



Updated Policy & Procedures for Covid-19 for September 2021 onwards

Actions	Date / details	By whom
Date originally published	5.8.2021	IS
Adopted by Governors	31.8.21	Governors
Review Date	October 2021 or earlier as required	IS

Overview

On 19th July 2021 the DfE updated the guidance to schools. As the update, the key parts are summarised and copied below, however the full document is available via this link

[Schools COVID-19 operational guidance - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/guidance/schools-covid-19-operational-guidance)

For the purposes of Castle House School we will continue to undertake the following procedures until such time as the guidance changes. Our risk assessment below is summarised below and is based on the guidance published on 19th July 2019.

Area	Risk	To whom	Control Measure
People	Transmission of disease - Catching COVID-19 from others	Pupils	Monitor pupil wellbeing & health
		Staff	Monitor staff wellbeing & health. Twice weekly Covid Tests
		Parents / visitors	Sign in procedures. Check no symptoms. Explain current face covering policy
Surfaces	Transmission of disease - Touch points	All users	Continue with daily deep clean & AM/PM cleaning of touch points
Particles	Transmission of disease - Airborne particles	All users	Ensure appropriate ventilation – see detail in government guidance
Visits	Transmission of disease through contact	Staff / pupils	Follow trip procedures as usual, but include additional detail regarding Covid-19 control

COVID – WHAT TO DO IF . . .

Our Summary of actions is as follows;

1. If your child is well, they come to school.
2. If your child is unwell and none of the symptoms can be attributed to Covid-19 then they must not attend in line with our usual absence policy (ie if they have been sick then they need to stay at home for 48 hours). The register will be marked with an illness code.
3. If you have been in direct contact within 2 days of someone testing positive for Covid-19, but your child has not been in direct contact then you will be contacted by track and trace and instructed to take a PCR test. Depending on the outcome of this test you may be required to isolate and you will be advised what to do about your child.
4. If your child has been in direct contact within 2 days of someone testing positive for Covid-19 they will have to isolate for 10 days from the day of contact then you and your child will be instructed to take a PCR test. Depending on the outcome of this test you may be required to isolate and you will be advised what to do about your child.

5. If your child has any of the symptoms of Covid-19 they must not attend school but must take a test. If the test is negative and the symptoms stop then your child should be allowed back into school on the day after all symptoms cease and in line with the guidance published below. Parents must discuss this with the Headteacher or Nursery Manager before a child returns. The period of absence is recorded against a Covid-19 code depending on the outcome. If the test is positive then you will be given specific advice by the NHS at that point.

Key aspects copied from DfE guidance published 19th July 2021

Summary

This guidance explains the actions school leaders should take to reduce the risk of transmission of coronavirus (COVID-19) in their school. This includes public health advice, endorsed by Public Health England (PHE). We expect independent schools to follow the control measures set out in this guidance in the same way as state-funded schools, and health and safety legislation applies equally to independent schools. Where this guidance refers to schools, that does not include maintained nursery schools or pre-reception classes. We use the terms 'must' and 'should' throughout the guidance. We use the term 'must' when the person in question is legally required to do something and 'should' when the advice set out should be followed unless there is a good reason not to.

Overview

As the country moves to Step 4 of the roadmap, the government continues to manage the risk of serious illness from the spread of the virus. This marks a new phase in the government's response to the pandemic, moving away from stringent restrictions on everyone's day-to-day lives, towards advising people on how to protect themselves and others, alongside targeted interventions to reduce risk. As COVID-19 becomes a virus that we learn to live with, there is now an imperative to reduce the disruption to children and young people's education - particularly given that the direct clinical risks to children are extremely low, and every adult has been offered a first vaccine and the opportunity for 2 doses by mid-September. Our priority is for you to deliver face-to-face, high-quality education to all pupils. The evidence is clear that being out of education causes significant harm to educational attainment, life chances, mental and physical health.

Changes to the previous version

Changes to the guidance since its first publication include:

- *updating the language to reflect the fact that Step 4 has now commenced (including removing the section on 'contact tracing until Step 4')*

Risk assessment

You must comply with health and safety law and put in place proportionate control measures. You must regularly review and update your risk assessments - treating them as 'living documents', as the circumstances in your school and the public health advice changes. This includes having active arrangements in place to monitor whether the controls are effective and working as planned. For more information on what is required of school leaders in relation to health and safety risk assessments and managing risk, see the [health and safety advice for schools](#).

Mixing and 'bubbles'

We no longer recommend that it is necessary to keep children in consistent groups ('bubbles'). This means that bubbles will not need to be used for any summer provision (for example, summer schools) or in schools from the autumn term. If your school is still open in the week commencing 19 July, you may wish to continue with these measures until the end of your summer term. As well as enabling flexibility in curriculum delivery, this means that assemblies can resume, and you no longer need to make alternative arrangements to avoid mixing at lunch. You should make sure your outbreak management plans cover the possibility that in some local areas it may become necessary to reintroduce 'bubbles' for a temporary period, to reduce mixing between groups.

Tracing close contacts and isolation

Settings only needed to do contact tracing up to and including 18 July. Close contacts will now be identified via NHS Test and Trace and education settings will no longer be expected to undertake contact tracing. As with positive cases in any other setting, NHS Test and Trace will work with the positive case to identify close contacts. Contacts from a school setting will only be traced by NHS Test and Trace where the positive case specifically identifies the individual as being a close contact. This is likely to be a small number of individuals who would be most at risk of contracting COVID-19 due to the nature of the close contact. You may be contacted in exceptional cases to help with identifying close contacts, as currently happens in managing other infectious diseases. From 16 August 2021, children under the age of 18 years old will no longer be required to self-isolate if they are contacted by NHS Test and Trace as a close contact of a positive COVID-19 case. Instead, children will be contacted by NHS Test and Trace, informed they have been in close contact with a positive case and advised to take a PCR test. We would encourage all individuals to take a PCR test if advised to do so. Settings will continue to have a role in working with health protection teams in the case of a local outbreak. If there is an outbreak in a setting or if central government offers the area an enhanced response package, a director of public health might advise a setting to temporarily reintroduce some control measures.

Face coverings

Face coverings are no longer advised for pupils, staff and visitors either in classrooms or in communal areas. The government has removed the requirement to wear face coverings in law but expects and recommends that they are worn in enclosed and crowded spaces where you may come into contact with people you don't normally meet. This includes public transport and dedicated transport to school or college.

In circumstances where face coverings are recommended

If you have an outbreak in your school, a director of public health might advise you that face coverings should temporarily be worn in communal areas or classrooms (by pupils staff and visitors, unless exempt). You should make sure your outbreak management plans cover this possibility. In these circumstances, 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. Transparent face coverings may be effective in reducing the spread of COVID-19. The main benefit from a transparent face covering is that they can aid communication, for example enabling lip-reading or allowing for the full visibility of facial expressions, but this should be considered alongside the comfort and breathability of a face covering that contains plastic, which may mean that the face covering is less breathable than layers of cloth.

Face visors or shields can be worn by those exempt from wearing a face covering but they are not an equivalent alternative in terms of source control of virus transmission. They may protect the wearer against droplet spread in specific circumstances but are unlikely to be effective in preventing the escape of smaller respiratory particles when used without an additional face covering. They should only be used after carrying out a risk assessment for the specific situation and should always be cleaned appropriately. The use of face coverings may have a particular impact on those who rely on visual signals for communication. Those who communicate with or provide support to those who do, are exempt from any recommendation to wear face coverings in education and childcare settings. No pupil or student should be denied education on the grounds of whether they are, or are not, wearing a face covering.

Stepping measures up and down

You should have outbreak management plans outlining how you would operate if there were an outbreak in your school or local area. Given the detrimental impact that restrictions on education can have on children and young people, any measures in schools should only ever be considered as a last resort, kept to the minimum number of schools or groups possible, and for the shortest amount of time possible. Central government may offer local areas of particular concern an enhanced response package to help limit increases in transmission.

If you have several confirmed cases within 14 days, you may have an outbreak.

You should call the dedicated advice service who will escalate the issue to your local health protection team where necessary and advise if any additional action is required, such as implementing elements of your outbreak management plan. You can reach them by calling the DfE helpline on 0800 046 8687 and selecting option 1 for advice on the action to take in response to a positive case.

Control measures

You should:

1. Ensure good hygiene for everyone.
2. Maintain appropriate cleaning regimes.
3. Keep occupied spaces well ventilated.
4. Follow public health advice on testing, self-isolation and managing confirmed cases of COVID-19.

1. Ensure good hygiene for everyone

Hand hygiene

Frequent and thorough hand cleaning should now be regular practice. You should continue to ensure that pupils clean their hands regularly. This can be done with soap and water or hand sanitiser.

Respiratory hygiene

The 'catch it, bin it, kill it' approach continues to be very important.

Use of personal protective equipment (PPE)

Most staff in schools will not require PPE beyond what they would normally need for their work. The guidance on the [use of PPE in education, childcare and children's social care settings](#) provides more information on the use of PPE for COVID-19.

2. Maintain appropriate cleaning regimes, using standard products such as detergents

You should put in place and maintain an appropriate cleaning schedule. This should include regular cleaning of areas and equipment (for example, twice per day), with a particular focus on frequently touched surfaces.

3. Keep occupied spaces well ventilated

When your school is in operation, it is important to ensure it is well ventilated and that a comfortable teaching environment is maintained. You should identify any poorly ventilated spaces as part of your risk assessment and take steps to improve fresh air flow in these areas, giving particular consideration when holding events where visitors such as parents are on site, for example, school plays.

Mechanical ventilation is a system that uses a fan to draw fresh air or extract air from a room. 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 this is not possible, then systems should be operated as normal as long as they are within a single room and supplemented by an outdoor air supply. Where mechanical ventilation systems exist, you should ensure that they are maintained in accordance with the manufacturers' recommendations. Opening external windows can improve natural ventilation, and in addition, opening internal doors can also assist with creating a throughput of air. If necessary, external opening doors may also be used (if they are not fire doors and where safe to do so). You should balance the need for increased ventilation while maintaining a comfortable temperature.

4. Follow public health advice on testing, self-isolation and managing confirmed cases of COVID-19

When an individual develops COVID-19 symptoms or has a positive test

Pupils, staff and other adults should follow public health advice on [when to self-isolate and what to do](#). They should not come into school if they have symptoms, have had a positive test result or other reasons requiring them to stay at home due to the risk of them passing on COVID-19 (for example, they are required to quarantine). If anyone in your school develops [COVID-19 symptoms](#), however mild, you should send them home and they should follow public health advice. If a pupil is awaiting collection, they should be left in a room on their own if possible and safe to do so. A window should be opened for fresh air ventilation if possible. Appropriate PPE should also be used if close contact is necessary. The household (including any siblings) should follow the PHE [stay at home guidance for households with possible or confirmed coronavirus \(COVID-19\) infection](#).

Asymptomatic testing

Testing remains important in reducing the risk of transmission of infection within schools. That is why, whilst some measures are relaxed, others will remain, and if necessary, in response to the latest epidemiological data, we all need to be prepared to step measures up or down in future depending on local circumstances. Staff should undertake twice weekly home tests whenever they are on site until the end of September, when this will also be reviewed. There is no need for primary age pupils (those in year 6 and below) to test over the summer period.

Confirmatory PCR tests

Staff and pupils with a positive LFD test result should self-isolate in line with the [stay at home guidance for households with possible or confirmed coronavirus \(COVID-19\) infection](#). They will also need to [get a free PCR test to check if they have COVID-19](#). Whilst awaiting the PCR result, the individual should continue to self-isolate. If the PCR test is taken within 2 days of the positive lateral flow test, and is negative, it overrides the self-test LFD test and the pupil can return to school, as long as the individual doesn't have COVID-19 symptoms.

Other considerations

All clinically extremely vulnerable (CEV) children and young people should attend their education setting unless they are one of the very small number of children and young people under paediatric or other specialist care who have been advised by their clinician or other specialist not to attend. Further information is available in the guidance on [supporting pupils at school with medical conditions](#). You should ensure that key contractors are aware of the school's control measures and ways of working.

Admitting children into school

In most cases, parents and carers will agree that a pupil with symptoms should not attend the school, given the potential risk to others. If a parent or carer insists on a pupil attending your school, you can take the decision to refuse the pupil if, in your reasonable judgement, it is necessary to protect other pupils and staff from possible infection with COVID-19. Your decision would need to be carefully considered in light of all the circumstances and current public health advice.

Attendance

School attendance is mandatory for all pupils of compulsory school age and it is a priority to ensure that as many children as possible regularly attend school. Where a child is required to self-isolate or quarantine because of COVID-19 in accordance with relevant legislation or guidance published by PHE or the DHSC they should be recorded as code X (not attending in circumstances related to coronavirus). Where they are unable to attend because they have a confirmed case of COVID-19 they should be recorded as code I (illness).

Remote education

Not all people with COVID-19 have symptoms. Where appropriate, you should support those who need to self-isolate because they have tested positive to work or learn from home if they are well enough to do so. Schools subject to the [remote education temporary continuity direction](#) are required to provide remote education to pupils covered by the direction where their attendance would be contrary to government guidance or legislation around COVID-19. You should maintain your capacity to

deliver high-quality remote education for the next academic year, including for pupils who are abroad, and facing challenges to return due to COVID-19 travel restrictions, for the period they are abroad. education.

School workforce

School leaders are best placed to determine the workforce required to meet the needs of their pupils. Clinically extremely vulnerable (CEV) people are advised, as a minimum, to follow the same guidance as everyone else. It is important that everyone adheres to this guidance, but CEV people may wish to think particularly carefully about the additional precautions they can continue to take. Further information can be found in the [guidance on protecting people who are CEV from COVID-19](#). Social distancing measures have now ended in the workplace and it is no longer necessary for the government to instruct people to work from home. Employers should be able to explain the measures they have in place to keep CEV staff safe at work. The Health and Safety Executive (HSE) has published guidance on [protecting vulnerable workers](#), including advice for employers and employees on [how to talk about reducing risks in the workplace](#).

Educational visits

You should undertake full and thorough risk assessments in relation to all educational visits and ensure that any public health advice, such as hygiene and ventilation requirements, is included as part of that risk assessment.

Wraparound provision and extra-curricular activity

More information on planning extra-curricular provision can be found in the guidance for [providers who run community activities, holiday clubs, after-school clubs, tuition and other out-of-school provision for children](#).

Responsibilities of early years providers and local authorities

Responsibilities of early years providers

Settings are responsible for the following:

- safeguarding - local agencies, services and settings should work together to actively look for signs of harm given the greater risk of harm that some children may have been exposed to through COVID-19
- supporting children's learning, development and wellbeing - continue to follow the [early years foundation stage \(EYFS\) statutory framework](#)
- supporting vulnerable children

Side effects of children taking a routine vaccination or teething

Vaccines may cause a mild fever in children. This is a common and expected reaction, and isolation is not required unless COVID-19 is suspected. Find out more from [vaccination tips for parents](#). While teething can cause some known side effects such as flushed cheeks and sore gums, NHS guidelines on [baby teething symptoms](#) state that fever is not a symptom of teething. Parents and carers should monitor side effects from a vaccination or teething, and if they are concerned about their child's health, they should seek advice from their GP or NHS 111. If COVID-19 is suspected the child should start isolating and get tested.

Staying in touch with parents or carers whose child is at home

All children should be able to attend as normal, with the exception of those children who may still have to self-isolate. We recognise that many settings have already shared resources for children who are at home and we are grateful for this.

You should consider how:

- to continue to support the learning of children who do not attend settings including how these children can maintain contact with their key person and peers through the early years setting
- parents and carers can be supported to provide a positive learning environment at home

You can also direct parents and carers to:

- [Hungry Little Minds](#) - provides simple fun, activities for kids aged 0 to 5 for parents to do at home with children to support their early learning
- [BBC Tiny Happy People](#) - activities for babies, toddlers and children
- [Words for Life](#)
- [Help children aged 2 to 4 to learn at home: coronavirus \(COVID-19\)](#)

Reporting COVID-19 cases to Ofsted

You must notify Ofsted, or the childminder agency with which you are registered, of any confirmed cases in the setting, whether a child or a staff member. You should also tell Ofsted if you have to close the setting as a result. It is a legal requirement as set out in paragraph 3.51 of the [statutory framework for the early years foundation stage](#). Report as soon as you are able to, and in any case within 14 days. See [tell Ofsted if you have a COVID-19 incident at your childcare business](#) to assure all the information required is included.