should be more frequently cleaned than normal. This also applies to resources used inside and outside by wraparound care and out-of-school settings providers.

Pupils should limit the amount of equipment they bring into school each day, including essentials such as:

- Lunch boxes
- Hats and coats

- Books
- Stationery
- Mobile phones

Bags are allowed.

Pupils and teachers can take books and other shared resources home, although unnecessary sharing should be avoided. Similar rules on hand cleaning, cleaning of the resources and rotation should apply to these resources.

#### **6.14 Parent pick-up and drop-offs**

Travel to school patterns differ greatly. If those patterns allow, consider staggered starts or adjusting start and finish times to keep groups apart as they arrive and leave school.

Staggered start and finish times should not reduce the amount of overall time children spend in school. A staggered start may, for example, include keeping the length of the day the same but starting and finishing later to avoid rush hour.

Schools should consider how to communicate this to parents and remind them about the process that has been agreed for drop off and collection, including that gathering at the school entrance and otherwise coming onto the site without an appointment is not allowed.

### **7. Keep occupied spaces well ventilated**

Good ventilation reduces the concentration of the virus in the air, which reduces the risk from airborne transmission. This happens when people breathe in small particles (aerosols) in the air after someone with the virus has occupied and enclosed area.

When your school is in operation, it is important to ensure it is well ventilated and a comfortable teaching environment is maintained.

These can be achieved by a variety of measures including:



- Mechanical ventilation systems – these should be adjusted to increase the ventilation rate wherever possible and checked to confirm that normal operation meets current guidance and that only fresh outside air is circulated. If possible, systems should be adjusted to full fresh air or, if not, then systems should be operated as normal as long as they are within a single room and supplemented by an outdoor air supply
- Natural ventilation – opening windows (in cooler weather windows should be opened just enough to provide constant background ventilation and opened more fully during breaks to purge the air in the space). Opening internal doors (excluding fire doors) can also assist with creating a throughput of air
- Natural ventilation – if necessary external opening doors may also be used (as long as they are not fire doors and where safe to do so)

The [Health and Safety Executive guidance on air conditioning and ventilation during the coronavirus outbreak](#) and [CIBSE Coronavirus \(COVID-19\) advice](#) provides more information.

To balance the need for increased ventilation while maintaining a comfortable temperature, consider:

- Opening high level windows in colder weather in preference to low level to reduce draughts
- Increasing the ventilation while spaces are unoccupied (for example, between classes, during break and lunch, when a room is unused)
- Providing flexibility to allow additional, suitable indoor clothing
- Rearranging furniture where possible to avoid direct draughts

Heating should be used as necessary to ensure comfort levels are maintained, particularly in occupied spaces.

## **8. Ensure individuals wear the appropriate Personal Protective Equipment (PPE) where necessary**

Face coverings are not classified as [PPE \(Personal Protective Equipment\)](#). PPE is used in a limited number of settings to protect wearers against hazards and risks, such as surgical

masks or respirators used in medical and industrial settings. A face covering is a covering of any type, which covers your nose and mouth.

Most staff in schools will not require PPE beyond what they would normally need for their work. If a pupil already has routine intimate care needs that involve the use of PPE, the same PPE should continue to be used.

Additional PPE for Coronavirus (COVID-19) is only required in a very limited number of scenarios, for example, when:

- A pupil becomes ill with coronavirus (COVID-19) symptoms, and only then if a 2 metre distance cannot be maintained
- Performing [aerosol generating procedures \(AGPs\)](#)

When working with children and young people who cough, spit or vomit but do not have Coronavirus (COVID-19) symptoms, only any PPE that would be routinely worn, should be worn.

PPE must be used in accordance with the requirements of the current risk assessment pack.

## **9. Promote and engage in asymptomatic testing, where available**

Rapid testing remains a vital part of our plan to suppress this virus. Schools should follow the guidance set out for their settings:

- [Primary schools, school-based nurseries and maintained nursery schools](#)
- [Secondary schools and colleges](#)
- [Specialist settings](#)

## System of controls - response to any infection

### 10. Promote and engage with the NHS Test and Trace process

Staff members, parents and carers will need to:

- [Book a test](#) if they or their child has symptoms - the main symptoms are:
  - a high temperature
  - a new continuous cough
  - a loss or change to your sense of smell or taste
- [Self-isolate](#) immediately and not come to school if:
  - they develop symptoms
  - they have been in close contact with someone who tests positive for Coronavirus (COVID-19)
  - anyone in their household or support or childcare bubble develops symptoms of Coronavirus (COVID-19)
  - they are required to do so having [recently travelled from certain other countries](#)
  - they have been advised to isolate by NHS test and trace or the PHE local health protection team, which is a legal obligation
- Provide details of anyone they have been in close contact with, if they test positive for Coronavirus (COVID-19) or if asked by NHS Test and Trace

#### 10.1 Polymerase Chain Reactions (PCR) tests for symptomatic testing

##### Booking a polymerase chain reaction (PCR) test through 119

Anyone who displays symptoms of Coronavirus (COVID-19) can and should get a test. Tests for symptomatic illness can be booked online through the [NHS testing and tracing for coronavirus \(COVID-19\) website](#), or ordered by telephone via NHS 119 for those without access to the internet.

Essential workers, which includes anyone involved in education or childcare, have priority access to testing.

All children and young people can be tested if they have symptoms. This includes children under 5, but children aged 11 and under will need to be helped by their parents or carers.

### **Polymerase Chain Reaction (PCR) tests contingency supply**

Separate to the asymptomatic testing regime, all schools were sent an initial supply of 10 PCR test kits before the start of the autumn term in 2020. These kits can be replenished when they run out by making an order through the online portal. Schools should call the Test and Trace helpdesk on 119 if the kits that you have ordered have not arrived.

Having a test at a testing site will deliver the fastest results for symptomatic cases. These PCR test kits are provided to be used in the exceptional circumstance that an individual becomes symptomatic and you believe they may have barriers to accessing testing elsewhere.

Schools will need to decide how to prioritise the distribution of their test kits.

These kits can be given directly to:

- Staff
- Parents collecting a pupil who has developed symptoms at school

These PCR tests kits will also help ensure that symptomatic staff can get a test. If they test negative, they can return to work as soon as they are well and no longer have symptoms of coronavirus (COVID-19).

Further information on [test kits for schools and further education providers](#) is available.

Schools should ask parents and staff to inform them as soon as they get their results.

## **10.2 NHS COVID-19 app**

The app is available to anyone aged 16 and over to download if they choose. For some young people, particularly some with SEND, parents will need to decide whether their use of the app is appropriate.

This will mean that some pupils in year 11, and most pupils in years 12 and above will be eligible to use the app and benefit from its features.

Staff members are also able to use the app.

The guidance for schools and further education colleges in England provides information about [how the app works and guidance for its use within schools in England](#).

## 11. Manage confirmed cases of Coronavirus (COVID-19) amongst the school community

Schools must take swift action when you become aware that someone who has attended school has tested positive for Coronavirus (COVID-19), having developed symptoms and taken a PCR test outside of school.

Where a positive test is returned to either a pupil, member of staff, or visitor, it is essential that the school is informed immediately of that positive test result. This is to assist Test and Trace to ensure the safety of others in school and their households beyond. Failure to inform the school of a positive test result could be placing others at risk who need to self-isolate if they have been in close contact.

In the event of a positive test, the headteacher (or person designated by the headteacher) is to immediately inform the Trust via **telephone**. Emails or text messages are not an adequate substitute for a phone call. The Trust will advise on the actions to be taken and will notify the Department for Education (DfE) / Public Health England (PHE). When telephoning the Trust, please speak to:

[REDACTED]

If not available:

[REDACTED]

If not available:

[REDACTED]

If not available:

[REDACTED]

These four numbers ensure that you can contact the Trust 24 hours a day, 7 days a week. When reporting a positive case, please follow the checklist in Appendix 1 at the end of this document.

You should only seek a PCR test for Coronavirus (COVID-19) when displaying one of the following symptoms (or if you have a positive or double void lateral flow test at home):

- A temperature
- A new or continuous cough
- A change or loss in sense of taste or smell

If you seek a PCR test in the absence of these symptoms, you must as a result of your action, consider yourself to be at risk of having Coronavirus (COVID-19), as such you, and your household **must** self-isolate in the same way as a person who is displaying the symptoms.

Visitors to school must leave their contact details and be encouraged to participate in national Testing and Tracing by use of the mobile phone NHS COVID-19 app. Schools must display their site-specific QR code at any point in school where visitors are received.

Staff and pupils must not come into school if they have symptoms, and must be sent home to self-isolate if they develop them when at school. Anyone with Coronavirus (COVID-19) symptoms should seek a test.

Staff and pupils (with the support of teachers) must provide details of anyone they have been in close contact with if they were to test positive for Coronavirus (COVID-19) or if asked by NHS Test and Trace. The school must maintain a seating plan of all of its teaching spaces and other areas where children are asked to formally sit (for example, dining).

Anyone who has been in close contact with someone who develops Coronavirus (COVID-19) symptoms or someone who tests positive for Coronavirus (COVID-19) must self-isolate for 10 days. A close contact can be defined as follows:

- Anyone who lives in the same household as someone with Coronavirus (COVID-19) symptoms or who has tested positive for Coronavirus (COVID-19)
- Anyone who has had any of the following types of contact with someone who has tested positive for Coronavirus (COVID-19) with a PCR or LFD test:
  - Face-to-face contact including being coughed on or having a face-to-face conversation within 1 metre
  - Been within 1 metre for 1 minute or longer without face-to-face contact
  - Sexual contacts
  - Been within 2 metres of someone for more than 15 minutes (either as a one-off contact, or added up together over one day)
  - Travelled in the same vehicle or a plane

The Trust will provide advice on who must be sent home. Schools should keep a record of pupils and staff in each group, and any close contact that takes places between pupils and staff in different groups. This should be a proportionate recording process. You do not need to ask pupils to record everyone they have spent time with each day or ask staff to keep definitive records in a way that is overly burdensome.

Where individuals are self-isolating and are within our definition of vulnerable, it is important that schools put systems in place to keep in contact with them, offer pastoral support, and check they are able to access education support.

A template letter will be provided to you, on the advice of the health protection team, to send to parents and staff if needed. You must not share the names or details of people with Coronavirus (COVID-19) unless essential to protect others.

Household members of those contacts who are sent home do not need to self-isolate themselves unless the pupil or staff member who is self-isolating subsequently develops symptoms, unless they have been told to self-isolate by NHS Test and Trace or their public health protection team, in which case they must self-isolate. If someone in a class or group that has been asked to self-isolate develops symptoms themselves within the 10 days from the day after contact with the individual who tested positive, they should follow guidance for

households with possible or confirmed Coronavirus (COVID-19) infection. They should get a PCR test, and:

- If the test delivers a negative result, they must remain in isolation for the remainder of the 10-day isolation period. This is because they could still develop Coronavirus (COVID-19) within the remaining days.
- If the test result is positive, they should inform their school immediately, and should isolate from the day of onset of their symptoms and at least the following 10 full days. Their household should self-isolate starting from when the symptomatic person in their household first had symptoms and the next 10 full days, following [guidance for households with possible or confirmed Coronavirus \(COVID-19\) infection](#)

You should not request evidence of negative test results or other medical evidence before admitting children or welcoming them back after a period of self-isolation.

## **12. Contain any outbreak by following PHE local health protection team advice**

If you have 2 or more confirmed cases within 14 days, or an overall rise in sickness absence where Coronavirus (COVID-19) is suspected, you may have an outbreak. The Trust will advise you of the next steps.

### **12.1 Admitting children and staff back to the school**

The pupil or staff member who tested positive for Coronavirus (COVID-19) can return to their normal routine and stop self-isolating after they have finished their isolation period and their symptoms have gone or if they continue to have only a residual cough or anosmia. This is because a cough or anosmia can last for several weeks once the infection has gone. If they still have a high temperature after 10 days or are otherwise unwell, you should advise them to stay at home and seek medical advice.

You should not request evidence of negative test results or other medical evidence before admitting pupils or welcoming them back after a period of self-isolation.



In the vast majority of cases, parents and carers will be in agreement that a pupil with symptoms should not attend the school, given the potential risk to others.

### **Coronavirus (COVID-19) asymptomatic testing in schools**

Rapid testing using Lateral Flow Devices (LFD)s will support the return to face-to-face education by helping to identify people who are infectious but do not have any coronavirus (COVID-19) symptoms. For secondary school staff and pupils, we are moving to a home testing model (for pupils, following the first 3 onsite tests). The lateral flow devices used have received regulatory approval from the MHRA for self-use. Home test kits will be available for all staff.

Testing remains voluntary but strongly encouraged.

### **Secondary school testing on-site through an Asymptomatic Testing Site (ATS)**

Secondary schools were asked to offer pupils testing at an on-site ATS from 8 March.

Schools should retain a small on-site ATS on-site so they can offer testing to pupils who are unable or unwilling to test themselves at home.

### **Home testing**

Both pupils and staff in secondary schools will be supplied with LFD test kits to self swab and test themselves twice a week at home. Staff and pupils must report their result to NHS Test and Trace as soon as the test is completed either online or by telephone as per the instructions in the home test kit. Staff and pupils should also share a positive result with their school to help with contact tracing. Schools are requested to share their positive test results with Becky Speirs each Monday for the tests taken during the previous week.

Pupils aged 18 and over should self-test and report the result, with assistance if needed. Adolescents aged 12 to 17 should self-test and report with adult supervision. The adult may conduct the test if necessary. Children aged 11 attending a secondary school should be tested by an adult.

## **Confirmatory PCR tests**

Staff or pupils with a positive LFD test result must self-isolate in line with the stay-at-home guidance. They will also need to arrange a lab-based polymerase chain reaction (PCR) test to confirm the result. If the PCR test is taken within 2 days of the positive lateral flow test, and is negative, it overrides the LFD test and the pupil can return to school. Those with a negative LFD test result can also continue to attend school and use protective measures.

## **LFD testing – primary schools**

Staff in primary schools will continue to test with LFDs twice a week at home, as per existing guidance on [testing for staff in primary schools and nurseries](#). There is currently no requirement to test primary aged pupils.

## **LFD – specialist settings**

Specialist settings will have additional considerations to take into account when delivering asymptomatic testing. Self-swabbing may cause significant concerns for some children and young people with SEND. Testing is voluntary and no child or young person will be tested unless informed consent has been given by the appropriate person.

## **Symptomatic testing**

The asymptomatic testing programme does not replace the current testing policy for those with symptoms. Anyone with symptoms (even if they recently had a negative LFD test result), should still self-isolate immediately according to government guidelines.

Those with symptoms are also expected to order a test online or visit a test site to take a lab-based polymerase chain reaction (PCR) test to check if they have the virus.

It remains imperative that the system of controls continues to be rigorously applied to enable the safest possible environment. The testing programme is an important addition to supporting leaders to maintain the continuity of education through the pandemic.

## Self-isolation and shielding

A small number of pupils will still be unable to attend in line with public health advice to self-isolate because they:

- Have symptoms or have had a positive test result
- Live with someone who has symptoms or has tested positive and are a household contact
- Are a close contact of someone who has Coronavirus (COVID-19)

Shielding advice has been paused nationally from 31 March. All CEV pupils should attend their school unless they are one of the very small number of pupils under paediatric or other specialist care and have been advised by their GP or clinician not to attend. Pupils who live with someone who is CEV should continue to attend school as normal.

As normal, you should not encourage parents to request unnecessary medical evidence such as doctors' notes from their GP when their child is absent from school due to illness. This is already set out in the school attendance guidance but is especially important in the context of the pandemic and the Coronavirus (COVID-19) vaccination programme. If evidence is required, it can take the form of prescriptions, appointment cards, text or email confirmation of appointments, rather than a doctors' note. As usual, input from GPs should only be sought where there are complex health needs or persistent absence issues.

You are required to provide remote education to pupils who are unable to attend school because they are complying with government guidance or legislation around Coronavirus (COVID-19), in the circumstances provided for in the [Remote Education Temporary Continuity Direction](#). Schools should keep a record of this activity but do not need to record it in the attendance register.

You should offer pastoral support to pupils who are:

- self-isolating
- shielding
- vulnerable

Where pupils are not able to attend school, as they are following clinical or public health advice related to Coronavirus (COVID-19), the absence will not be penalised.

### **Vulnerable children**

Where pupils who are self-isolating are within the government's [definition of vulnerable](#), it is important that you put systems in place to keep in contact with them.

When a vulnerable pupil is required to self-isolate, you should:

- Notify their social worker (if they have one)
- Agree with the social worker the best way to maintain contact and offer support

Schools should have procedures in place to:

- Check if a vulnerable pupil is able to access remote education support
- Support them to access it (as far as possible)
- Regularly check if they are accessing remote education

### **School workforce**

Shielding advice has been paused nationally from 31 March. Clinically Extremely Vulnerable (CEV) individuals are no longer advised to shield but must continue to follow the rules in place for everyone under the current national restrictions. Staff in schools who are CEV will be advised to continue to work from home where possible, but if they cannot work from home should attend their workplace.

CEV individuals (over 18) have been prioritised for vaccination in phase 1 before the general population and in line with the priority ordering set by the Joint Committee on Vaccination and Immunisation.

All employees have a right to have a risk assessment carried out and therefore should you wish to access this support or have a review of a previous risk assessment please contact your Headteacher and arrangements will be made.

To find out more information on what services Health Assured can provide, please visit [www.healthassuredeap.com](http://www.healthassuredeap.com) or contact 0800 028 0199.

### **Other support**

Volunteers may be used to support the work of the school, as would usually be the case. It is important that they are properly supported and given appropriate roles.

Where you are using volunteers, continue to follow the checking and risk assessment process in the volunteer section of [keeping children safe in education](#). Under no circumstances should a volunteer who has not been checked (including a current DBS) be left unsupervised or allowed to work in regulated activity.

Mixing of volunteers across groups should be kept to a minimum, and they should adhere to the system of controls in place.

### **Interviews**

Face-to-face interviews can take place where online interviews are not appropriate to assess the candidate for the role. When carrying out face-to-face interviews, this guidance document and the associated risk assessments must be followed in full. Requirements will include the interview taking place in a well-ventilated room where social distancing is strictly maintained, face coverings are worn (unless medically exempt), health questions relating to Coronavirus (COVID-19) are asked and tables and chairs are thoroughly cleaned in between use by different candidates etc.

### **Visitors**

Under current national restrictions, visitors in school must be kept to those who are essential to the ongoing operation of the school. Where any visits can reasonably be postponed, they must be, until restrictions are eased and the criteria for ongoing operation are established. This principle is also applicable to training. Servicing, testing and statutory maintenance must still proceed but is to be subject to prior risk assessment via GS Musson Associates.

Parents and carers must not be allowed into school for the purpose of settling children during the period of national restrictions.

Parents and carers must not attend any organised performances in school during the period of national restrictions.

### **Open days**

Open days can proceed for prospective pupils and their parents, provided that they take place on a Friday afternoon after school, face coverings are worn (unless medically exempt), social distancing is maintained, good hand hygiene is observed and records of the visit are kept. Each group touring school should be limited to a maximum number of 6 people.

### **Dedicated school transport, including statutory provision**

Pupils on dedicated school services do not mix with the general public on those journeys. This helps limit the number of other people with whom they come into contact.

Local authorities are not required to uniformly apply the social distancing guidelines which are in place for public transport on dedicated school transport. However, social distancing should be put in place within vehicles wherever possible.

Dedicated school services can take different forms and may include:

- Coaches regularly picking up the same pupils each day
- Minibuses
- Services which are used by different pupils on different days
- Services for pupils with SEND

The precise approach taken will need to reflect the range of measures that are reasonable in the different circumstances.

Do speak to the local authority or transport provider so that you understand the approach they are adopting. You should request a copy of their updated risk assessment. It is important, wherever it is possible, that:

- Social distancing is maximised within vehicles
- Pupils either sit with their 'bubble' on school transport, or with the same constant group of children each day
- Pupils clean their hands before boarding transport and again on disembarking
- Additional cleaning of vehicles is put in place
- Organised queuing and boarding is put in place
- Fresh air (from outside the vehicle) through ventilation, is maximised, particularly through opening windows and ceiling vents

Pupils should not board home to school transport if they, or a member of their household, has had a positive test result or has symptoms of Coronavirus (COVID-19).

As described in the system of controls and in accordance with advice from PHE, children and young people aged 11 and over must wear a face covering when travelling on dedicated transport to secondary school. A [face covering](#) is a covering of any type which covers your nose and mouth. This does not apply to people who are [exempt from wearing a face covering](#) on public transport.

Do support local authorities in promoting the use of face coverings on school transport and help them to resolve any issues of non-compliance where appropriate.

Further guidance on face coverings [and transport to school and other places of education](#) is available.

### **School meals**

Kitchens should be fully open and normal legal requirements will apply to the provision of food for pupils, including ensuring food meets the [standards for school food in England](#).

This includes for those eligible for:

- Benefits-related free school meals
- Universal infant free school meals

School kitchens should follow the [guidance for food businesses on Coronavirus \(COVID-19\)](#).

You should also continue to provide free school meal support to pupils who are eligible for benefits-related free school meals and who are learning at home during term time.

More information on [providing school meals during the coronavirus \(COVID-19\) outbreak](#) is available.

### **Ventilation systems**

Where mechanical ventilation systems exist, you should ensure they are maintained in accordance with the manufacturers recommendations. Good ventilation with fresh air is essential at all times in classrooms and particularly during this period.

Refer to the system of controls for guidance on keeping occupied spaces well ventilated.

### **Opening after reduced occupancy**

It is important that you undertake all the usual building checks to make the school safe. If buildings have been closed or had reduced occupancy, water system stagnation can occur due to lack of use. This can increase the [risk of Legionnaires' disease](#).

Advice on safely reoccupying buildings can be found in the Chartered Institute of Building Services Engineers' guidance on [emerging from lockdown](#).

### **Educational visits and off-site activities**

Educational day visits off-site can proceed subject to prior risk assessment being approved via GS Musson Associates. Domestic residential educational visits cannot be considered before 17<sup>th</sup> May and will be subject to updated government/DfE guidance at that time.

### **Wraparound provision and extra-curricular activity**

You may resume all your before and after-school educational activities and wraparound childcare on site for your pupils, where this provision is necessary to support parents to



work, attend education and access medical care, and is as part of pupil's wider education and training. Vulnerable children can attend these settings regardless of circumstance.

In line with the government [roadmap](#), from 12 April all parents may access wraparound and extra-curricular provision, without any restrictions on the reasons for which they may attend.

You should continue to work closely with any external wraparound providers which your pupils may use to minimise mixing between children. This can be achieved by taking steps such as trying to keep children in the same school day bubble or school together, or in consistent groups.

If the provision is taking place indoors and it is not possible to group children in the same bubble as they are in during the school day, providers should try to keep them in consistent groups of no more than 15 children and at least one staff member.

Activities taking place outdoors can happen in groups of any number. This is because the transmission risk is lower outside.

The guidance for [providers who run community activities, holiday clubs, after-school clubs, tuition and other out-of-school provision for children](#) may help you to plan extra-curricular provision.

Where parents are using external childcare providers or out of school extra-curricular activities for their children, you should also:

- advise them to limit their use of multiple out-of-school settings providers, and to only use one out-of-school setting in addition to school as far as possible.
- encourage them to check providers have put in place their own protective measures
- send them the link to the [guidance for parents and carers](#)

If you hire out your premises for use by external wraparound childcare providers, such as after-school or holiday clubs, make sure these organisations have:

- considered the relevant government guidance for their sector
- put in place protective measures

### **Music, dance and drama in school**

Schools should continue teaching music, dance and drama as part of your school curriculum, especially as this builds pupils' confidence and supports their wellbeing.

Singing, wind and brass instrument playing can be undertaken in line with this and other guidance, including guidance provided by the DCMS for professionals and non-professionals, available at [working safely during coronavirus \(COVID-19\): performing arts](#).

Schools can continue to engage peripatetic teachers during this period, including staff from music education hubs. Further information on the music education hubs, including contact details for local hubs, is available at [music education hubs](#) published by the Arts Council England.

Schools that offer specialist, elite provision in music, dance and drama should also consider this guidance alongside the DCMS guidance on the performing arts. Specialist provision delivered by further education (FE) providers or higher education (HE) providers should consider the respective DfE guidance for these sectors.

Please follow the associated risk assessments.

### **Minimising contact between individuals**

The overarching objective should be to reduce the number of contacts amongst pupils, and between pupils and staff, including for rehearsal and performance. As set out in the system of controls, this can be achieved through keeping groups separate (in bubbles) and through maintaining social distance between individuals. These are not alternative options. Both measures will help, but the balance between them will change depending on the age of pupils, the layout of the building, and the feasibility of keeping groups separate from each other while offering a broad curriculum.

If staff need to move between classes and year groups, they should try and keep their distance from pupils and other staff as much as they can, ideally 2 metres from other adults.

Schools should take particular care in music, dance and drama lessons to observe social distancing where possible. This may limit group activity in these subjects in terms of numbers in each group. It will also prevent physical correction by teachers and contact between pupils in dance and drama.

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

## **Performances**

Schools should not host any performances with an audience. You may wish to consider alternatives such as live streaming and recording performances, subject to the usual safeguarding considerations and parental permission.

## **Singing, and playing wind and brass instruments in groups**

Singing, wind and brass playing should not take place in larger groups such as choirs and ensembles, or assemblies unless significant space, natural airflow and strict social distancing and mitigation can be maintained.

When planning music provision, you should consider additional specific safety measures. There is some evidence that additional risk can build from aerosol transmission with volume and with the combined numbers of individuals within a confined space. This is particularly evident for singing and shouting, but with appropriate safety mitigation and consideration, singing, wind and brass teaching can still take place. Measures to take follow in the next sections. Further government advice is available on [safer singing](#).

## **Playing outdoors**

Playing instruments and singing in groups should take place outdoors wherever possible. If indoors, consider limiting the numbers in relation to the space.

## **Playing indoors**

If indoors, use a room with as much space as possible, for example, larger rooms; rooms with high ceilings are expected to enable dilution of aerosol transmission. If playing indoors, limit the numbers to account for ventilation of the space and the ability to social distance. It is important to ensure good ventilation. Advice on this can be found in Health and Safety Executive guidance on [air conditioning and ventilation during the coronavirus outbreak](#).

## **Social distancing**

In the smaller groups where these activities can take place, schools should observe strict social distancing between each singer and player, and between singers and players, and any other people such as conductors, other musicians, or accompanists. Current guidance is that if the activity is face-to-face and without mitigating actions, 2 metres is appropriate. Pupils should use seating where practical to help maintain social distancing.

## **Seating positions**

Pupils should be positioned back-to-back or side-to-side when playing or singing (rather than face-to-face) whenever possible. Position wind and brass players so that the air from their instrument does not blow into another player.

## **Microphones**

Use microphones where possible or encourage singing quietly.

## **Handling equipment and instruments**

Measures to take when handling equipment, including instruments, include the following.

## **Handwashing**

Require increased handwashing before and after handling equipment, especially if being used by more than one person.

## **Avoiding sharing instruments and equipment**

Avoid sharing equipment wherever possible. Place name labels on equipment to help identify the designated user, for example, percussionists' own sticks and mallets.

If instruments and equipment have to be shared, disinfect regularly (including any packing cases, handles, props, chairs, microphones and music stands) and always between users, following government [guidance on cleaning and handling equipment](#).

Instruments should be cleaned by the pupils playing them, where possible.

## **Handling scores, parts and scripts**

Limit handling of music scores, parts and scripts to the individual using them.

## **Individual lessons**

Individual lessons in music, dance and drama can continue in schools and organisations providing out of school childcare. This may mean teachers interacting with pupils from multiple groups, so you will need to take particular care, in line with the measures on peripatetic teachers.

In individual lessons for music, dance and drama, social distancing should be maintained wherever possible, meaning teachers should not provide physical correction.

## **Physical activity in schools**

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

Pupils should be kept in consistent groups, sports equipment thoroughly cleaned between each use by different individual groups.

Schools can hold PE lessons indoors, including those that involve activities related to team sports, for example practising specific techniques, within your own system of controls.

For sport provision, outdoor sports should be prioritised where possible, and large indoor spaces used where it is not, maximising natural ventilation flows (through opening windows and doors or using air conditioning systems wherever possible), distancing between pupils, and paying scrupulous attention to cleaning and hygiene. This is particularly important in a sport setting because of the way in which people breathe during exercise. External facilities can also be used in line with government guidance for the use of, and travel to and from, those facilities.

Where schools are considering team sports you should only consider those sports whose national governing bodies have developed guidance under the principles of the government's guidance on team sport and been approved by the government i.e. sports on the list available at grassroots sports [guidance for safe provision including team sport, contact combat sport and organised sport events](#).

From 29 March, outdoor competition between different schools can take place.

From 12 April, indoor competition between different schools can take place.

Refer to:

- Guidance on [grassroot sports for public and sport providers](#), [safe provision](#) and [facilities](#), and guidance from [Sport England](#)
- Advice from organisations such as the [Association for Physical Education](#) and the [Youth Sport Trust](#)
- Guidance from Swim England on school swimming and water safety lessons available at [returning to pools guidance](#) documents
- [Using changing rooms safely](#)

Schools can work with external coaches, clubs and organisations for curricular and extra-curricular activities. Schools must be satisfied that it is safe to do.

Activities such as active miles, making break times and lessons active and encouraging active travel can help pupils to be physically active while encouraging physical distancing.

**For any queries or clarification, please contact:**

Ian Carnwell – Director of Operations

[REDACTED]

[REDACTED]

## **Appendix 1: Confirmed Case of Coronavirus (COVID-19) Actions**

Please collate the following information:

- Name of school, its pupils age range and approx. number on role.
- Postcode of school.
- Name of person with positive test result (not always requested by DfE / PHE).
- Their DOB (not always requested by DfE / PHE).
- What were the symptoms?
- When did the symptoms start (specifically temperature, cough, change in sense of taste and smell)?
- Date test was taken?
- Date of test result?
- Was the positive case part of a bubble where there has been a previous positive case within the last 14 days?
- Was the person in school during the 48 hours prior to symptoms starting (specifically temperature, cough, change in sense of taste and smell)?
- If yes, did they have any close contacts? A close contact is considered as:
  - Anyone who lives in the same household as someone with Coronavirus (COVID-19) symptoms or who has tested positive for Coronavirus (COVID-19)
  - Anyone who has had any of the following types of contact with someone who has tested positive for Coronavirus (COVID-19) with a PCR or LFD test:
    - Face-to-face contact including being coughed on or having a face-to-face conversation within 1 metre
    - Been within 1 metre for 1 minute or longer without face-to-face contact
    - Sexual contacts
    - Been within 2 metres of someone for more than 15 minutes (either as a one-off contact, or added up together over one day)
    - Travelled in the same vehicle or a plane



- Close contacts of Key Stage 2 pupils and older should be assessed by talking to the pupil, their friendship groups and staff. For Key Stage 1 and younger we are advised that close contacts cannot be assessed in this way and that all children (not adults) are to be considered as close contacts and will be asked to self-isolate.
- Where no symptoms or not recognised symptoms are present (temperature, cough, change in sense of taste and smell), was the person in school during the 48 hours prior to the test being taken?

If yes, follow close contact guidance above. In both scenarios, ensure visitors to school are also considered (check visitor records). The wearing of PPE is irrelevant to assessing close contacts.

# Daily Health Check

Please give me a thumbs up if all these statements are correct for you



I have not had a high temperature or felt unwell in the last 24 hours.



I have not had a new or regular cough in the last 24 hours.



My sense of taste and smell has been normal in the last 24 hours.



I have not been around anyone with these symptoms in the last 48 hours.



I have not been contacted by NHS Test and Trace and been told to self-isolate.

**Have a great day in school!**