



Public Health
England

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COVID-19 Educational and Childcare Settings

Delivered by the South West Health Protection Team
Information correct on 6th Aug 2020

What we will cover today

- 1. Recap on infection prevention principles**
- 2. Scenarios to illustrate this**
- 3. Key resources**

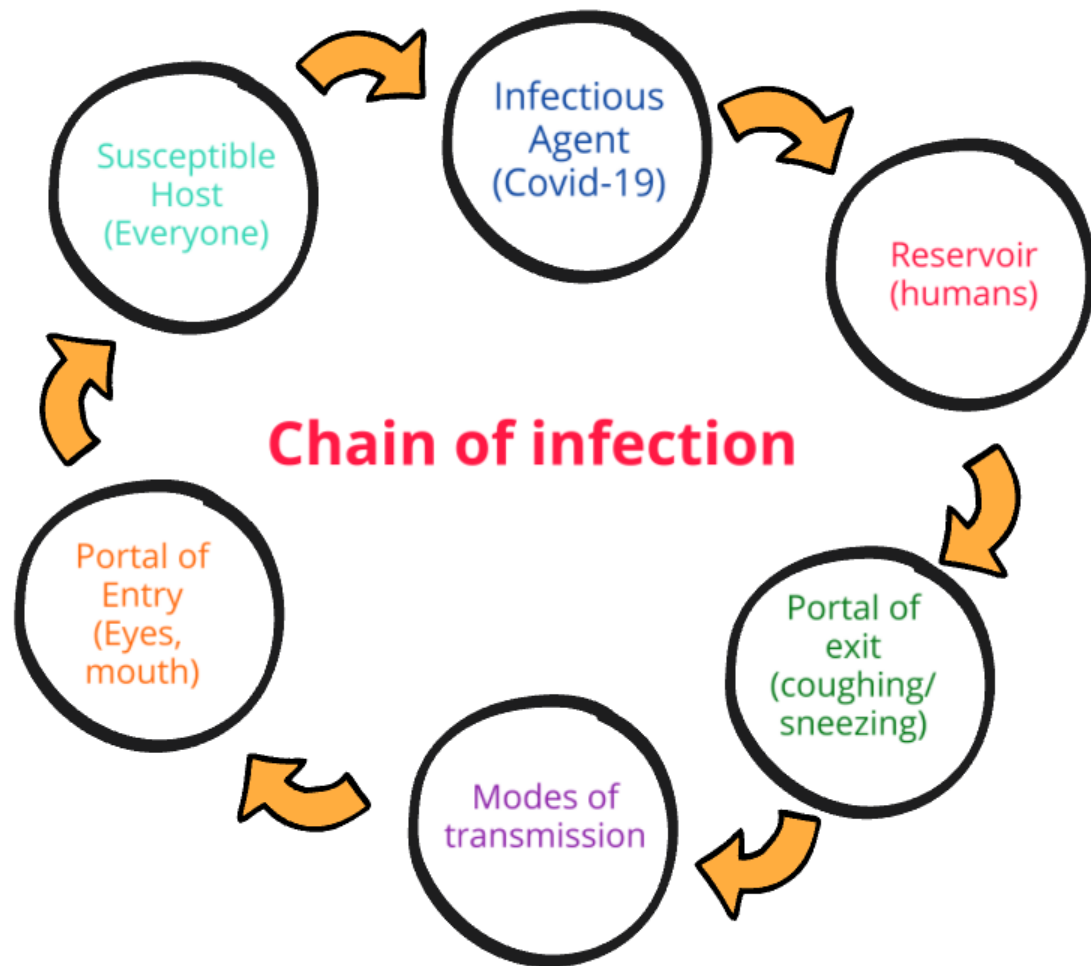
This does not replace national guidance which is updated regularly. Please check online for the most recent guidance



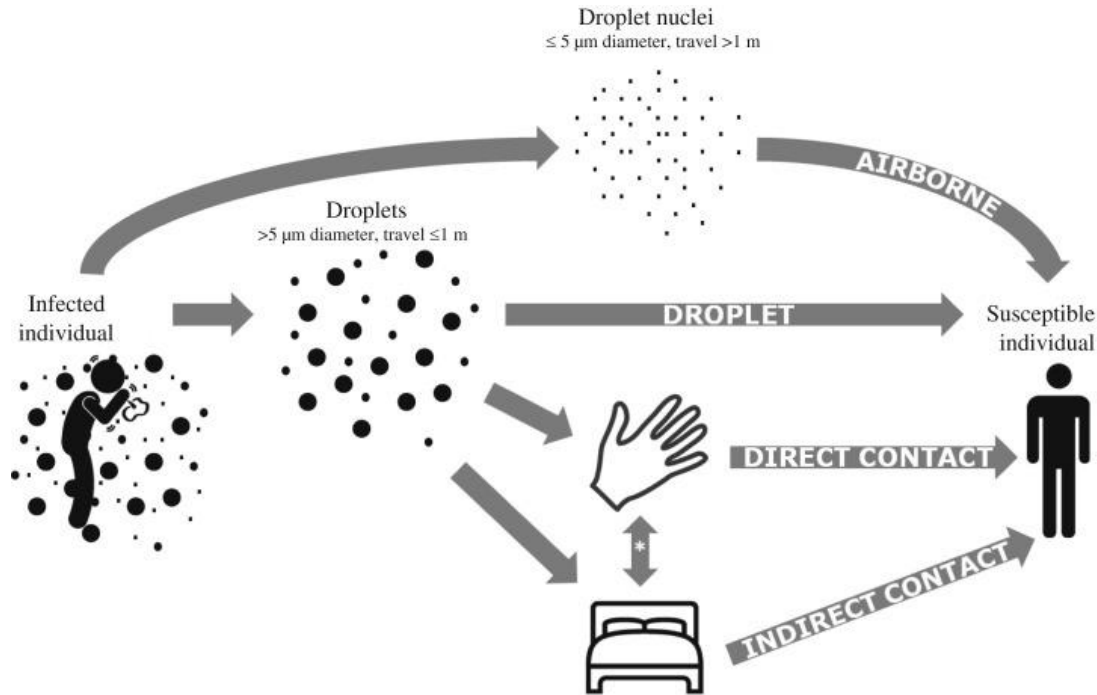
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1. Recap of infection prevention



Droplet transmission routes



* Transmission routes involving a combination of hand & surface = indirect contact.

Five key principles

1. Stay at home if ill
or a contact

2. Wash your hands!
Catch your coughs!

3. Clean! Clean! Clean!

4. Reduce mixing
and maximise
distancing

5. Engage with
Test and Trace

**All of these measures help to
prevent the spread of infection
and will therefore protect staff
and children**

Principles

People with symptoms = possible case

Isolate- do not come to setting!

Get tested- NHS portal/ 119



People with a positive test = confirmed case

Isolate the case

Contacts isolate for 14 days



**Incubation Period =
time between exposure to the virus and developing symptoms
= up to 14 days (most likely shorter)**



**Infectious period = from 48 hours prior to symptom onset (or date of swab) to
10 days after**

A few definitions!

Case (possible vs confirmed case)

COVID-19 Case Definition: (as of 18/05/20)• A high temperature• A new, continuous cough• A loss of, or change to, your sense of smell or taste

Contact

- 1. Direct close contacts:** Face to face contact with a case for any length of time within 1m eg being coughed on, a face to face conversation, unprotected physical contact (skin to skin)
This includes exposure within 1 metre for 1 minute or longer
 - 2. Proximity contacts:** Extended close contact (within 2m for more than 15 minutes) with a case
 - 3. Travelled in a small vehicle with a case**
- Household of CONTACTS do not need to isolate**

Outbreak

2 or more CONFIRMED cases in the same group or class

Cluster

2 or more confirmed cases among students or staff in the same setting within 14 days

PPE



Cleaners: gloves and aprons



Accompanying/ caring for suspected/ confirmed case: gloves, aprons, masks +/- eye protection

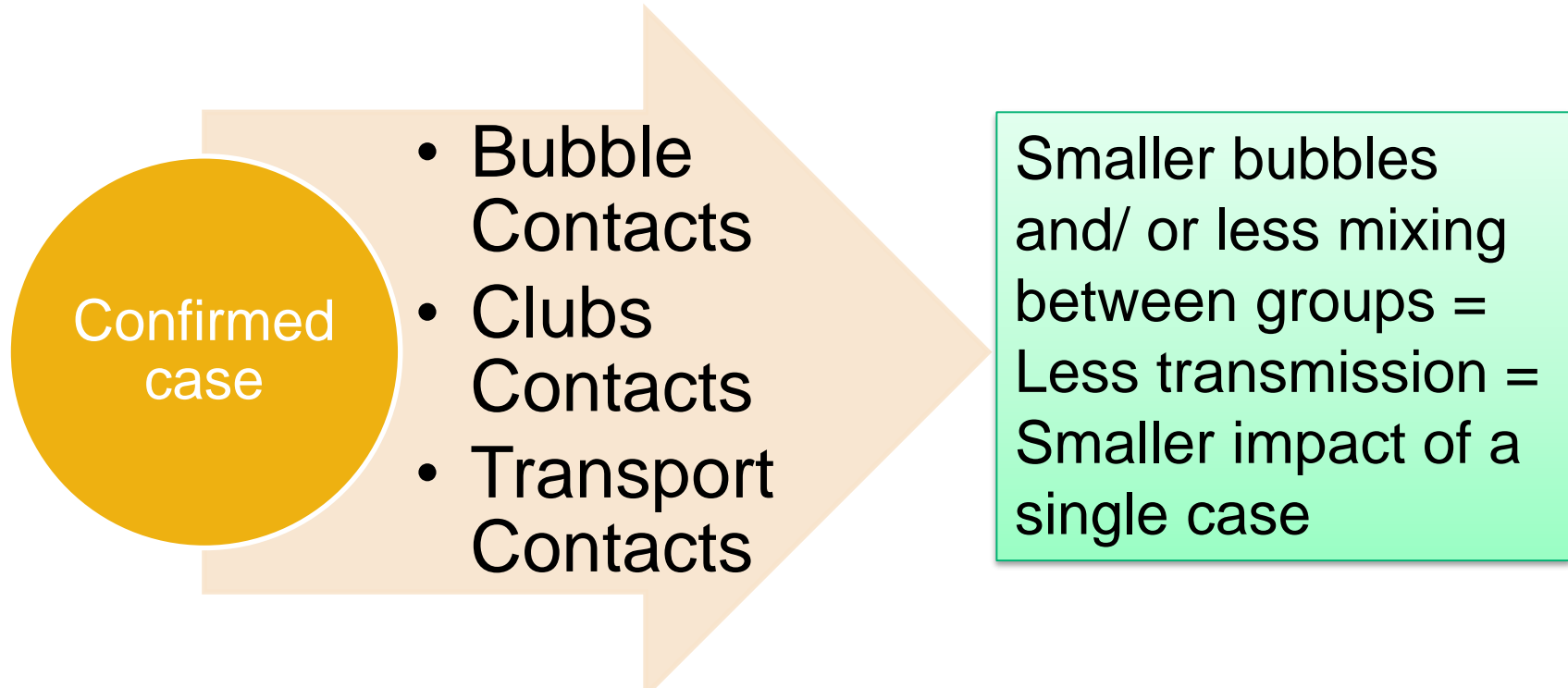


Risk assess need for eye protection: Splashes? Coughing? Vomiting? Spitting?



Safe removal of PPE and thorough handwashing after removal

THINK! What is the impact of a confirmed COVID case in my setting?



When to call the HPT

Confirmed case in staff or child

Possible cases: you do not need to call us unless....

- a. Hospital admission with covid like symptoms
- b. Possible case who won't get tested
- c. A cluster of possible cases/ increased absenteeism
- d. Possible case with definite link to confirmed case (e.g. parent confirmed)
- e. Heightened anxiety in parents/ staff or media

What if your possible case refuses to be tested???

Call the Health Protection Team

Things we will consider:

How likely is this to be COVID? Can we be sure that it is not COVID?

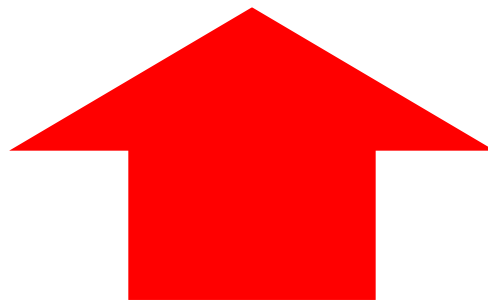
What is the safest course of action for the school?

Add flu (and winter viruses) into the mix



☹ We have not been through a combined flu/ COVID season-
unknown territory
More confusion on diagnosis

☺ All COVID infection control
measures help to reduce other
infections including flu



Scenario 1- what would you do? .../1

A child becomes unwell whilst at the setting and is displaying COVID symptoms and their parents can't collect them straight away

- **Isolate the child in a room** behind closed doors until collected by parent/guardians/carers
- Young people who can make their own way home can do so but should avoid using public transport or coming into contact with others
- **If isolation is not possible?**

They should be moved to an area at least 2 metres from other people

If adult needs to accompany to child and needs to come **within 2m of the child** they need to wear PPE- gloves, mask (FRSM), apron +/- eye protection

- **If child needs to go to the bathroom?**

This should be a separate bathroom and the bathroom should be cleaned thoroughly with standard cleaning products before being used by others

Scenario 1 cont'd...

/2

- **What happens to the other children in the bubble?**

nothing at this point

- **What happens to the teacher in the bubble?**

nothing

- **What happens to the staff member who has assisted the child?**

nothing

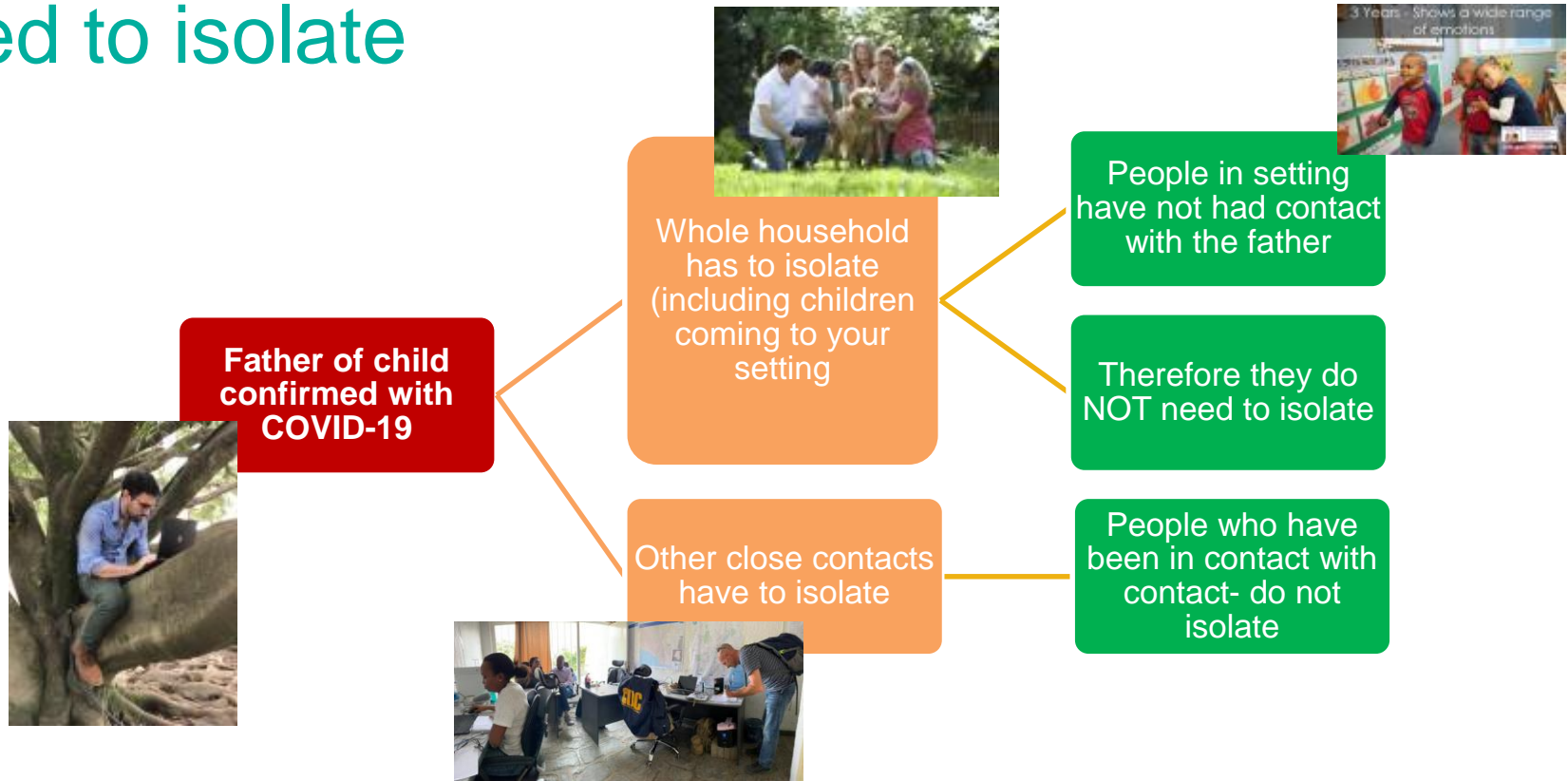
If the child's test is then positive how will they find out?

- parent will get a text message and an email
- asked to complete an email questionnaire describing contacts and activities
- when an educational setting is mentioned it will be flagged to PHE Health Protection Team who will contact the educational setting and the parent
- **What will happen if the child has a positive result?**
follow guidance for a confirmed case **CALL THE HPT ON 0300 303 8162**

Scenario 2: An immediate family member (who lives in the same household) of a child who attends my setting, has a confirmed case of COVID.

- The child and the household need to self isolate for 14 days and get tested if they develop symptoms
- No action is needed by the setting unless family member has spent time in the setting

Contacts of contacts DO NOT need to isolate



Scenario 3

A child who attends my setting has become unwell with COVID symptoms. The child travels to my setting on transport with pupils from the same setting who are all in different bubbles.

- This is a possible case
- Isolate child and advise them to get tested
- Household members need to isolate
- Call HPT if test comes back positive (confirmed)
- Bubbles do not isolate ***unless*** the case is confirmed
- Official contact tracing **will not happen** until the case tests positive

Scenario 4

A child who attends after school club has tested positive – impact for all the bubbles of the other children who attend after school provision?

Key actions:

Call the HPT on 0300 303 8162

- Identify and isolate of contacts
- Test those with symptoms
- Clean any 'contaminated' areas
- Communicate with parents/ others

Communications and media handling

The process

- Local authority comms to lead on local comms - will receive regular updates from PHE comms about cases and outbreaks in education settings.
- LA comms will always involve setting staff in signing off any reactive statements they are working on (or the comms lead if a university or part of an academy) as well as PHE comms.

Dealing with media approaches

- Settings **do not** need to speak to the media – please contact your LA comms team for support.
- If you do take a call from a journalist, avoid giving away too much detail or mentioning numbers of staff / pupils affected as this risks disclosing patient-identifiable information.
- If media persist in contacting you, either in person, via phone or email, then the best course of action is to look to the Police for support.




Academies

- If academies have their own comms teams, please make sure to link up with the LA and PHE comms team before issuing any statements.



Resources

NHS Resources and videos

-  [Handwashing for teachers](#)
-  [Handwashing for children](#)
-  [Coronavirus factsheet for kids](#)

eBug

<https://e-bug.eu/>

PHE webcasts for all professionals working in educational settings

- [Breaking the chain of infection](#)

Any questions?

Please contact the health protection team:
swhpt@phe.gov.uk

Tel: 0300 303 8162



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Extra information

Laundry

- Use the warmest water setting and dry items completely. Dirty laundry that has been in contact with an unwell person can be washed with other people's items.
- Do not shake dirty laundry, this minimises the possibility of dispersing virus through the air.
- Clean and disinfect anything used for transporting laundry with your usual products, in line with the cleaning guidance above.
- People dealing with laundry from a suspected/ confirmed case should wear gloves and aprons when handling the laundry

Waste

Waste from people with symptoms of COVID-19, waste from cleaning of areas where they have been (including disposable cloths and tissues):

- should be put in a plastic rubbish bag and tied when full
- the plastic bag should then be placed in a second bin bag and tied
- it should be put in a suitable and secure place and marked for storage for 72 hours. 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

