



Nerrols Primary School and Nursery

Covid-19 - Return Strategy and Risk Assessment – September 2021 Revision

As we start the new school year, we have entered a new phase in the government’s response to the Covid-19 pandemic and the management of the risk of serious illness from the spread of Covid-19. As Covid-19 becomes a virus that we learn to live with, new and updated advice has been issued by the government advising people on how to protect themselves and others, alongside targeted interventions to reduce risk. The Return Strategy and Risk Assessment for Nerrols Primary School and Nursery below outlines the steps we will take to minimise the risk of coronavirus (Covid-19) transmission.

Area of consideration	Protective measures
Symptoms of coronavirus Covid-19	<p>The main symptoms of coronavirus (Covid-19) are:</p> <ul style="list-style-type: none"> ○ a high temperature – previous advice stated 37.8°C or greater, current NHS advice states ‘this means you feel hot to touch on your chest or back (you do not need to measure your temperature)’ ○ a new, continuous cough – this means coughing a lot for more than an hour, or 3 or more coughing episodes in 24 hours (if you usually have a cough, it may be worse than usual) ○ a loss or change to your sense of smell or taste – this means you've noticed you cannot smell or taste anything, or things smell or taste different to normal
Attendance	<ul style="list-style-type: none"> ● School attendance is mandatory for all pupils of compulsory school age. ● Nerrols Nursery continues to remain open for children to attend full time or their usual timetable hours. ● Attendance will be recorded using the usual attendance returns. ● We will follow up on pupil absences following normal procedures. ● Parents / carers should follow the usual procedure and call the school / nursery each day at the earliest opportunity if they are due to attend but are not able to attend, giving the reasons for the absence. ● We will complete the DfE daily education school status form from the start of term (this is a daily report on numbers of pupils attending, staff absences and whether the school is open to all pupils) ensuring this is submitted by 12 noon daily.

	<ul style="list-style-type: none"> • Nursery children will continue to be registered via Family and Early Years attendance returns will continue to be returned fortnightly. • All children and staff travelling to England must adhere to travel legislation, details of which are set out in red, amber and green list rules for entering England. Parents and carers should bear in mind the impact on their child’s learning and development which may result from any requirement to quarantine or isolate upon return.
Alternative provision	<ul style="list-style-type: none"> • Where a child routinely attends more than one setting on a part time basis, for example, because they are dual registered at a mainstream school and an alternative provision setting or special school, we will work through the system of controls collaboratively with the other setting, enabling any risks to be identified and addressed, enabling a broad and balanced curriculum to be jointly delivered for the child.
Robust hand hygiene	<ul style="list-style-type: none"> • All children and adults will thoroughly clean their hands regularly throughout the day. • Children will be explicitly taught handwashing techniques and good hygiene practices. • All staff and children will wash their hands upon arrival at work/school and upon departure from work/school • All staff and children will wash their hands regularly throughout the day, especially before and after eating, after sneezing or coughing, and before and after break times. • Each class has their own toilet and hand washing facilities with adequate supplies of soap, running water and paper towels. Hand sanitiser is also available in each classroom. • Where needed, for example, with pupils with complex needs, skin cleaning wipes may be used as an alternative if needed. • Handwashing technique posters are displayed at the sinks in the toilets and at the classroom sinks. • Staff will review the NHS guidance on hand cleaning https://youtu.be/bQCP7waTRWU and consider resources such as Dr Dog explains coronavirus, e-Bug COVID-19 website and Professional association for children and early years (PACEY): supporting children in your setting
Good respiratory hygiene	<ul style="list-style-type: none"> • All children will be explicitly taught good respiratory hygiene practices by promoting the ‘catch it, bin it, kill it’ approach • All staff and pupils will use a tissue or elbow to cough or sneeze and use the foot operated lidded bins provided for tissue waste (‘catch it, bin it, kill it’) • Disposable tissues and foot operated lidded bins are located in each classroom area. • All staff and children will wash and sanitise their hands after sneezing or coughing. • Gloves, blue roll and sanitising spray are available in each classroom.
Enhanced cleaning arrangements	<ul style="list-style-type: none"> • Cleaning is contracted daily. • All frequently touched surfaces, equipment, door handles and toilets used during the day will be cleaned thoroughly each day.

	<ul style="list-style-type: none"> • Soap and warm water is available in every classroom. • Hand sanitiser is available at the main school entrance and nursery entrance as well as in the classrooms and the lunch hall. • Staff will clean frequently touched items throughout the day as needed, using sanitising spray and blue roll, following the manufacturers' application guidance and COSHH sheets. Additional Milton disinfectant supplies are stored in the Nursery. • Sanitising spray, gloves and disposable blue roll is available in each classroom. Sanitising spray is replaced every other day as per the manufactures guidance. • Cleaning chemicals will not be sprayed directly onto light switches, telephones, computers or other electrical items. Products can be applied to a cloth, the cloth must not be wet. • Bins are emptied daily, or more frequently if full. • Adequate supplies of soap, sanitising gel and cleaning products are in place.
Organisation	<ul style="list-style-type: none"> • The government no longer recommends that it is necessary to keep children in consistent groups or 'bubbles' and schools are able to have flexibility in curriculum delivery, resume assemblies and larger gatherings and no longer need to limit mixing at lunch. • At Nerrols, we will continue to use social distancing measures where they do not impact on or cause disruption to every day activities.
Arrival at school	<ul style="list-style-type: none"> • We will continue to operate a 'soft arrival and departure' system, which means: • The classrooms will be open from 8:40 – 8:50 for parents/carers to drop their children straight off as they arrive, thus staggering the start time and minimising gathering at the classroom door. • Both the Nerrols Drive pedestrian entrance and the rear pedestrian entrance alongside the astro-turf pitch will be open. • Parents / carers are asked to avoid gathering to talk at the school gates so that other parents are able to pass at a distance • Parents and children are encouraged to walk or cycle to school where possible and maintain a distance between them and other families or members of the public. • Children are encouraged to wash their hands prior to departure from home. • Upon arrival, Nursery parents and children should press the nursery intercom ensuring they are socially distanced from other families. A member of nursery staff will then greet you and collect the children. • Children will be supervised to wash their hands upon arrival at School/Nursery. • Bikes and scooters can be parked in the bike / scooter racks at the front of the school or to the rear of the school. • The children will hang their coats in the cloak room / coat trolley / on the hooks in the classroom.
Departure from school	<ul style="list-style-type: none"> • We will be operating a 'soft departure' system, which means:

	<ul style="list-style-type: none"> • The classrooms will be open from 3:10 – 3:15 for parents/carers to collect their children as they arrive, thus staggering the departure time and minimising gathering at the classroom door. • All children will wash their hands prior to departure. • To collect the children, Nursery parents should press the nursery intercom ensuring they are socially distanced from other families. A member of nursery staff will bring your child to you. • If parents / carers wish to speak to a member of staff, they are asked to wait until all children have been dismissed to allow for safe dismissal to the correct people. Parents and staff are encouraged to maintain a safe distance of 2m when discussing. Alternatively, parents are able to contact staff via the main school office / Nursery telephone number.
Catering, meals and snacks	<ul style="list-style-type: none"> • Hot meals will be provided daily by our catering team at Lyngford Park Primary School. • The nursery children will eat in the nursery. • Ventilation in the lunch hall will be increased by opening windows • All surfaces will be thoroughly cleaned prior to eating following usual procedures (wash down with warm soapy water, wash with clean fresh water and disinfect using Diversy D10 and disposable blue roll). • Staff are asked to refrain from coming into or travelling through the catering kitchen area wherever possible. • As is usual practice, hands will be washed before and after handling food; before handling clean cutlery, dishes, glasses, or other items to be used by the children; after handling dirty or used items, such as collecting used dishes from tables. • Free school meals continue to be available to pupils who are eligible for benefits-related free school meals and who are isolating at home during term time.
Ventilation	<ul style="list-style-type: none"> • Occupied spaces will be kept well ventilated by opening windows. • All classrooms are fitted with CO2 monitors to aid awareness of the ventilation requirements of each room. • A mechanical ventilation system is in place which circulates fresh air from outside. • In cooler weather, windows should be opened just enough to provide constant background ventilation, and opened more fully during break times to purge the air in the space. • Opening internal doors can also assist with creating a throughput of air. • To balance the need for increased ventilation while maintaining a comfortable temperature, the following measures should also be used as appropriate: <ul style="list-style-type: none"> ○ Opening high level windows in preference to low level to reduce drafts ○ Increasing the ventilation while spaces are unoccupied (e.g. between classes during break and lunch, when a room is unused) ○ Rearranging furniture where possible to avoid direct draft • When working in spaces that are less well ventilated such as the school library, the doors to the school hall and Head teacher's office are opened and the windows in these rooms are opened to enhance airflow.

Provision	<ul style="list-style-type: none"> ● Children’s emotional and mental wellbeing will be supported following our usual social, emotional and mental health and wellbeing processes. ● Some children may benefit from additional focused support and staff will consider this, drawing on external support where necessary and possible. ● The <u>MindEd</u> learning platform for professionals may be helpful. ● New routines will be explicitly taught ● The children will be explicitly taught health and hygiene arrangements including handwashing, tissue disposal and toilet flushing using the <u>e-bug resources</u>.
Sport, music and singing	<ul style="list-style-type: none"> ● The government has removed restrictions on singing and exercising. It recognises however that some activities, such as singing, dancing or exercising can generate increased aerosol transmission and increase the risk of catching or passing on Covid-19. ● In order to mitigate the potential aggregate risk of aerosol transmission: <ul style="list-style-type: none"> ○ Where indoor spaces are used, ventilation is increased by opening doors and windows and using larger rooms ○ Instruments will not be shared ○ Instruments and equipment will be cleaned and disinfected after use. ○ Staff and pupils will wash their hands before and after handling equipment.
After school clubs	<ul style="list-style-type: none"> ● A copy of the Return Strategy and Risk Assessment has been shared with Premier Education and the coaches agree to implement the measures set out in this document
Face coverings	<ul style="list-style-type: none"> ● The government states that face coverings are no longer advised for staff and visitors either in classrooms or in communal areas and has removed the requirement to wear face coverings in law. ● Staff and visitors continue to be able to wear face coverings if they choose to. ● The government continues to expect and recommend that face coverings are worn by those aged 12 and over 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. ● Some individuals are exempt from wearing face coverings. This applies to those who: <ul style="list-style-type: none"> ○ cannot put on, wear or remove a face covering because of a physical or mental illness or impairment or disability ○ speak to or provide assistance to someone who relies on lip reading, clear sound or facial expression to communicate The same exemptions will apply in school/nursery, and we would expect teachers and other staff to be sensitive to those needs. ● The government advises that face visors or shields should not routinely be worn as an alternative to face coverings. They may protect against droplet spread in specific circumstances but are unlikely to be effective in reducing aerosol transmission when used without an additional face covering.

Safe wearing and removal of face coverings	<ul style="list-style-type: none"> • Hands should be washed before and after touching the face covering – including to remove or put them on • The front of the face covering must not be touched during use or when removing it. • Where a face covering becomes damp, it should not be worn and the face covering should be replaced carefully. • Disposable face coverings should be disposed of in a foot operated lidded waste bin (not recycling bin) • Reusable face coverings should be stored in individual, sealable plastic bags between use • Hands must be washed before and after applying or removing the face covering
Asymptomatic testing	<ul style="list-style-type: none"> • Since January 2021, school and nursery staff have had access to Lateral Flow Testing twice a week as part of the asymptomatic testing programme. • Staff should undertake twice-weekly home tests whenever they are on site. This will be reviewed by the government at the end of September.
Response to any infection	
Displaying symptoms	<ul style="list-style-type: none"> • If anyone in the school / nursery becomes unwell with a new and persistent cough, or a high temperature, or a loss of, or change in, their normal sense of taste or smell (anosmia), however mild, they will be sent home and should follow public health advice and stay at home and self-isolate immediately. • The person with symptoms should arrange to have a polymerase chain reaction (PCR) test as soon as possible. • They must stay at home whilst awaiting the test results. If they need to leave home to get to a test site, they should wear a face covering, stay at least 2 metres apart from people they do not live with, and return home immediately afterwards. • Anyone with symptoms, should avoid using public transport and, wherever possible, be collected by a member of their family or household. • 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 school/nursery, the government advises schools / nurseries are able to refuse the pupil if, in our reasonable judgement, it is necessary to protect other pupils and staff from possible infection with Covid-19.
Developing symptoms during the school day	<ul style="list-style-type: none"> • Any child, member of staff or visitor who becomes unwell on site with the symptoms listed above, however mild, will be sent home and advised to arrange a PCR test. • Whilst awaiting collection, children will be moved to the first aid room where they can be isolated behind a closed door with vision panel, with appropriate adult supervision. • Where direct supervision is required, a fluid-resistant surgical face mask should be worn by the supervising adult if a distance of 2 metres cannot be maintained. If contact with the child is necessary, disposable gloves, a disposable apron and a fluid-resistant

	<p>surgical face mask should be worn by the supervising adult. If a risk assessment at the time, determines that there is a risk of splashing to the eyes, for example from coughing, spitting or vomiting, eye protection should also be worn.</p> <ul style="list-style-type: none"> • Required PPE is available in the first aid room • If the person displaying symptoms needs to go to the bathroom whilst awaiting collection, they should use a separate bathroom which should then be cleaned and disinfected before being used by anyone else. • As is usual practice, in an emergency, 999 will be called if the person is seriously ill, injured or their life is at risk. • Members of staff who have provided close contact care to someone with symptoms, even while wearing PPE, and all other members of staff or pupils who have been in close contact with the person with symptoms do not need to go home to self-isolate unless they develop symptoms themselves (in which case, they should arrange to have a PCR test); or if they are requested to do so by NHS Test and Trace. • Any members of staff helping the symptomatic person, or people in close contact with the symptomatic person, must wash their hands thoroughly and the area around the person with symptoms must be cleaned thoroughly after they have left to avoid passing any possible infection on to others.
<p>Cleaning after a suspected case of coronavirus</p>	<ul style="list-style-type: none"> • Where there is a case of suspected coronavirus, the areas will be cleaned with disinfectant, following the government guidance provided in 'cleaning in non-healthcare settings'. • Disposable gloves and aprons will be worn. • All surfaces that the symptomatic person has come into contact with must be cleaned and disinfected. • Hard surfaces are cleaned with warm soapy water using a disposable cloth and then disinfected with normal cleaning products. Floors are cleaned with disposable mop heads. • Particular attention is paid to all frequently touched areas and surfaces such as bathrooms, door handles etc. • Once cleaning is finished, all waste including the apron and gloves, is removed, placed into waste bags which are tied and then placed inside another waste bag which is tied before being stored securely for 72 hours in a designated area which is not currently in use, then thrown away. • If an area has been heavily contaminated, such as with visible bodily fluids from a person with coronavirus, goggles and a face mask to protect the cleaner's eyes, mouth and nose, will also be worn. • Hands will be washed regularly with soap and water for 20 seconds, and after removing gloves, aprons and other protection. • Any laundry should be machine washed following the manufacturer's instructions, on the warmest water setting. Items should be dried completely.
<p>Testing positive with an asymptomatic test</p>	<ul style="list-style-type: none"> • If an individual has a positive asymptomatic Lateral Flow Device (LFD) test result, they should self-isolate straight away, stay at home and book a confirmatory PCR test. https://www.gov.uk/get-coronavirus-test. • It is important to book the confirmatory PCR test as soon as possible after the positive LFD test result. • Whilst awaiting the PCR test result, the individual should continue to self-isolate.

	<ul style="list-style-type: none"> • If a negative follow-up PCR test result is received, and this PCR test was taken within 2 days of the positive LFD test, you and your household will be told by NHS Test and Trace that you can stop self-isolating. • You and your household must continue to self-isolate if: <ul style="list-style-type: none"> ○ the PCR test result is positive ○ you choose not to take a follow-up PCR test ○ your follow-up PCR test was taken more than 2 days after the positive LFD test result
Testing negative with a PCR test	<ul style="list-style-type: none"> • If the PCR test result is negative, the individual can stop isolating as long as: <ul style="list-style-type: none"> ○ They are well and have not had diarrhoea or vomiting for at least 2 days ○ no one else in the household has symptoms ○ no one else in the household has tested positive for Covid-19 ○ they have not been advised by NHS Test and Trace that they are legally required to self-isolate. • Anyone in your household who is isolating because of your symptoms can also stop isolating. • If the PCR test result is negative but the individual still has symptoms, they may have another viral illness such as a cold, flu or a stomach bug. They should stay at home until they feel well and for at least 2 days if they have had diarrhoea or vomiting.
Testing positive with a PCR test	<ul style="list-style-type: none"> • If an individual is notified by NHS Test and Trace that they have a positive test result they must complete their full isolation period. • The isolation period starts immediately from when the symptoms started, or, if the individual does not have any symptoms, from when the test was taken. The isolation period includes the day the symptoms started (or the day the test was taken if the individual does not have symptoms), and the next 10 full days. This means that if, for example, symptoms started at any time on the 15th of the month (or if the individual did not have symptoms but their first positive Covid-19 test was taken on the 15th), the isolation period ends at 23:59hrs on the 25th. • The individual can stop self-isolating after 10 full days if your symptoms have gone, or if the only symptoms you have are a cough or anosmia, which can last for several weeks. If you still have a high temperature after 10 days or are otherwise unwell, stay at home and seek medical advice. • If an individual is isolating because of a positive test result but did not have any symptoms, and they develop Covid-19 symptoms within their isolation period, they must start a new 10 day isolation period by counting 10 full days from the day following the onset of symptoms. • If the individual develops Covid-19 symptoms at any point after ending their first period of isolation, they should follow the steps in this guidance again. • Where we are informed of a positive PCR test result, we will inform staff and parents, without identifying any individuals. This is important so that each employee, student and their family are aware of the local risks.

- Anyone who has previously received a positive Covid-19 PCR test result should not be re-tested within 90 days of that test, unless they develop any new symptoms of Covid-19.
- If, however, you do have an LFD antigen test within 90 days of a previous positive Covid-19 PCR test, for example as part of a workplace or community testing programme, and the result of this test is positive, you and your household should self-isolate and follow the steps in this guidance again.
- If it is more than 90 days since you tested positive by PCR for Covid-19, and you have new symptoms of Covid-19, or a positive LFD antigen or PCR test, follow the steps in this guidance again.

Protecting other members of your household whilst you are isolating.

- Whilst isolating, those who have tested positive should stay as far away from other members of their household as possible, especially if they are clinically extremely vulnerable.
- Wherever possible, avoid using shared spaces such as kitchens and other living areas while others are present and take meals back to your room to eat.
- Wear a face covering or a surgical mask when spending time in shared areas inside your home.
- Take exercise within your home, garden or private outdoor space.
- Use a separate bathroom from the rest of the household where possible. If a separate bathroom is not available, try and use the facilities last, before cleaning the bathroom using your usual cleaning products. The bathroom should be cleaned regularly.
- Use the [GermDefence](#) website to help identify ways to protect yourself and others in your household from Covid-19, it provides scientifically proven advice on reducing the risks from Covid-19 and other viruses in your home.
- Regularly clean frequently touched surfaces, such as door handles and remote controls, and shared areas such as kitchens and bathrooms.
- Use standard household cleaning products like detergents and bleach to clean your home as these are very effective at getting rid of the virus on surfaces.
- Cleaning cloths and personal waste such as used tissues and disposable face coverings should be stored in disposable rubbish bags. These bags should be placed into another bag, tied securely and put aside for at least 72 hours before being put in your usual external household waste bin. Other household waste can be disposed of as normal.
- If possible, use a dishwasher to clean and dry your crockery and cutlery. If this is not possible, wash them by hand using washing up liquid and warm water and dry thoroughly using a separate tea towel.
- To reduce the possibility of spreading the virus through the air, do not shake dirty laundry. Wash items in accordance with the manufacturer's instructions. All dirty laundry can be washed in the same load. If you do not have a washing machine, wait a further 72 hours after your self-isolation has ended when you can then take the laundry to a public launderette.
- Do not share towels, including hand towels and tea towels.
- Keep indoor areas well-ventilated with fresh air, especially shared living areas, by opening windows as much as possible, opening doors, making sure that any vents are open and airflow is not blocked, leave extractor fans (for example in bathrooms) running for longer than usual with the door closed after use.

- Covid-19 in the UK is spread between humans. There is limited evidence that some animals, including pets, can become infected with SARS-CoV-2 (the virus that causes Covid-19) following close contact with infected humans. Pet owners who have Covid-19 or who are self-isolating with symptoms should restrict contact with pets and wash their hands thoroughly before and after interacting with their pet.
- Do not invite or allow visitors to enter your home
- If you or a family member receive essential care in your home, carers should continue to visit and follow the [provision of home care guidance](#) to reduce the risk of infection.
- All non-essential in-house services and repairs should be postponed until the self-isolation period is completed. Delivery drivers should not come into your home, ask them to leave items outside for collection.

Close contacts of positive cases

- As of 18th July 2021, education settings are no longer responsible for Test and Trace close contact tracing. This will now be carried out by the NHS Test and Trace service, who will inform staff and pupils if they have been in close contact with a positive case and advise them to take a confirmatory polymerase chain reaction (PCR) test. In exceptional cases, schools may be contacted to help with identifying close contacts, but this will not be regular practice.
- Staff should nevertheless be mindful of who they and the child in their care have been in contact with so that they are able to identify their close contacts if needed.
- NHS Test and Trace will work with the person who has tested positive and/or their parent to identify close contacts. Contacts from a school setting will only be traced by NHS Test and Trace where the positive case and/or their parent 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.
- From 16th August 2021, close contacts of someone who has tested positive for Covid-19 are not required to self-isolate as long as:
 - *you are fully vaccinated*
 - *you are below the age of 18 years 6 months*
 - *you have taken part in or are currently part of an approved Covid-19 vaccine trial*
 - *you are not able to get vaccinated for medical reasons*
- Fully vaccinated means that you have been vaccinated with an MHRA approved Covid-19 vaccine in the UK, and at least 14 days have passed since you received the recommended doses of that vaccine.
- NHS Test and Trace will contact you to let you know that you have been identified as a contact and check whether you are legally required to self-isolate. If you are not legally required to self-isolate, you will be provided with advice on testing and given guidance on preventing the spread of Covid-19.
- Even if you do not have symptoms, you will be advised to have a PCR test as soon as possible.
- Children who are aged under 5 years old who are identified as close contacts will only be advised to take a PCR test if the positive case is in their own household.

	<ul style="list-style-type: none"> ● As well as getting a PCR test, you should consider: <ul style="list-style-type: none"> ○ limiting close contact with other people outside your household, especially in enclosed spaces ○ wearing a face covering in enclosed spaces and where you are unable to maintain social distancing ○ limiting contact with anyone who is clinically extremely vulnerable ○ taking part in twice weekly LFD testing ● Children and young people aged under 18 years 6 months who usually attend an education or childcare setting and who have been identified as a close contact should continue to attend the setting as normal. They do not need to wear a face covering within the setting, but it is expected and recommended that these are worn when travelling on public or dedicated transport. ● If a close contact develops symptoms at any time, even if these are mild, they should self-isolate immediately and arrange to have a PCR test. ● Parents are encouraged to let school / nursery know in advance if their child is planning to attend when a household member has tested positive ● If the bullet points in italics above do not apply to you, and you have been informed by NHS Test and Trace that you are a contact of a person who has had a positive test result for Covid-19, you must stay at home and self-isolate. ● If you have only received one dose of Covid-19 vaccine, you will still be required to self-isolate. ● Your isolation period includes the date of your last contact with the person who had a positive test result for Covid-19 and the next 10 full days. This means that if, for example, your last contact with them was at any time on the 15th of the month, your isolation period ends at 23:59 on the 25th. ● Testing PCR negative does not currently release a close contact from their isolation (unless they are exempt).
Health and wellbeing	<ul style="list-style-type: none"> ● <u>Every Mind Matters</u> provides simple tips and advice to take care of your mental health, including a Covid-19 hub with advice for those staying at home. ● If you need help for a mental health crisis, emergency or breakdown, seek immediate advice and assessment. Urgent mental health support is available to adults and children around the clock. Find your <u>local NHS helpline</u> by searching for your postcode or home town in a new service finder.
Notification guidance for Early Years settings	<ul style="list-style-type: none"> ● In accordance with paragraph 3.51 of the EYFS, we will notify Ofsted of any confirmed cases in the setting, whether a child or a staff member, and if we need to close the setting as a result. . Report as soon as you are able to, and in any case within 14 days. https://www.gov.uk/guidance/tell-ofsted-if-you-have-a-covid-19-incident-at-your-childcare-business

<p>Side effects of children receiving a routine vaccination or teething.</p>	<ul style="list-style-type: none"> • Vaccines may cause mild fever in children. This is a common and expected reaction, and isolation is not required unless coronavirus (Covid-19) is suspected. • Whilst teething can cause some known side effects such as flushed cheeks and sore gums, NHS guidelines 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 coronavirus (Covid-19) is suspected, the child should start isolating and get tested.
<p>Remote learning offer</p>	<ul style="list-style-type: none"> • As not all people with Covid-19 have symptoms, we will continue to 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. • Where pupils are required to remain at home, and are well enough to continue their learning, we will offer remote education. • We will endeavour to select high quality online and offline materials and teaching videos linked as closely as possible to the school’s curriculum. The Oak National Academy resources will be utilised where appropriate. • Contact can be maintained between families and their child’s class teacher via the dedicated class email address. • In the Nursery, contact will be maintained between families and their child’s key person via Family. • The Hungry Little Minds campaign features tips, practical activities that parents can do at home with children to support their early learning. Tiny Happy People, Words for Life and the National Literacy Trust’s Family Zone also provide a range of ideas and content. • Where individuals who are self-isolating and are within our definition of vulnerable, we will ensure contact is maintained, offering pastoral support as needed, and checking they are able to access education support.
<p>Clinically vulnerable</p>	<p>Clinically vulnerable people are those who are:</p> <ul style="list-style-type: none"> ○ aged 60 or over (regardless of medical conditions) ○ under 60 with an underlying health condition listed below (that is, anyone instructed to get a flu jab each year on medical grounds): ○ chronic (long-term) mild to moderate respiratory diseases, such as asthma, chronic obstructive pulmonary disease (COPD), emphysema or bronchitis ○ chronic heart disease, such as heart failure ○ chronic kidney disease ○ chronic liver disease, such as hepatitis ○ chronic neurological conditions, such as Parkinson’s disease, motor neurone disease, multiple sclerosis (MS) or cerebral palsy ○ diabetes

	<ul style="list-style-type: none"> ○ a weakened immune system as the result of certain conditions or medicines they are taking (such as steroid tablets) ○ being seriously overweight (a body mass index (BMI) of 40 or above) ○ pregnant <p>Clinically vulnerable staff can continue to attend school. While in school they should follow the measures in this document to minimise the risks of transmission. This includes taking particular care to observe good hand and respiratory hygiene, minimising contact and maintaining social distancing.</p>
Clinically Extremely Vulnerable	<ul style="list-style-type: none"> ● The government advises that all clinically extremely vulnerable (CEV) children 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. ● 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 including maximising distance between themselves and others, ensuring adequate ventilation, good hygiene and cleaning. ● All members of staff are asked to take twice weekly LFD testing to help protect Clinically Extremely Vulnerable members of the school/nursery community. ● Staff who are Clinically Extremely Vulnerable are advised to have individual discussions with their line managers around risk management measures.
Self-isolating as part of quarantine	<ul style="list-style-type: none"> ● As usual, parents should plan their holidays within school breaks and avoid seeking permission to take their children out of school during term time. Families should also consider that their child may need to self-isolate following trips overseas that require a period of quarantine.
Health and Safety	<ul style="list-style-type: none"> ● Where contractors are on site, they work within the guidance provided by their employer and do not come into contact with the children. ● Fire doors will not be propped open; however final exit doors out of a classroom etc. can be left open to increase ventilation providing this does not pose a safeguarding risk.
First Aid	<ul style="list-style-type: none"> ● Seventeen members of staff are paediatric first aid trained ● Four members of staff are First Aid at Work trained and are on site. ● All first aid kits are regularly checked to ensure they are fully stocked and in date. ● When delivering first aid, staff are able to use disposable aprons, gloves, a face mask and goggles, as appropriate to the first aid need being addressed.

- Where it is necessary for first aid provision to be administered in close proximity, those administering it should pay particular attention to sanitation measures immediately afterwards including washing hands.

CPR advice

CPR Advice from HSE and Resuscitation Council UK:

Whenever CPR is carried out, particularly on an unknown victim, there is some risk of cross infection, associated particularly with giving rescue breaths. Normally, this risk is very small and is set against the inevitability that a person in cardiac arrest will die if no assistance is given. Because of the heightened awareness of the possibility that the victim may have Covid-19, Resuscitation Council UK offers this advice:

- Shout for help and dial 999.
- Recognise cardiac arrest by looking for the absence of signs of life and the absence of normal breathing. Do not listen or feel for breathing by placing your ear and cheek close to the patient’s mouth. If you are in any doubt about confirming cardiac arrest, the default position is to start chest compressions until help arrives.
- Make sure an ambulance is on its way. If Covid-19 is suspected, tell them when you call 999.
- If there is a perceived risk of infection, rescuers should place a cloth/towel over the victim’s mouth and nose and attempt compression only CPR and early defibrillation until the ambulance arrives. Put hands together in the middle of the chest and push hard and fast.
- Early use of a defibrillator significantly increases the person’s chances of survival and does not increase risk of infection.
- If the rescuer has access to any form of personal protective equipment (PPE) this should be worn.
- If available, use:
 - a fluid-repellent surgical mask
 - disposable gloves
 - eye protection
 - apron or other suitable covering
- After performing compression-only CPR, all rescuers should wash their hands thoroughly with soap and water; alcohol-based hand gel is a convenient alternative. They should also seek advice from the NHS 111 coronavirus advice service or medical adviser.

Paediatric CPR advice from Resuscitation Council UK:

- We are aware that paediatric cardiac arrest is unlikely to be caused by a cardiac problem and is more likely to be a respiratory one, making ventilations crucial to the child’s chances of survival. However, for those not trained in paediatric resuscitation, the most important thing is to act quickly to ensure the child gets the treatment they need in the critical situation.
- For out-of-hospital cardiac arrest, the importance of calling an ambulance and taking immediate action cannot be stressed highly enough. If a child is not breathing normally and no actions are taken, their heart will stop and full cardiac arrest will occur.
- Therefore, if there is any doubt about what to do, this statement should be used.
It is likely that the child/infant having an out-of-hospital cardiac arrest will be known to you. We accept that doing rescue breaths

	will increase the risk of transmitting the Covid-19 virus, either to the rescuer or the child/infant. However, this risk is small compared to the risk of taking no action as this will result in certain cardiac arrest and the death of the child.
Safeguarding	<ul style="list-style-type: none"> • Designated Safeguarding Leads are on site. • Safeguarding training is up to date • Any safeguarding concerns will be raised following the school’s usual safeguarding and child protection policy and procedures. • School / Nursery continue to work with local authorities to monitor the welfare of: <ul style="list-style-type: none"> ○ vulnerable children who are not attending provision ○ other children they might wish to keep in touch with, for safeguarding purposes
Advice and support	<ul style="list-style-type: none"> • Where required, advice for the education sector will be obtained from the Department for Education’s Coronavirus (Covid-19) helpline on 0800 046 8687 (open Monday to Friday from 8am to 6pm, Saturday and Sunday from 10am to 6pm) • The Mindline Mental Health Helpline is available 24/7 on 01823 276892 • The Education Support Partnership provides a free helpline for school staff and targeted support for mental health and wellbeing.

Outbreak Management Plan

Schools and Nurseries continue to have a role in working with health protection teams in the case of a local outbreak. If there is a substantial increase in the number of positive cases 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.

Schools / Nurseries are advised to have contingency plans (sometimes called outbreak management plans) outlining how we will operate if we were advised to take extra measures to help break chains of transmission.

In addition to the steps in the above return strategy and risk assessment, additional ‘outbreak control measures’ may be considered as follows:

Minimising contacts - Organisation	<p>In some local areas it may become necessary to reintroduce ‘bubbles’ for a temporary period, to reduce mixing between groups. The government recognises that ‘early years and primary aged children cannot be expected to remain 2 metres apart from each other and staff’ ‘wherever possible, should mix only in a small consistent group (a ‘bubble’) and not mix with other groups’, ‘younger children will not be able to maintain social distancing, and it is acceptable for them not to distance within their group’.</p> <p>Where it is necessary to reintroduce bubbles, in order to reduce the number of contacts and optimise protective measures:</p> <ul style="list-style-type: none"> ○ The children will remain in consistent class-sized ‘bubbles’ (Nursery, Reception, Year 1, Year2, Year 3/4)
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	<ul style="list-style-type: none"> ○ Interactions with other bubbles will be avoided ○ Wherever possible distance between individuals will be encouraged so far as is reasonably practicable ○ The sharing of rooms and social spaces will be avoided ○ Each bubble has its own toileting and hand washing facilities ○ The number of children using the bubble's toilet facilities at any one time will be restricted, where possible. ○ Movement around the school site will be restricted to the bubble classroom and corresponding toilet and outdoor spaces. ○ Bubbles will have PE lessons on different days ○ Large-scale gatherings such as assemblies will not take place. Assemblies will be delivered in the allocated classroom spaces.
Minimising contacts – Staff interactions	<ul style="list-style-type: none"> ● Staff are able to operate across different classes in order to facilitate the delivery of the school timetable. Where staff need to move between classes, they should try to keep their distance from pupils and other staff as much as possible when circumstances allow. ● Staff should maximise the distance between each other during interactions and breaks
Minimising contacts – Supply teachers	<ul style="list-style-type: none"> ● Supply teachers and other temporary staff are able to move between schools. ● Every effort will be made to ensure a consistent adult is available for the period of absence ● The coronavirus return strategy and risk assessments will be shared with the supply teacher upon arrival ● Supply teachers will minimise contact and maintain as much distance as possible from other staff and children.
Minimising contacts – Visitors	<ul style="list-style-type: none"> ● In the event of an outbreak, meetings will take place virtually wherever possible ● If a meeting on-site is essential, then it will occur outside or in a room that exceeds minimum social distances. ● External visitors to the site will be limited. ● Where visitors need to attend in person, the number of attendances will be kept to a minimum. ● Where external visitors are on site, contact with children will be restricted unless absolutely necessary (for example, a social worker visit, clinical therapy session etc.). ● All visitors will be asked to follow the protective measures in place in the school/nursery, and these will be explained when arranging the visit and upon arrival. ● Social distancing will be maintained, except in circumstances where closer contact is essential e.g. therapy ● Parents should come into the school building only when absolutely necessary.
Close contacts	<ul style="list-style-type: none"> ● In the event of an outbreak, the school /nursery will follow advice from the local health protection team, which may include requiring more people to self-isolate. School / Nursery attendance should continue as normal unless advised otherwise.

<p>Planning for possibility of local or national lockdown</p>	<ul style="list-style-type: none"> • In the event of a local outbreak, the PHE health protection team or local authority may advise a school or number of schools to close temporarily to help control transmission. In this eventuality, we will follow the advice provided, this may involve returning to remaining open only for vulnerable children and the children of critical workers, and providing remote education for all other pupils. Remote education will be provided for those not attending school.
<p>New admissions to nursery and school</p>	<ul style="list-style-type: none"> • In the event of an outbreak, for new admissions, virtual tours for prospective parents and carers will be available. • Where parents and carers are keen to visit in person, and health advice allows us to do so, the following steps will be taken: <ul style="list-style-type: none"> - face coverings will be worn (unless exempt) - regular handwashing will take place, especially before and after the visit - visits will take place after normal operating hours wherever possible. Where this is not possible, visits will take place visiting limited areas ensuring social distancing is observed • Prior to a visit, all parents and carers will be made aware of the system of controls and their responsibilities during their visit
<p>Starting Nursery</p>	<ul style="list-style-type: none"> • When joining Nerrols Nursery we recognise there may be the need for parents and carers to enter the nursery to help their child adapt to their new environment. • In the event of an outbreak, parents and carers must: <ul style="list-style-type: none"> - Wear face coverings (unless exempt) - Stay for a limited amount of time (no longer than an hour) - Avoid close contact with other children <p>Follow the system of controls outlined in this strategy document which will be shared verbally with them in discussion with the Nursery Manager / Deputy Nursery Manager.</p>
<p>Face coverings</p>	<ul style="list-style-type: none"> • In the event of a substantial increase in the number of positive cases in school / nursery, a director of public health might advise that face coverings should temporarily be worn in communal areas or classrooms by staff and visitors, unless exempt. • Some individuals are exempt from wearing face coverings. This applies to those who: <ul style="list-style-type: none"> ○ cannot put on, wear or remove a face covering because of a physical or mental illness or impairment or disability ○ speak to or provide assistance to someone who relies on lip reading, clear sound or facial expression to communicate <p>The same exemptions will apply in school/nursery, and we would expect teachers and other staff to be sensitive to those needs.</p> <ul style="list-style-type: none"> • In the event of an outbreak, we will advise that face coverings should be worn by staff and adult visitors in situations where social distancing between adults is not possible (for example, when moving around in corridors and communal areas). • Visitors will be asked to wear face coverings and staff may wear face coverings. • Parents, carers and visitors are asked to wear face covering in the school grounds

	<ul style="list-style-type: none"> • 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. • Face coverings (whether transparent or cloth) should fit securely around the face to cover the nose and mouth and be made with a breathable material capable of filtering airborne particles. • Face visors or shields can be worn by those exempt from wearing a face covering but the government does not consider these an equivalent alternative in terms of source control of virus transmission and 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. • Those who communicate with or provide support to those who rely on visual signals for communication, are exempt from any recommendation to wear face coverings in education and childcare settings.
Remote learning	<ul style="list-style-type: none"> • If restrictions to on-site education are required, the school will offer immediate access to high-quality remote education for all pupils who are required to remain at home. All remote learning will be delivered in line with the school's Remote Education Policy.
PE / sport	<ul style="list-style-type: none"> • PE / sports lessons will take place in class bubbles. • Sports equipment will thoroughly cleaned between each use by different individual groups, • Contact sports will be avoided. • Outdoor sports will be prioritised where possible, and large indoor spaces will be used where it is not, maximising natural ventilation flows (through opening windows and doors), distancing between pupils and paying scrupulous attention to cleaning and hygiene.
Music and singing	<ul style="list-style-type: none"> • Music and singing lessons will take place in bubble groups. • In order to mitigate the potential aggregate risk of aerosol transmission, when children are singing: <ul style="list-style-type: none"> ○ Social distancing will be observed ○ Back-to-back or side-to-side positioning (rather than face-to-face) will be used whenever possible ○ Singing quietly will be encouraged to reduce aerosol ○ Outdoor spaces will be used where possible ○ Where indoor spaces are used, ventilation is increased by opening doors and windows and using larger rooms ○ Instruments will not be shared ○ Instruments and equipment must be cleaned and disinfected after use. ○ Wind and brass instruments will not be used. ○ Staff and pupils will wash their hands before and after handling equipment.

Resources	<ul style="list-style-type: none"> • Classroom based resources, can be used and shared within the bubble • These will be cleaned regularly, along with all frequently touched surfaces • Sharing of resources between bubbles will be avoided. Where resources are shared between bubbles, these will be cleaned meticulously and always between bubbles, or rotated to allow them to be out of use for a period of 48 hours (72 hours for plastics) between use by different bubbles. • Children and staff will wash their hands frequently, particularly after using bikes, trikes and scooters, or when moving between areas. • Playdoh and similar malleable materials will not be shared, individual pots will be used.
Seeking public health advice	<ul style="list-style-type: none"> • The school / Nursery will seek additional public health advice if there is concern regarding transmission in the school, by phoning the DfE helpline on 0800 046 8687. • The following thresholds (given by South West Health Protection Team) will be used as the escalation threshold to DfE or via local process: <ul style="list-style-type: none"> ○ 5 children or staff, who are likely to have mixed closely, test positive for Covid-19 within a 10 day period. ○ 10% of children or staff who are likely to have mixed closely test positive for Covid-19 within a 10 day period. ○ There are any admissions to hospital for Covid-19 <p>If needed, the South West Health Protection team contact details are: swhpt@phe.gov.uk 0300 3030 8162</p>

Initial assessment completed by:	Rhian Locker and Andrea Bolton	Date: 31 Aug 2020	
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			Comments:
Reviewed by:	Rhian Locker and Andrea Bolton	Date: 28 Sep 2020	Updated information: New section: new admissions to nursery Change to wearing of face covering in the school grounds Change to include NHS Business Services Authority New section: Introduction of NHS Test and Trace app Change to opening hours of DfE Covid-19 helpline
	Rhian Locker	31 Oct 2020	Updated information: Ventilation Exception to returning following a negative test Change to opening hours of DfE Covid-19 helpline

			Update to Clinically Vulnerable and Clinically Extremely Vulnerable
	Rhian Locker	15 Dec 2020	Updated information: Change to isolation period
	Rhian Locker	07 Jan 2021	Updated information: Changes to provision following national lockdown Attendance for vulnerable children and children of key workers Addition of attendance codes Addition of alternative provision Change to meal providers and supporting serving of meals Update to wrap around care provision Update to Clinically Extremely Vulnerable and Clinically Vulnerable.
	Rhian Locker	22 Feb 2021	Update to clarify household members include support and childcare bubble members also. Attendance updated to reflect mandatory school attendance from 8 th March 2021. Change to meal provision Clarify procedures for new admissions Update to wrap around care provision Update to face coverings Update to contacting local health protection team Addition of symptomatic testing when asymptomatic testing Addition of side effects of children receiving a routine vaccination or teething. Update - CEV advice extended to 31 March.
	Rhian Locker	31 Aug 2021	Full review following lifting of Covid-19 restrictions