**Procedure for Managing Covid-19 Cases in Educational Settings in Solihull**

***Updated 03/02/2022***

Schools/settings are no longer required to inform Solihull Council Public Health of *individual* confirmed Covid-19 cases, however, cases should be recorded on a log and the following procedure must be followed in the event of cases within the school/setting:

**Pupil/staff member becomes symptomatic with Covid-19 symptoms**

**Actions for the individual**: They should not come into school/the setting and should [access a PCR test](https://www.gov.uk/get-coronavirus-test) (see [full guidance](https://www.nhs.uk/conditions/coronavirus-covid-19/self-isolation-and-treatment/when-to-self-isolate-and-what-to-do/)).

**Actions for the setting**: If anyone develops [COVID-19 symptoms](https://www.nhs.uk/conditions/coronavirus-covid-19/symptoms/) whilst at the school/setting, however mild, they need to go home avoiding using public transport, wherever possible, (with pupils collected by a member of their family or household) and [access a PCR test](https://www.gov.uk/get-coronavirus-test).***See appendix A***

**START HERE:**

**Pupil/staff member is asymptomatic & receives a positive Covid-19 test result**

**Actions for the individual***: NB: as of 11/01/22 positive lateral flow test (LFT) results do not need to be confirmed with a PCR test (see ‘Updates’ section below for more info).*

**Actions for the setting: All cases should be recorded on a Covid-19 log** - ***see appendix******B***

**or START HERE:**



**All positive symptomatic Covid-19 cases MUST then isolate**

**- Either from the date of their first symptoms if symptomatic or test date if asymptomatic.**

Anyone who tests positive will need to self-isolate regardless of their age or vaccination status.

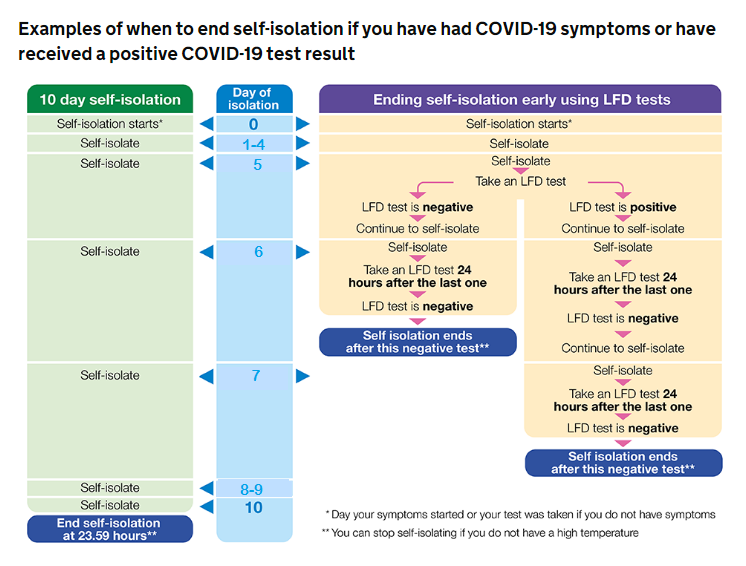


**Self-isolation:**

**Actions for the individual:**

* Self-isolation ends after 10 full days if symptoms have gone, or if the only symptoms left are a cough or loss/change in taste/smell (which can last for several weeks).
* **Individuals may be able to end self-isolation early (no earlier than day 6) if two consecutive negative LFD tests are received, and the individual does not have a high temperature.**
* **The first test must be taken no earlier than day 5 of the self-isolation period, and the second must be taken the following day**. If the individual tests negative on this second test on the 6th day, then can end self-isolation.
* If an individual is positive on day 5, then a negative test is required on day 6 and day 7 to release from isolation.
* Individuals who are still positive on their lateral flow tests must stay in isolation until they have had two consecutive negative tests taken on separate days.
* LFD tests do not need to be taken after the 10th day of self-isolation and the individual may stop self-isolating after this day. This is because they are unlikely to be infectious after the 10th day. *Regular LFD testing can resume after day 14.*
* **Even if a positive LFD test result is received on the 10th day of self-isolation, further LFD tests are not required to be taken after this day and a follow-up PCR test is not required.**
* If there’s still a high temperature after 10 days or the individual is unwell, stay at home & seek medical advice.
* If the individual is concerned, they can choose to limit close contact with other people (especially those at higher risk of severe illness) until 14 days after the start of the self-isolation period. *See infographic below.*

**Ending self-isolation:**



**Close contacts: *Close contacts in schools are now identified by NHS Test and Trace and education settings are not expected to undertake contact tracing.*** *For reference, actions below -*

**ARE NOT EXEMPT FROM ISOLATION**

**If they do not fit the exemption criteria (in the box to the left), i.e.** –

* + **Adults** over the age of 18 years and 6 months who are **unvaccinated** (have not had a second Covid-19 vaccine more than 14 days ago)
  + Not in a vaccine trial
  + Not able to have the vaccine

**They must isolate for 10 days from their last contact with the confirmed Covid-19 case   
(**day 0 being the last contact, day 1 the next day and so on).

***For isolation details, please see above section – page 1 & Appendix C*.**

**ARE EXEMPT FROM ISOLATION**

**If they are -**

* **Under the age of** **18 years and 6 months**
* An **adult** who has been **vaccinated** with their first and second Covid-19 vaccine (more than 14 days ago)
* Taking part in or have taken part in an **approved COVID-19 vaccine trial**
* Those who are **not able** to get vaccinated for medical reasons

**Although they are not required to isolate, they should:**

* Take a lateral flow test daily for 7 days
* Follow the[**guidance to reduce the risk to others**](https://www.gov.uk/guidance/nhs-test-and-trace-how-it-works?priority-taxon=774cee22-d896-44c1-a611-e3109cce8eae#exemptions-from-self-isolation-for-contacts)

**To note, close contacts:**

* **Who have had a positive COVID-19 result in the last 90 days should not have another PCR test unless they develop new symptoms.**
* **Who are aged under 5 years are -**
  + **Exempt from daily testing**
  + **Advised to take a PCR test only if the positive case is within their own household.** *They do not need**to isolate whilst awaiting this PCR result.*
* Pupils with SEND identified as close contacts should be supported by their school & families to agree the most appropriate route for testing including, where appropriate, additional support to assist swabbing. For further information please see [SEND Guidance](https://www.gov.uk/government/publications/guidance-for-full-opening-special-schools-and-other-specialist-settings?priority-taxon=b350e61d-1db9-4cc2-bb44-fab02882ac25).

**Positive cases within the setting:**

**Staff Covid-19 cases**

**Contact tracing is not undertaken by the school/setting.**

For all cases relating to **staff, please also see the guidance for workplaces:** [NHS Test and Trace in the workplace](https://www.gov.uk/guidance/nhs-test-and-trace-workplace-guidance). Employers should call the Self-Isolation Service Hub on **020 3743 6715** when they are made aware that workers who qualify for the Test and Trace Support Payment Scheme have tested positive. Further info can be found by accessing the above link.

(See close contact info **appendix D**)

**Pupil Covid-19 cases**

**Contact tracing is not undertaken by the school/setting.**

***NHS Test and Trace/local Contact Tracing Teams will directly contact parents/carers of pupil cases to identify close contacts.*** *Schools/settings may be contacted in exceptional cases to help with identifying close contacts, as currently happens in managing other infectious diseases.*

**Within the setting, have:**

* **5 children, pupils, students or staff, who are likely to have mixed closely\*, tested positive for COVID-19 within a 10-day period (2 in a special school or setting with fewer than 20 people (including children/young people and staff)?**

**OR**

* **10% of children, pupils, students or staff** who **are likely to have mixed closely\*** test positive for COVID-19 within a 10-day period

***WHICHEVER IS REACHED FIRST***

***OR***

* ***Has the confirmed Covid-19 case been hospitalised or died?***

*\*Identifying a group that is likely to have mixed closely will be different for each setting –* ***see appendix E***



No further action/escalation required by the school/setting. **Continue to keep a log of confirmed Covid-19 cases**

**– see appendix B**

**If the answer is yes to any of the above questions,**

**please contact** **Solihull Council by either:**

|  |  |  |
| --- | --- | --- |
| Time: | How? | Where to? |
| Anytime | Via email | Send case log/details to [**contacttracing@solihull.gov.uk**](mailto:contacttracing@solihull.gov.uk) |
| 8.30am – 5.00pm MONDAY to FRIDAY | Phone | **Covid-19 Response Line:**  **0121 704 6892**  ***Outbreak management actions will not need to be taken out-of-hours with decisions taken and advice given in school/office hours only*** |

**School/setting will be advised on Covid-19 outbreak management in line with infectious disease management in educational settings. This is likely to include actions as described in appendix F.**

*Links to guidance and further information in appendix G.*

**Updates** (*All updates have been incorporated within the above procedural flowchart)*

**19th January 2022:**

**An update for all education and childcare settings following the Prime Minister’s announcement of the end of Plan B**

The Prime Minister announced that all Plan B measures will be removed in England, with a full return to Plan A by Thursday 27 January.

In education and childcare settings, this means:

* From tomorrow, Thursday 20 January, face coverings are no longer recommended in classrooms and teaching spaces for staff, and pupils and students in year 7 and above. They were introduced in classrooms at the start of the spring term as a temporary measure.
* From Thursday 27 January, face coverings are no longer recommended in communal areas for staff, and pupils and students in year 7 and above.

This decision comes in response to national infection data showing the prevalence of COVID-19 to be on a downward trajectory. Whilst there are some groups where cases are likely to continue rising, it is likely that the Omicron wave has now peaked nationally. There remains significant pressure on the NHS but hospital admissions have stabilised, and the number of patients in Intensive Care Units (ICU) remain low and are falling. This means it is right we remove the most stringent restrictions around wearing face coverings from education, but the virus is still with us, and continuing with proportionate protective measures remains vital to protect education.

Local directors of public health are able to recommend the use of face coverings in communal areas, across their area only, where DfE and public health experts judge the measure to be proportionate due to specific health concerns. This is a temporary measure. Directors of public health will continue to advise individual settings experiencing outbreaks. Any local introduction of face coverings will be subject to routine review and removed at the earliest opportunity.

From Thursday 27 January, venues and events will no longer be required by law to use the NHS COVID Pass. The pass can be used on a voluntary basis as was previously the case in Plan A.

The government is no longer asking people to work from home. Staff should speak to their employers about arrangements for returning to the office, and should follow the [working safely during COVID-19 guidance](https://www.gov.uk/guidance/working-safely-during-covid-19?utm_source=19%20January%202022%20C19&utm_medium=Daily%20Email%20C19&utm_campaign=DfE%20C19).

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**17th January 2022:**

**Self-isolation for those with COVID-19 can end after five full days following two negative LFD tests**

* People self-isolating with COVID-19 will have the option to reduce their isolation period after five full days if they test negative on both day 5 and day 6 and do not have a temperature, from Monday, 17 January.
* Individuals who are still positive on their lateral flow tests must stay in isolation until they have had two consecutive negative tests taken on separate days
* This will support essential public services and keep supply chains running over the winter

From Monday, 17 January, people with COVID-19 in England can end their self-isolation after five full days, as long as they test negative on day 5 and day 6.

The decision has been made after careful consideration of modelling from the UK Health Security Agency and to support essential public services and workforces over the winter.

It is crucial that people isolating with COVID-19 wait until they have received two negative lateral flow tests on two consecutive days to reduce the chance of still being infectious.

The first test must be taken no earlier than day 5 of the self-isolation period, and the second must be taken the following day. If an individual is positive on day 5, then a negative test is required on day 6 and day 7 to release from isolation.

It is essential that two negative lateral flow tests are taken on consecutive days and reported before individuals return to their job or education, if leaving self-isolation earlier than the full 10 day period.

For instance, if an individual is positive on day 5, then a negative test is required on both day 6 and day 7 to release from self-isolation, or positive on day 6, then a negative test is required on days 7 and 8, and so on until the end of day 10.

Those who leave self-isolation on or after day 6 are strongly advised to wear face coverings and limit close contact with other people in crowded or poorly ventilated spaces, work from home if they can do so and minimise contact with anyone who is at higher risk of severe illness if infected with COVID- 19.

The default self-isolation period continues to be 10 days, and you may only leave self-isolation early if you have taken two LFDs and do not have a temperature in line with guidance.

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**11th January 2022:**

**Confirmatory PCR tests to be temporarily suspended for positive lateral flow test results**

Currently, COVID-19 prevalence is high which means the chances of a false positive from a positive LFD result are very low. Therefore from 11th January in England, people who receive positive lateral flow results for COVID-19 should report their result on gov.uk [link] and must self-isolate immediately but will not need to take a follow-up PCR test. After reporting a positive LFD test result, they will be contacted by NHS Test and Trace so that their contacts can be traced and must continue to self-isolate.

This is a temporary measure while COVID-19 rates remain high across the UK and reflects similar changes made this time last year in January 2021. Whilst levels of COVID-19 are high, the vast majority of people with positive LFD results can be confident that they have COVID-19. This approach reflects evidence on the high accuracy of LFD testing.

There are a few exceptions to this revised approach:

* People who are eligible for the £500 Test and Trace Support Payment (TTSP) will still be asked to take a confirmatory PCR if they receive a positive LFD result, to enable them to access financial support.
* People participating in research or surveillance programmes may still be asked to take a follow-up PCR test, according to the research or surveillance protocol.
* Around one million people in England who are at particular risk of becoming seriously ill from COVID-19 have been identified by the NHS as being potentially eligible for new treatments. They will be receiving a PCR test kit at home by mid-January to use if they develop symptoms or if they get a positive LFD result, as they may be eligible for new treatments if they receive a positive PCR result. This group should use these priority PCR tests when they have symptoms as it will enable prioritised laboratory handling.

See here for further information - [Confirmatory PCR tests to be temporarily suspended for positive lateral flow test results - GOV.UK](https://www.gov.uk/government/news/confirmatory-pcr-tests-to-be-temporarily-suspended-for-positive-lateral-flow-test-results)

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**4th January 2022:**

**Face coverings**

From January 4th, we also recommend that in those schools where pupils in year 7 and above are educated, face coverings should be worn in classrooms. 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. This will also be a temporary measure, to be reviewed on 26th January. Pupils in these schools must also wear a face covering when travelling on public transport and should wear it on dedicated transport to and from school. We would not ordinarily expect teachers to wear a face covering in the classroom if they are at the front of the class, to support education delivery, although settings should be sensitive to the needs of individual teachers. In primary schools, we recommend that face coverings should be worn by staff and adults (including visitors) when moving around in corridors and communal areas. Health advice continues to be that children in primary schools should not be asked to wear face coverings. Face coverings do not need to be worn when outdoors. See [Schools COVID-19 operational guidance January 2022](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1044890/Schools_guidance_January_2022_.pdf) for further information.

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**22nd December 2021:**

**Self-isolation for COVID-19 cases reduced from 10 to 7 days following negative LFD tests**

People who receive negative LFD results on day 6 and day 7 of their self-isolation period – with tests taken 24 hours apart – will no longer have to self-isolate for the full 10 days. The first test must be taken no earlier than day 6 of the self-isolation period.

Those who leave self-isolation on or after day 7 are strongly advised to limit close contact with other people in crowded or poorly ventilated spaces, work from home and minimise contact with anyone who is at higher risk of severe illness if infected with COVID- 19.

There is no change to the guidance for unvaccinated contacts of positive COVID-19 cases, who are still required to self-isolate for 10 full days after their date of exposure to the virus.

To further reduce the chance of passing COVID-19 on to others, if you end your self-isolation period before 10 full days you are strongly advised:

* to limit close contact with other people outside your household, especially in crowded, enclosed or poorly ventilated spaces
* to work from home if you are able to
* in addition to venues where it is a legal requirement, to wear a face covering in crowded, enclosed or poorly ventilated spaces and where you are in close contact with other people
* to limit contact with anyone who is at higher risk of severe illness if infected with COVID-19
* to follow the guidance on how to stay safe and help prevent the spread

See here for further information - [Self-isolation for COVID-19 cases reduced from 10 to 7 days following negative LFD tests - GOV.UK](https://www.gov.uk/government/news/self-isolation-for-covid-19-cases-reduced-from-10-to-7-days-following-negative-lfd-tests)

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**14th December 2021:**

**Daily testing for contacts of COVID-19**

From Tuesday 14 December, a new national approach to daily testing for contacts of COVID-19 is being introduced. All adults who are fully vaccinated and children aged 5 to 18 years and 6 months, identified as a contact of someone with COVID-19 – whether Omicron or not – should take a lateral flow device (LFD) test every day for 7 days instead of self-isolating. Daily testing by close contacts will help to slow the spread of COVID-19.

Daily testing for contacts of COVID-19 will help protect education settings by reducing transmission and will also help keep pupils in face-to-face education.

Once notified by NHS Test and Trace as a close contact, all eligible staff, pupils and students should take an LFD each day for 7 days and report the results through the Online Reporting System and to their setting. If they test negative, they can continue to attend their education setting. Outside of the education setting, they should continue to follow the advice set out in the Sunday 12 December press release. This approach should also be adopted over the winter break and on return in January.

If they test positive, they should self-isolate and order a PCR test to confirm the result. If the PCR is positive, they must self-isolate for 10 days. If the PCR test is negative, they no longer need to self-isolate but should continue to carry out the remainder of the daily tests, and only need to isolate if it is positive.

All staff and secondary aged pupils and students should have access to a box of 7 LFD tests from their education setting. If your setting requires additional test kits sooner than they would be available through the standard ordering process, or will run out of test kits imminently, you can contact 119 to request an emergency replenishment. For primary aged children LFD test kits are available through the usual routes (community test sites, local pharmacies or online).

Children under five years old do not need to take part in daily testing for contacts of COVID-19 and do not need to isolate.

Anyone over the age of 18 years and 6 months who is not vaccinated, must isolate in line with government guidelines if they are a close contact of a positive case.

For students with SEND who struggle to or are unable to self-swab daily for 7 days, settings should work with students and their families to agree an appropriate testing route, such as assisted swabbing. Information on further support measures will be provided.

Finally, it is important to continue regular twice weekly, at-home testing for all education and childcare workforce and all students of secondary age and above.

See here for further information - [Daily rapid testing for COVID-19 contacts launches this week - GOV.UK](https://www.gov.uk/government/news/daily-rapid-testing-for-covid-19-contacts-launches-this-week)

**Important Considerations**

1. **School/Setting Contingency/Outbreak Management Plan**

All education and childcare settings should have contingency plans (sometimes called outbreak management plans) describing what they would do if children, pupils, students or staff test positive for Covid-19, or how they would operate if they were advised to reintroduce any measures to help break chains of transmission.

COVID-19 resilience and planning is now more important than ever. Settings do not need to reformat their existing contingency plans to specific templates, but the plans should be kept robust and up to date in light of the advice set out here.

A good plan should cover:

* roles and responsibilities
* when and how to seek public health advice
* details on the types of control measures you might be asked to put in place (described in measures that settings should plan for and your sector’s guidance)

For each control measure you should include:

* actions you would take to put it in place quickly.
* how you would ensure every child, pupil or student receives the quantity and quality of education and support to which they are normally entitled.
* how you would communicate changes to children, pupils, students, parents, carers and staff.

Settings should make sure their contingency plans cover the possibility they are advised to limit:

* residential educational visits
* open days
* transition or taster days
* parental attendance in settings
* live performances in settings

Local authorities, Directors of Public Health and/or Health Protection Teams may recommend these precautions in individual settings or across an entire area.

A **template Contingency (Outbreak Management) Plan** which is partially completed can be found here for your school/setting to adapt if this is useful.

1. **Clinically Extremely Vulnerable (CEV) Staff/Pupils** 
   1. **Shielding**

Shielding is currently paused. In the event of a major outbreak or variant of concern that poses a significant risk to individuals on the shielded patient list (SPL), ministers can agree to reintroduce shielding. Shielding would be considered in addition to other measures to address the residual risk to people on the SPL, once the wider interventions are taken into account.

Settings should make sure their contingency plans cover this possibility. Shielding can only be reintroduced by national government.

**2.2 Clinically Extremely Vulnerable Staff**

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](https://www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19/19-july-guidance-on-protecting-people-who-are-clinically-extremely-vulnerable-from-covid-19).

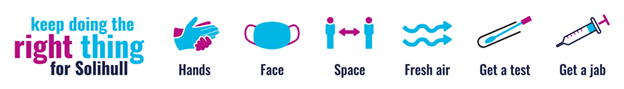
For queries on CEV staff, **please contact your HR provider**.

**2.3 Clinically Extremely Vulnerable Pupils**

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.

Where parents are concerned about their child’s attendance, they should speak to their child’s educational setting about their concerns and discuss the measures that have been put in place to reduce the risk. They should also discuss other measures that can be put in place to ensure their children can regularly attend.

CEV young people aged 12-15 should be able to receive the Covid-19 vaccine (as well as young people aged 12-15 who live with an immunosuppressed person in their household). If Covid-19 cases increase in a school, there will need to be a discussion with the family or staff with a child/young person to remote learn at home where needed. Further information is available in the guidance on [supporting pupils at school with medical conditions](https://www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions--3). Key contractors need to be made aware of the school’s control measures and ways of working.



1. **Infection Prevention**
   1. **Vaccination**

Vaccination is the single, most effective means we have for protecting people from Covid-19 and reducing transmission risk in educational settings. Schools/settings should continue to encourage vaccination uptake for eligible students and staff whenever possible.

All children aged 12 and over are now eligible for COVID-19 vaccination. Those aged 12 to 17 are eligible for a first dose of the Pfizer/BioNTech COVID-19 vaccine, although 12 to 17 year olds with certain medical conditions that make them more at risk of serious illness, or who are living with someone who is immunosuppressed, are eligible for 2 doses. These children will be contacted by a local NHS service such as their GP surgery to arrange their appointments. All other 12 to 15 year olds will be offered the vaccine via the school-based programme. Young people aged 16 to 17 will be invited to a local NHS service such as a GP surgery or can [access the vaccine via some walk-in COVID-19 vaccination sites](https://www.nhs.uk/conditions/coronavirus-covid-19/coronavirus-vaccination/find-a-walk-in-coronavirus-covid-19-vaccination-site/).

You can find out more about the in-school vaccination programme in [COVID-19 vaccination programme for children and young people guidance for schools](https://www.gov.uk/government/publications/covid-19-vaccination-resources-for-schools/covid-19-vaccination-programme-for-children-and-young-people-guidance-for-schools).

**Get Boosted – Importance of COVID-19 Vaccination**

A booster dose of the coronavirus (COVID-19) vaccine helps improve the protection you have from your first 2 doses of the vaccine. It helps give you longer-term protection against getting seriously ill from COVID-19.

You can get a booster dose if you had a 2nd dose of the COVID-19 vaccine at least 3 months ago and:

* you are aged 18 or over
* you are aged 16 or over with a health condition that puts you at high risk of getting seriously ill from COVID-19
* you are a frontline health or social care worker
* you live or work in a care home
* you are aged 16 or over and are a main carer for someone at high risk from COVID-19
* you are aged 16 or over and live with someone who has a weakened immune system (such as someone who has HIV, has had a transplant or is having certain treatments for cancer, lupus or rheumatoid arthritis)

People who are pregnant and in 1 of the eligible groups can also get a booster dose.

Evidence shows that the booster vaccination is extremely important in protecting against the Omicron variant of COVID-19 and there is currently plenty of vaccine capacity locally with further information available here - [Birmingham & Solihull NHS COVID-19 Vaccination Service](https://www.birminghamandsolihullcovidvaccine.nhs.uk/).

* 1. **Cleaning, hand hygiene and ventilation**

All education and childcare settings should continue to ensure **good hygiene** for everyone, maintain appropriate **cleaning regimes**, keep occupied spaces **well ventilated**, and follow public health advice on testing and managing confirmed cases of COVID-19.

* 1. **Pupil Groups and Mixing**

It is no longer necessary to keep children in consistent groups (‘bubbles’). 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. School/settings should ensure contingency (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.

* 1. **Face Coverings**
* From 20 January, face coverings are no longer advised for pupils, staff and visitors in classrooms.
* From 27 January, face coverings are no longer advised for pupils, staff and visitors in communal areas.
* From 27 January, staff and pupils should follow [wider government advice](https://www.gov.uk/government/publications/face-coverings-when-to-wear-one-and-how-to-make-your-own/face-coverings-when-to-wear-one-and-how-to-make-your-own) on face coverings outside of school, including on transport to and from school.
  1. **Continue clear messaging to parents/carers on spotting symptoms**

All settings should continue their **strong messaging about signs and symptoms**, isolation advice and testing, to support prompt isolation of suspected cases.

*Please see over page for appendices*

**Appendices A-I**

**Appendix A: Symptomatic pupils in school/settings**

If a pupil is awaiting collection, they should be left in a room on their own if possible and safe to do so and a window should be opened for fresh air ventilation. Appropriate PPE should also be used if close contact (within 2 metres) is necessary. Further information on this can be found in the [use of PPE in education, childcare and children’s social care settings](https://www.gov.uk/government/publications/safe-working-in-education-childcare-and-childrens-social-care) guidance. Any rooms they use should be cleaned after the symptomatic person has left.

If a parent or carer insists on a symptomatic pupil attending the school/setting, a decision can be taken to refuse the pupil if, in the reasonable judgement of school leadership teams, it is necessary to protect other pupils and staff from possible infection with Covid-19.

**Appendix B: Log for recording confirmed Covid-19 cases**

School/settings should record their confirmed Covid-19 cases on this log:



**Appendix C: Close Contact Isolation information**

* **Non-exempt close contacts** (*i.e. adults who are not fully vaccinated*) of a confirmed Covid-19 case MUST ISOLATE –
  + **10 days from the last contact.** In a school/setting, that is 10 days from the last day the infected pupil/staff member attended the setting. Day 1 of isolation is the next day.
  + The confirmed case should isolate for 10 days from the date of the onset of symptoms (or test date if asymptomatic).
  + *If the case was not symptomatic when they tested positive and then develop symptoms, their isolation needs to be extended to 10 days from the first symptom.*
  + *Please see section below regarding the possibility of an early end to isolation.*
* **Exempt close contacts** (*i.e. adults who are fully vaccinated, children under 18 years old, adults who have had their second Covid-19 vaccine more than 14 days ago, have taken part in or are currently part of an approved COVID-19 vaccine trial or are not able to get vaccinated for medical reasons*) of a confirmed Covid-19 case **do not have to isolate** (this includes household members) but should –
  + **Undertake daily testing for close contacts**. All adults who are fully vaccinated and children aged 5 to 18 years and 6 months, identified as a contact of someone with COVID-19 – whether Omicron or not – should take a lateral flow device (LFD) test every day for 7 days instead of self-isolating.
    - Once notified by NHS Test and Trace as a close contact, all eligible staff, pupils and students should take an LFD each day for 7 days and report the results through the Online Reporting System and to their setting. If they test negative, they can continue to attend their education setting.
    - Children who are aged under 5 years are exempt from daily testing and advised to take a PCR test only if the positive case is within their own household. They do not need to isolate whilst awaiting this PCR result.
    - *Please see section below regarding the possibility of an early end to isolation.*
* **For BOTH exempt and non-exempt contacts who test positive** –
  + Individuals may be able to end self-isolation early (no earlier than day 6) if two consecutive negative LFD tests are received, and the individual does not have a high temperature.
  + The first test must be taken no earlier than day 5 of the self-isolation period, and the second must be taken the following day. If the individual tests negative on this second test on the 6th day, then can end self-isolation.
  + If an individual is positive on day 5, then a negative test is required on day 6 and day 7 to release from isolation.
  + Individuals who are still positive on their lateral flow tests must stay in isolation until they have had two consecutive negative tests taken on separate days.
  + LFD tests do not need to be taken after the 10th day of self-isolation and the individual may stop self-isolating after this day. This is because they are unlikely to be infectious after the 10th day. Regular LFD testing can resume after day 14.
  + Even if a positive LFD test result is received on the 10th day of self-isolation, further LFD tests are not required to be taken after this day and a follow-up PCR test is not required.
  + If there’s still a high temperature after 10 days or the individual is unwell, stay at home & seek medical advice.
  + If the individual is concerned, they can choose to limit close contact with other people (especially those at higher risk of severe illness) until 14 days after the start of the self-isolation period. (See ‘Updates’ section for further details).

Full details can be found in [**NHS Test and Trace: what to do if you are contacted guidance**](https://www.gov.uk/guidance/nhs-test-and-trace-how-it-works?priority-taxon=774cee22-d896-44c1-a611-e3109cce8eae)and [**Stay at Home Guidance**](https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance/stay-at-home-guidance-for-households-with-possible-coronavirus-covid-19-infection).

**Appendix D: Identification of close contacts**

Contact tracing for confirmed Covid-19 cases in schools/settings will be conducted by NHS Test and Trace or through local contact tracing teams. In exceptional circumstances, education and childcare settings may be contacted by contact tracers if deemed necessary by local health protection teams in response to a local outbreak, as currently happens in managing other infectious diseases.

In this scenario settings may share proportionate and relevant information as requested by NHS Track and Trace/local contact tracing team without consent. The sharing of information in these **exceptional circumstances** does not require consent as it is enabled by specific legislation, but to support this, the existing privacy notices should continue to be in place and be easily accessible.

In **exceptional cases** only, settings may decide to refuse a pupil if, in the setting's reasonable judgement, it is necessary to protect those within the setting from possible infection with Covid-19. The decision would need to be carefully considered in light of all the circumstances and current public health advice.

Individuals should only be asked to stay home for Covid-related reasons if:

* they are symptomatic
* they have tested positive with a PCR or LFD (they may return to the setting if

a positive LFD result is followed by a negative PCR within 2 days)

Settings should consider whether individuals in their setting (taking account of factors such as known vulnerability) need to be informed of a positive case. When informing individuals of a positive case, the setting should not disclose any information that could result in an individual being identified. Settings may make their own decisions on how they wish to communicate the information.

**FOR REFERENCE: Identification of close contacts of Covid-19 cases:**

1. The **infectious period** of the confirmed case is considered:

**2 days prior to symptoms showing (or 2 days prior to test for asymptomatic cases) and 10 days afterwards** **WHEN THE CASE WAS IN THE SCHOOL/SETTING**

1. **FOR THIS PERIOD**, the school/setting consider the close contact types **– Pupils/Staff/Contractors/Visitors**

**Definition of a Close Contact:**

* anyone who lives in the same household as another person who has Covid-19 symptoms or has tested positive for Covid-19
* a person who has had **face-to-face contact** (within **one metre**), with someone who has tested positive for Covid-19, including:
  + being **coughed on**
  + having a **face-to-face conversation** within one metre
  + having **skin-to-skin physical contact**, or
  + contact within one metre for **one minute or longer** without face-to-face contact
* a person who has been **within 2 metres of a confirmed case for 15 minutes or longer** *(either as a one-off contact, or added up together over one day)*
* travelling in a **small vehicle**, like a car, or aeroplane with a confirmed case

**Full Infectious period: from 2 days prior to symptom onset (or the date of the test if asymptomatic) to 10 days after.**

**Full guidance on contact definitions is** [**here**](https://www.gov.uk/government/publications/guidance-for-contacts-of-people-with-possible-or-confirmed-coronavirus-covid-19-infection-who-do-not-live-with-the-person/guidance-for-contacts-of-people-with-possible-or-confirmed-coronavirus-covid-19-infection-who-do-not-live-with-the-person#what-do-we-mean-by-a-contact)

**Appendix E: Guidance for defining cases who have mixed closely**

Identifying a group that is likely to have mixed closely will be different for each setting as follows:

**In early years:**

* a childminder minding children, including their own
* childminders working together on the same site
* a nursery class/group and their staff
* a friendship group who often play together
* staff and children taking part in the same activity session together

**For primary and secondary schools:**

* a form group or subject class
* smaller intervention groups
* a friendship group sat together/mixing at lunch/break times
* a sports team
* a group in before after-school care or activity session
* pupils or staff who travel to and from school together (including walking groups, cycling groups and school transport)

**For wraparound childcare or out-of-school settings:**

* a private tutor or coach offering one-to-one tuition to a child, or to multiple children at the same time
* staff and children taking part in the same class or activity session together
* children who have slept in the same room or dormitory together

**For further education colleges:**

* students and teachers on practical courses that require close hands-on teaching, such as hairdressing and barbering
* students who have played on sports teams together
* students and teachers who have mixed in the same classroom/seminar/teaching space
* students who have mixed socially during break/ lunchtimes

**Appendix F: Possible Covid-19 outbreak management actions**

**Thresholds:**

* **5 children, pupils, students or staff, who are likely to have mixed closely\*, tested positive for COVID-19 within a 10-day period (2 in a special school or setting with fewer than 20 people (including children/young people and staff)?**

**OR**

* **10% of children, pupils, students or staff** who **are likely to have mixed closely\*** test positive for COVID-19 within a 10-day period

***WHICHEVER IS REACHED FIRST***

***OR***

* ***Has the confirmed Covid-19 case been hospitalised or died?***

**Actions to consider once a threshold is reached**

At the point of reaching the threshold, education and childcare settings should review and reinforce the testing, hygiene and ventilation measures they already have in place. Settings should also consider:

* Review and reinforce hand hygiene actions
* Review and reinforce respiratory hygiene actions
* Review ventilation and increase where possible
* Consider taking activities such as exercise, classes or assemblies outdoors
* Consider virtual staff meetings/assemblies
* Consider one-off cleaning of the school/setting particularly frequent touchpoints/shared equipment
* Consider zoning to reduce mixing between classes/year groups (e.g. consider staggered lunch/breaks)
* Advise staff members to stay at a 2 metre distance from one another and from pupils where possible
* School/setting to send template outbreak letter (See Appendix H)
* Secondary only:
  + Reinforce twice weekly LFD testing

Schools/settings may also wish to seek additional public health advice from Solihull Council if they are concerned about transmission in the setting, either by emailing [**contacttracing@solihull.gov.uk**](mailto:contacttracing@solihull.gov.uk)or phoning **0121 704 6892**.

A Director of Public Health or Health Protection Team may give settings advice reflecting the local situation. In areas where rates are high, this may include advice that local circumstances mean that the thresholds for extra action can be higher than set out above.

**Additional actions that could be advised by public health experts:**

If you have contacted Solihull Council Public Health and they subsequently judge that additional action should be taken because they have assessed that transmission is likely to be occurring in the setting, they may advise settings take extra measures such as:

1. **Strengthened communications** to encourage pupils / students to undertake twice weekly rapid asymptomatic home testing and reporting
2. **Temporarily reinstating face coverings** for pupils/students, staff and visitors in indoor and/or communal spaces in secondary schools, colleges and for staff in primary, early years, out-of-school and specialist settings. This should be for two weeks in the first instance, pending regular review
3. **Consider limiting:**

* residential educational visits
* open days
* transition or taster days
* parental attendance in settings
* live performances in settings

1. **Increased frequency of testing**
   1. Close contact/household testing

* implement daily LFD testing for secondary aged students in households or close contacts (identified by NHS Test and Trace) while they wait for the results of the PCR test.
* advise that primary schools can also suggest that their pupils who are identified by NHS Test and Trace as close or household contacts undertake daily LFD testing while awaiting the results of a PCR. This is left to parental discretion and test kits for primary aged pupils can be accessed via gov.uk or their local pharmacy.
  1. Outbreak testing
* More frequent LFD testing, including daily testing for a group or cohort in secondary schools or colleges where case numbers are very high. This should be done for a minimum of 5 days, increasing to 7 days as necessary to ensure the final test is taken on a school day.
* A one-off round of LFD testing for a wider group or cohort in a secondary school.

In all cases, pupils should continue to attend school or college provided they have a negative LFD test result. Individuals should only have a PCR test if they are symptomatic, received a positive LFD, or are identified through NHS Test and Trace as a close contact of a confirmed case. All additional testing should be applied in a ‘test to find approach’ and applied for a defined period of time after a risk assessment in line with the contingency framework.

Where possible local teams, schools and Colleges should make use of existing or local supplies of test kits as much as possible. Further detail on supply options is available in Annex 1.

***Local authorities, Directors of Public Health and/or Heath Protection Teams may recommend these precautions in individual settings or across an entire area.*** They will work closely with their Regional Partnership Teams and keep the situation under regular review. ***They will inform settings when it is appropriate to stop additional measures, or if they should be extended.***

**Additional actions that could be advised by Solihull Council Public Health**

**In extreme cases, and as a last resort where all other risk mitigations have not broken chains of in-school transmission**, a Director of Public Health may advise the following -

**Attendance restrictions**

**Introducing short-term attendance restrictions in a setting.** This could come in the form of a **partial remote learning offer** e.g. such as sending home a class or year group or in further extreme circumstances a **full remote learning** **offer**.

Attendance restrictions should only ever be considered as a **short-term measure and as a last resort:**

* for individual settings, on public health advice **in extreme cases** where other recommended measures have not broken chains of in-setting transmission; or
* across an area, on government advice in order to supress or manage a **dangerous variant** and to **prevent unsustainable pressure on the NHS**.

High quality face-to-face education remains a government priority and research has shown that the impacts of missing face-to-face education during the pandemic are severe for children, young people and adults. In all cases, any benefits in managing transmission should be weighed against any educational drawbacks.

High-quality remote learning should be provided for all students well enough to learn from home. On-site provision should in all cases be retained for vulnerable children and young people and the children of critical workers.

**Appendix G: Covid-19 Guide for Parents and Carers**

**Covid-19 Guide for Parents and Carers**

As COVID-19 becomes a virus that we learn to live with, we need to minimise the disruption to children and young people’s education - particularly given that the direct risks to children are very low and every adult has been offered the vaccine.

This document provides information for parents and carers of children under the age of 18 years and 6 months who have –

* Developed symptoms of Covid-19
* Tested positive for Covid-19
* Been identified as a close contact of someone who has tested positive for Covid-19 (overleaf)

**Start here OR Start here**

**Your child develops Covid-19 symptoms**

**(a new, continuous cough, high temperature OR loss/change in taste/smell)**

**Your child tests positive on a lateral flow test**

Your child **should not come into school & should begin to self-isolate immediately. They should also have a PCR test.**

**All symptomatic children need a PCR test (not a lateral flow test).**

Information on booking a PCR test can be found here: <https://www.gov.uk/get-coronavirus-test>

Your child **should not come into school & should begin to self-isolate immediately.** As of 11/01/21 positive lateral flow test results do not need to be confirmed with a **PCR test and children should begin to isolate as soon as they receive this positive result.**

Your child receives a **positive Covid-19 PCR test result**:

* Self-isolation can be ended after 10 full days if symptoms have gone, or if the only symptoms left are a cough or anosmia (which can last for several weeks).
* **Individuals may be able to end self-isolation early (no earlier than day 6) if two consecutive negative LF tests are received, and the individual does not have a high temperature.**
* The first test must be taken no earlier than day 5 of the self-isolation period, and the second must be taken the following day. If the individual tests negative on this second test on the 6th day, then can end self-isolation.
* If an individual is positive on day 5, then a negative test is required on day 6 and day 7 to release from isolation.
* Individuals who are still positive on their lateral flow tests must stay in isolation until they have had two consecutive negative tests taken on separate days.
* LFD tests do not need to be taken after the 10th day of self-isolation and the individual may stop self-isolating after this day. This is because they are unlikely to be infectious after the 10th day. *Regular LFD testing can resume after day 14.*
* Even if a positive LFD test result is received on the 10th day of self-isolation, further LFD tests are not required to be taken after this day and a follow-up PCR test is not required.
* If there’s still a high temperature after 10 days or the individual is unwell, stay at home & seek medical advice.
* If the individual is concerned, they can choose to limit close contact with other people (especially those at higher risk of severe illness) until 14 days after the start of the self-isolation period.

You child receives a **negative Covid-19 PCR test result**:

Their isolation period will end and they can return to school once they are feeling well and are fever free for 48 hours. *Please contact your child’s school to inform them of this.*

**Close contacts:**

**Your child is identified as a close contact of someone who has recently tested positive for Covid-19:**

* + ***Close contacts in schools are now identified by NHS Test and Trace/local Contact Tracing teams and education settings are not expected to undertake contact tracing***.
  + Parents/carers may be contacted by NHS Test and Trace/local Contact Tracing Teams to inform you that your child has been identified as a close contact.
  + **In this instance children and young people aged under 18 years 6 months are not required to self-isolate and should continue to attend school as normal, but conduct daily LFD testing (see update below).**
  + We would encourage all individuals to take a PCR test if advised to do so (or if symptoms develop).

**To note** –

* + - Children aged under 5 years are advised to take a PCR test only if they are a close contact of positive case within their own household.
    - Close contacts should not have a PCR test within 90 days of a previous positive Covid-19 test unless they have symptoms.
    - A close contact not identified by NHS Test and Trace/local teams but known by the school/setting to have been in close contact with the case, can be advised to undertake daily lateral flow tests for 7 days (*not whole classes in most cases*).

**Should you require any further information, please access the information sites below -**

[**What parents and carers need to know about early years providers, schools and colleges - GOV.UK**](https://www.gov.uk/government/publications/what-parents-and-carers-need-to-know-about-early-years-providers-schools-and-colleges-during-the-coronavirus-covid-19-outbreak/step-4-update-what-parents-and-carers-need-to-know-about-early-years-providers-schools-and-colleges)[**(www.gov.uk)**](https://www.gov.uk/government/publications/what-parents-and-carers-need-to-know-about-early-years-providers-schools-and-colleges-during-the-coronavirus-covid-19-outbreak/step-4-update-what-parents-and-carers-need-to-know-about-early-years-providers-schools-and-colleges)

**NHS Advice on COVID-19 can be found at** [**www.nhs.uk/conditions/coronavirus-covid-19/**](http://www.nhs.uk/conditions/coronavirus-covid-19/)

**Appendix H: Outbreak Letter for School at the Threshold– Advice to Parents**

Date: \_\_\_\_\_\_\_\_

Dear Parents/Carers,

Over the last xxx weeks we have been made aware that a small number/several members of the school community have tested positive for COVID-19.

We are continuing to monitor the situation and are working closely with public health advisers. This letter is to inform you of the current situation and provide advice on how to support your child. Please be reassured that for most people, coronavirus (COVID-19) will be a mild illness.

There are a number of outbreak management actions that may be taken to reduce the spread of COVID-19 in schools/settings including increasing cleaning, ventilation, possibly reintroducing face coverings and reducing mixing in schools. We are extremely mindful of the negative impact of missing education has on children and young people, therefore, restricting attendance at school will only be considered as an absolute last resort.

The school remains open and providing your child remains well they can continue to attend school as normal.

**What to do if your child develops symptoms of COVID-19**

If your child develops symptoms of COVID-19 (new, continuous cough, high temperature, loss/change in taste/smell), they should remain at home and access a PCR test. Anyone with symptoms will be eligible for testing and this can be arranged via <https://www.nhs.uk/ask-for-a-coronavirus-test> or by calling 119.

If the person with symptoms receives a positive test result, they must isolate. The 10-day self-isolation period for people who record a positive LFT or PCR test result for COVID-19 has been reduced to 5 days if the conditions below are met. Individuals should now take lateral flow tests on day 5 and day 6 of their self-isolation period. Those who receive two negative test results are no longer required to complete 10 full days of self-isolation and are required to report these results online. The first test must be taken no earlier than day 5 of the self-isolation period. If both these test results are negative, and the person does not have a high temperature, they may end self-isolation after the second negative test result and return to their education setting from the start of day 6. Anyone who is unable to take LFD tests will need to complete the full 10-day period of self-isolation.

Household contacts aged above 5 years old or are above 18 years old and are fully vaccinated (had their second vaccine more than 14 days ago), should undertake daily Lateral Flow testing for 7 days. Household contacts above the age of 18 who are not fully vaccinated need to isolate from 10 days from the case’s first symptoms (or test date if they had no symptoms). Full guidance can be found at :

<https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance/stay-at-home-guidance-for-households-with-possible-coronavirus-covid-19-infection>

**Contact tracing**

Schools/settings are no longer required to trace close contacts of cases and, if your child tests positive for COVID-19, the local contact tracing team will be in touch to identify close contacts. Contact tracers will ask about symptoms, test date and will help you to identify anyone they have been in close contact with during their infectious period. We appreciate you may not be able to identify all of those who have been close contact with your child, however, we will work with you to identify as many as possible.

Once notified by local contact tracing teams/NHS Test and Trace as a close contact, all eligible staff, pupils and students should undertake Daily Testing of Close Contacts, which involves taking a LF test each day for 7 days and reporting the results through the Online Reporting System and to their setting. If they test negative, they can continue to attend their education setting.

**How you can help**

**Vaccination** is the single, most effective step we can take to protect ourselves and others from the virus and we would urge everyone eligible to ‘grab a jab’. This is crucially important for lowering the infection rate in schools/settings and the wider community and is the best way you can protect yourself and your family from COVID-19.

**Symptoms** - It is also extremely important that all parents/carers are vigilant in spotting symptoms in their child(ren) and do not send them to their school/setting if they have COVID-19 symptoms. During this period when there are COVID-19 cases in schools, if you are in any doubt about your child’s symptoms, please access a COVID-19 test.

***[FOR SECONDARY SCHOOLS ONLY]******Testing*** *- Asymptomatic COVID-19 testing is extremely important in reducing the risk of the virus spreading and we encourage you to support your child in taking their tests at least twice per week and reporting their results.]*

Thank you for your support.

Yours sincerely

Headteacher

**Appendix I: Further information**

**NATIONAL GUIDANCE**

**National guidance for each setting published on GOV.UK (links below):**

**[Early years](https://www.gov.uk/government/publications/coronavirus-covid-19-early-years-and-childcare-closures/coronavirus-covid-19-early-years-and-childcare-closures)** [**Schools**](https://www.gov.uk/government/publications/actions-for-schools-during-the-coronavirus-outbreak/guidance-for-full-opening-schools)[**FE colleges and providers**](https://www.gov.uk/government/publications/coronavirus-covid-19-maintaining-further-education-provision)[**Contingency Plan**](https://www.gov.uk/government/publications/coronavirus-covid-19-local-restrictions-in-education-and-childcare-settings)

**Contact Tracing Information: **

Public Health

Solihull Metropolitan Borough Council

January 2022