



Department
for Education

Higher education COVID-19 operational guidance

January 2022

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Introduction

The government continues to manage the risk of serious illness from the spread of the virus. The Prime Minister announced on 19 January that the temporary introduction of Plan B is to end. As a result, the Plan B measures in this guidance for higher education (HE) providers are being removed. This advice remains subject to change as the situation develops.

With the removal of the Plan B measures, HE providers should note that there are no COVID restrictions that apply to Higher Education and they should ensure that they deliver face-to-face teaching without restrictions. Risk assessments by HE providers should take account of the approach to managing the virus in wider society, particularly that restrictions have been removed and the vaccine programme continues to be rolled out. Risk assessments should never be used to prevent providers delivering the full programme of face-to-face teaching and learning that they were providing before the pandemic.

In line with all other settings, HE providers should continue to conduct risk assessments for their particular circumstances. They should implement sensible and proportionate control measures which follow the health and safety hierarchy of controls to reduce the risk to the lowest reasonably practicable level. HE providers should have contingency plans to deal with any identified positive cases of COVID-19 or outbreaks.

As set out in the Autumn/Winter plan, the government will continue to remain vigilant and take action where necessary to support and protect the NHS.

This guidance does not apply to further education (FE) providers who offer HE qualifications. FE providers should follow [FE guidance](#) for these students.

Guidance setting out [expectations in maintaining quality and standards](#) is available from the Office for Students (OfS), the HE regulator in England.

The Quality Assurance Agency for Higher Education (QAA) has a series of [resources to support HE providers](#).

Changes to the previous version

Changes to the guidance since its 05 January 2022 publication include:

- update to face coverings section to reflect removal of recommendation to wear face coverings in teaching settings and communal areas
- update to mandatory certification section to reflect that will no longer be in place from 27 January
- update to workforce section to reflect that government is no longer advising people to work from home if they can

Principles for higher education provision

As HE providers are autonomous institutions, they should identify and put in place appropriate plans, in line with this guidance and any other relevant government guidance, based on their individual circumstances.

In accordance with the [OfS guidance](#), providers should communicate clearly to their students on what they can expect from planned teaching and learning. This should include different scenarios; one based on the current circumstances, and one based on changes that would be made in response to changing health advice, so that they are able to make informed choices. It is important that obligations under consumer protection law continue to be met, including in relation to information provision, terms and conditions, and complaints handling.

This guidance is designed to help HE providers in England to plan effectively to offer students a full, enriching and enjoyable experience, while staying as safe as possible.

We expect providers to consider and comply with their legal responsibilities. These include:

- Health and Safety at Work etc Act 1974
- Equality Act 2010

Minimising COVID-19 risks

Risk assessments

As employers, HE providers have a legal responsibility to protect workers and others from risk to their health and safety, including from the risks of COVID-19. They should complete a suitable and sufficient assessment of the risks of COVID-19 in the workplace and identify control measures to manage that risk, based on relevant government guidance and best practice. Employers have a duty to consult their employees on health and safety matters. HE providers should continually check, revise and update their risk assessments, especially when there is new advice and guidance.

Employers' health and safety obligations

Employers should continue to assess and update health and safety risks in the usual way, especially in the light of any changing circumstances.

The Health and Safety Executive have [guidance on first aid during COVID-19](#) which:

- supports local risk assessments
- provides guidance for first aiders

HE workforce

HE settings are best placed to determine the workforce they require and their deployment. The government is no longer advising people to work from home if they can.

Following expert clinical advice and the successful rollout of the COVID-19 vaccine programme, people previously considered to be particularly vulnerable, clinically extremely vulnerable (CEV), and high or higher-risk are not being advised to shield again. Anyone previously identified as being in one of these groups is advised to continue to follow the guidance contained in Coronavirus: how to stay safe and help prevent the spread.

In some circumstances, staff may have received personal advice from their specialist or clinician on additional precautions to take and they should continue to follow that advice. Whilst individual risk assessments are not required, employers are expected to discuss any concerns that people previously considered CEV may have.

Employers will need to follow this specific [guidance for pregnant employees](#). [COVID-19 vaccination: a guide for women of childbearing age, pregnant or breastfeeding](#) contains further advice on vaccination. Workplace risk assessments should already consider any

risks to female employees of childbearing age and, in particular, risks to new and expectant mothers.

Employers should be able to explain the measures they have in place to keep staff safe at work. The Health and Safety Executive (HSE) has published guidance on [protecting vulnerable workers](#), including advice for employers and employees on [how to talk about reducing risks in the workplace](#). Employers should discuss concerns with staff.

Guidance for buildings and campuses

HE providers should continue to make efforts to reduce the risk of transmission where appropriate. They should not put in place measures which limit the teaching and learning outcome for students, or significantly limit the wider activities offered by the HE provider. Providers should follow guidance on [working safely during the COVID-19 outbreak](#) where it is applicable to their facilities.

Graduation ceremonies

Graduation ceremonies may go ahead, though it is important to minimise the risk of transmission through large numbers of people mixing socially, over relatively long periods of time, at such events. HE providers should conduct risk assessments and consider adopting mitigations. The guidance on working safely during coronavirus for events and attractions contains useful advice on factors to consider when planning a large event like a graduation ceremony.

Contact tracing

HE providers should support NHS Test and Trace and ensure that students, staff and other visitors know how the contact tracing process works. The [NHS COVID-19 app](#) allows users to check-in to venues by scanning a QR code, which enables NHS Test and Trace to send notifications. We expect this to be applicable to HE providers' facilities and in teaching settings.

To minimise transmission of COVID-19, it is vital that as many contacts as possible are identified and advised to take action as appropriate in accordance with government guidance. HE providers should follow the government's [working safely guidance](#), and may be contacted by NHS Test and Trace to help with identifying close contacts, as currently happens in managing other infectious diseases. Settings will continue to have a role in working with health protection teams in the case of a local outbreak.

For those who test positive or who have been identified as a contact by NHS Test and Trace, further information is available in the guidance [NHS Test and Trace: how it works](#). This sets out what individuals should do if they test positive or if they are a contact of

someone who has tested positive, and how NHS Test and Trace will work with them to stop the spread of the virus.

Face coverings

From 20 January, face coverings are no longer advised for students, staff and visitors in teaching settings. From 27 January, face coverings are no longer advised for students, staff and visitors in communal areas. Though no longer recommended, HE providers may still choose to use them voluntarily.

From 27 January, staff and students should follow [wider advice](#) on face coverings outside of higher education settings, including when travelling to and from their HE provider.

In circumstances where face coverings are recommended

A director of public health might advise you that face coverings should temporarily be worn in communal areas or teaching settings (by students, staff and visitors, unless exempt). You should make sure your contingency plans cover this possibility.

In these circumstances, transparent face coverings, which may assist communication with someone who relies on lip reading, clear sound or facial expression to communicate, can also be worn. Transparent face coverings may be effective in reducing the spread of COVID-19. However, the evidence to support this is currently very limited. 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.

The main benefit from a transparent face covering is that they can aid communication, for example enabling lip-reading or allowing for the full visibility of facial expressions, but this should be considered alongside the comfort and breathability of a face covering that contains plastic, which may mean that the face covering is less breathable than layers of cloth.

Face visors or shields can be worn by those exempt from wearing a face covering but they are not an equivalent alternative in terms of source control of virus transmission. They may protect the wearer against droplet spread in specific circumstances but are unlikely to be effective in preventing the escape of smaller respiratory particles when used without an additional face covering. They should only be used after carrying out a risk assessment for the specific situation and should always be cleaned appropriately.

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

those who do, are exempt from any recommendation to wear face coverings in education and childcare settings.

HE providers, as employers, have a duty to comply with the Equality Act 2010 which includes making reasonable adjustments for disabled staff. They also have a duty to make reasonable adjustments for disabled students, to support them to access education successfully.

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

Cleaning

HE providers should put in place and maintain an appropriate cleaning schedule. This should include regular cleaning of areas and equipment (e.g., twice per day), with a particular focus on frequently touched surfaces. It will not generally be necessary to clean areas and equipment between use by different groups throughout the day and the sharing of equipment should be permitted.

Guidance has been published on the [cleaning of non-healthcare settings](#). This contains advice on the cleaning required when there is a suspected case of COVID-19.

Keeping occupied spaces well ventilated

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

HE providers should identify any poorly ventilated spaces as part of their risk assessment and take steps to improve fresh air flow in these areas, giving particular consideration when holding events where large numbers of visitors are on site.

These can be achieved by a variety of measures, set out below.

Mechanical ventilation is a system that uses a fan to draw fresh air, or extract air from a room. These should be adjusted to increase the ventilation rate wherever possible and checked to confirm that normal operation meets current guidance and that only fresh outside air is circulated.

If possible, systems should be adjusted to full fresh air or, if this is not possible, then systems should be operated as normal as long as they are within a single room and supplemented by an outdoor air supply.

Where mechanical ventilation systems exist, providers should ensure that they are maintained in accordance with the manufacturers' recommendations.

Opening external windows can improve natural ventilation, and in addition, opening internal doors can also assist with creating a throughput of air. If necessary external opening doors may also be used (if they are not fire doors and where safe to do so).

HE providers should balance the need for increased ventilation while maintaining a comfortable temperature.

The [Health and Safety Executive guidance on air conditioning and ventilation during the COVID-19 outbreak](#) and [Chartered Institute of Building Services Engineers COVID-19 advice](#) provides more information.

Additional measures

Providers should continue to identify and implement the range of measures required to comply with government guidance for safe workplaces, based on an assessment of the risks and requirements of each environment. Adhering to infection prevention measures will help stop the spread of COVID-19 and other respiratory illnesses, including influenza.

This could include (but is not limited to):

- minimising contact with any individuals who are required to self-isolate by ensuring they do not attend the HE provider's facilities
- ensuring everyone is advised to clean their hands thoroughly and more frequently
- ensuring good respiratory hygiene for everyone by promoting the 'catch it, bin it, kill it' approach
- utilising outdoor space.

Outbreak plans

HE providers should continue to have plans in place to respond in the event that there is an increase in the number of cases, or an outbreak associated with their setting, when they may have to adapt elements of their provision at very short notice. Providers should agree outbreak plans with their Director of Public Health and share their plan with DfE.

Their plans should identify proportionate actions to reduce transmission and should cover scenarios including:

- increased prevalence of infection locally that requires interventions in the whole community, including students and staff
- a large-scale outbreak that may impact on the activities of the university
- a localised outbreak in student accommodation
- a localised outbreak involving a particular student or staff member, faculty or department

Where restrictions are considered necessary, the default position is that HE providers will remain open, with non-educational facilities and activities reflecting wider restrictions in place locally. As a next step, and before advising limitations on attendance in education settings, they should work with Directors of Public Health locally to identify additional measures to put in place. For instance, by increasing testing, quickly identifying contacts within the HE provider's setting and providing appropriate support to those who are required to self-isolate.

If further limitations on attendance need to be made, attendance for in person teaching and learning should be prioritised for students and staff on those courses where it is most beneficial (for example, clinical or practical learning and research). HE providers should work with the Director of Public Health in their local authority to control and manage any outbreak, including agreeing which measures identified in the outbreaks planning should be implemented, based on an assessment of the risks. The [contingency framework](#) describes the principles of managing local outbreaks of COVID-19 in education and childcare settings.

HE providers should continually check, revise and update their outbreak plans, especially when there is new advice and guidance. Providers should share their plans with their staff.

Compliance with guidance

HE providers are responsible for ensuring that they are aware of any measures and guidance in place, including where these have been reimposed as part of local or national measures.

HE providers should consider incentives for compliance, and disincentives for non-compliance including, in serious cases, the use of disciplinary measures.

Communications with students and staff

HE providers should have communications strategies for students and staff, which will include principles such as:

- encourage students to take up the offer of both doses of the coronavirus vaccine, and the booster jab as soon as they are eligible
- encourage all students and staff to participate in the testing programme
- encourage students, including international students, to register with a GP local to their university as soon as possible after arriving
- do not assume that everyone understands any official guidelines
- ensure the rationale for behaviours and protective measures is understood
- encourage an atmosphere within their institution that supports actions people can take to keep themselves and others safe
- involve staff and students when creating communications
- maintain consistent messaging and guidance
- consider the range of cultural backgrounds when developing communications and plans

Universities UK have produced [Checklist: communications to prepare for the 2021/22 academic year](#).

Social contacts

There are no legal limits on social contacts in England.

Find out [how to stay safe and help prevent the spread of coronavirus](#).

Testing asymptomatic students and staff using lateral flow device tests (LFDs)

HE providers should strongly encourage all students and staff to participate in the testing programme.

Testing before travel

Students should take a test before they travel home for the Christmas break, using home test kits provided by their university, or at an on-site facility, where available.

Students should test before they travel back to their term time accommodation in January, using test kits issued by their university before the Christmas break, ordered online, or collected from their local pharmacy.

Regular testing

Students and staff should continue to test twice weekly at home with lateral flow device (LFD) test kits, 3-4 days apart.

It is very important that test results are reported [online to NHS Test and Trace](#) whether positive, negative or void. Reporting results helps the NHS monitor the spread of the virus, combat the virus and save lives.

Staff and students with a positive LFD test result should self-isolate in line with the [stay at home guidance for households with possible or confirmed coronavirus \(COVID-19\) infection](#). They should follow the [latest government guidance](#) on confirmatory PCR tests following a positive LFD test.

If students are on a placement and not attending university facilities, they should follow and participate in any testing regime in place at their placement.

Where students have a medical or other reason that prevents them from engaging in LFD testing, they should talk to their HE provider about alternatives.

Providers are strongly encouraged to ask visitors to take a LFD test before entering the setting.

Those identified as a close contact of a positive case

From 14 December 2021, adults who are fully vaccinated and all children and young people aged between 5 and 18 years and 6 months identified as a contact of someone with COVID-19 are strongly advised to take a LFD test every day for 7 days and continue

to attend their setting as normal, unless they have a positive test result. Daily testing of close contacts applies to all contacts who are:

- fully vaccinated adults – people who have had 2 doses of an approved vaccine
- all children and young people aged 5 to 18 years and 6 months, regardless of their vaccination status
- people who are not able to get vaccinated for medical reasons
- people taking part, or have taken part, in an approved clinical trial for a COVID-19 vaccine

Children under 5 years who are identified as close contacts are exempt from self-isolation and do not need to take part in daily testing of close contacts. They are advised to take a PCR test if the positive case is in their household.

Further information is available in [NHS Test and Trace: what to do if you are contacted](#) and in the [stay at home: guidance for households with possible or confirmed coronavirus \(COVID-19\) infection](#).

18-year-olds are treated in the same way as children until 6 months after their 18th birthday, to allow them the opportunity to get fully vaccinated. At which point, they will be subject to the same rules as adults and so if they choose not to get vaccinated, they will need to self-isolate if identified as a close contact.

Settings will 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.

Supporting students who need to self-isolate

Some students may be eligible for a one-off payment of £500 through the [NHS Test and Trace Support Payment scheme](#), if they are required to self-isolate.

For those students who do need to self-isolate at university, HE providers should take steps to ensure their students are safe and well looked after during their self-isolation period.

Universities UK have also produced a [checklist for providers to support students who are required to self-isolate](#). We encourage providers to review this guidance when considering how best to support their students during self-isolation.

The OfS has published a [statement on support for students in self-isolation during the COVID-19 pandemic](#).

COVID-19 vaccination

HE providers should encourage students to take up the offer of both doses of the vaccine, and the booster jab as soon as they become eligible.

COVID-19 vaccination for HE students is being offered at local sites run by GPs or community pharmacies, at larger vaccination centres and in some hospitals. Local areas may also work with partners to set up 'pop up' temporary clinics at locations convenient for students to access, for example, on university campuses. Students registered with a GP can book their appointment at a larger vaccination centre, a community pharmacy run site or at some GP run sites through the [national booking service website](#) or by phoning 119.

HE providers should encourage students to register with a GP practice if they have not already done so. Those who are registered with a GP will receive an invitation to be vaccinated from their GP practice. Individuals can request to book COVID-19 vaccination appointments as an unregistered patient through a local GP practice. HE providers should encourage students to consult the COVID-19 vaccination [FAQs for students in higher education institutions](#) which has been published by NHS England and provides a range of important information.

Find out more on those who are eligible for vaccination from [who can get the coronavirus \(COVID-19\) vaccine](#).

Use the guidance on [international students and vaccination](#).

Some employers are requiring staff to be vaccinated to work in their settings, and in some health and care settings this will be a legal requirement. We therefore advise providers to discuss this with employers to confirm what they will expect from placement students. Find out more from the ACAS guidance on [Getting the coronavirus \(COVID-19\) vaccine for work](#) and the [COVID-19 vaccination: guide for employers](#).

Certification

From 27 January, mandatory certification is no longer in place and so venues and events are not required by law to use the NHS COVID Pass as a condition of entry, but some may do so voluntarily. Further information on using your NHS COVID Pass for travel abroad and at venues and settings in England is available [here](#).

Providers should not use the NHS COVID Pass as a condition of entry for education or related activities such as exams or teaching or extra-curricular activities or any other day-to-day activities that are part of education or training.

Travel and transport for students arriving from within the UK

HE providers should communicate travel guidance to all students, including how to help reduce the spread of COVID-19 by following the [Coronavirus \(COVID-19\): safer travel guidance for passengers](#).

New and returning students travelling from overseas

International students are permitted to study remotely without a visa, and in most circumstances will be able to begin their course via distance learning. Visa concessions for those on Student (or Tier 4) visas allow for the provision of online learning for students outside the UK until the 6 April 2022. These visa concessions have been implemented so that students have a greater degree of flexibility on when they travel into the UK.

Students that are travelling to the UK from overseas will need to pay regard to and comply with border measures that have been introduced to help prevent transmission of COVID-19 on their return.

Arrival procedure for students travelling to the UK from overseas

All students and staff travelling to England must adhere to government travel advice in [travel to England from another country during coronavirus \(COVID-19\)](#).

Before arriving in the UK, all students should:

- check the [very latest information](#) on entering the UK
- inform their provider when they intend to arrive on campus so that they can be appropriately supported
- understand their vaccination status

Different restrictions apply to students arriving from overseas depending on where they are coming from..

Countries are sorted into 2 categories:

- red list countries
- rest of the world

Students travelling from red countries

Students should first check if they are travelling here from a [red list](#) country, and follow this guidance. The UK has travel bans in place for arrivals from some countries (otherwise referred to as 'red' countries) as part of measures taken to protect the UK from new variants of COVID-19.

Travellers from these [red list](#) countries who are British and Irish Nationals, or third country nationals with residence rights in the UK - including international students - will

still be able to enter the UK if they have been in or transited through a red country in the last 10 days, but they will be required to [quarantine in a managed quarantine hotel](#) on arrival for 10 days. Residence rights includes those with an entry clearance or visa that grants such leave, for example, students, holders of existing leave to enter or remain such as those students with biometric residence permits, and holders of EU Settlement Scheme ('EUSS') leave.

Quarantine in a managed quarantine hotel for red list arrivals applies whether the student is fully vaccinated, partially vaccinated or unvaccinated.

The cost of quarantining in a hotel will be borne by the traveller. Students must book the managed quarantine package in advance of travelling. All red-list travellers will be accommodated. More information on [booking and staying in a quarantine hotel](#) is available.

Students cannot use [Test to Release](#) if they have been in or through red list countries in the 10 days before they arrive in England. Students should always look to book their hotel room and flight simultaneously to avoid any discrepancy.

Providers in England that recruit international students (or other students who will be travelling to the UK unaccompanied) who are under the age of 18 should read [Quarantine arrangements for unaccompanied minors joining higher education providers in England](#).

Travel from the rest of the world (RoW)

There are different rules for travellers depending on whether they are fully vaccinated or not. Students should follow the guidance [Travel to England from another country during coronavirus \(COVID-19\) - GOV.UK \(www.gov.uk\)](#) which sets this out in detail.

Arriving on campus

After following the correct arrivals procedure, students should follow instructions on ongoing asymptomatic testing as set out by their HE provider.

We are working with the HE sector to ensure that all students are welcomed to the UK and are supported on arrival by their chosen university. Universities UK has developed a [checklist to support students who are required to self-isolate](#) to use as a guide in developing that support.

Further guidance is available on [entering the UK](#).

Visas

The government has implemented a number of immigration [concessions to assist visa holders in the UK](#) who have been impacted by global travel and health restrictions.

International students considering coming to study in the UK should be aware that visa concessions for those on Student (or Tier 4) visas allow for the provision of online learning for students outside the UK until the 6 April 2022. These visa concessions have been implemented so that students have a greater degree of flexibility on when they travel into the UK.

The government has published information on [concessions for student visas and the Graduate route](#).

Students should be aware that rules may differ depending on the UK nation within which they are studying, so should consult the relevant guidance for Wales, Scotland and Northern Ireland.

COVID-19 vaccines for international students

International students are eligible for a COVID-19 vaccine if they have not been vaccinated or have had a partial vaccination elsewhere in the world. They will not be charged for vaccination in the UK. [Find out how to book a COVID-19 vaccine appointment](#). Students should aim to do this as soon as possible after they have arrived.

Recipients of a vaccination outside the UK who are not considered to be fully vaccinated as set out above should contact a GP or a clinician at a vaccination centre to discuss whether further vaccination is appropriate.

COVID-19 travel guidance for education and work placements overseas

Please refer to the [Coronavirus \(COVID-19\) guidance for education or work placements overseas - GOV.UK \(www.gov.uk\)](https://www.gov.uk/guidance/coronavirus-covid-19-guidance-for-education-or-work-placements-overseas).

Accommodation

It is important that shared areas within accommodation such as kitchens and bathrooms are cleaned regularly to minimise the risk of transmission, and in particular, after use by those who have tested positive or are displaying COVID-19 symptoms. More information can be found in the [guidance for households with possible or confirmed COVID-19 infection](#).

HE providers should ensure that appropriate cleaning supplies and clear instructions are provided to residents in university- managed accommodation. It is likely that where households follow good practice to minimise transmission within the house at all times, the overall risk of transmission will be reduced. This requires focusing on the three main routes of transmission – close-range, airborne, and surface contact with routine measures that include: ensuring regular fresh air of common areas; frequent handwashing using soap and water; limiting the use of sharing surfaces or objects where feasible; and frequent cleaning of shared surfaces.

The [College and University Business Officers](#) and the [Universities Safety and Health Association \(USHA\)](#) have jointly issued a checklist for students living in shared accommodation to help minimise the risk of coronavirus transmission. This checklist includes practical advice on cleaning, food hygiene, and visitors among other aspects of co-living. This guidance also provides advice on how to minimise transmission within shared accommodation, where someone has suspected symptoms or tests positive. They should encourage students and visitors to follow this advice.

In addition, USHA have also published [COVID-19 Sector guidance on the management of student accommodation](#).

Forming new households

Students can form new households and move into their shared student accommodation as normal. Within student accommodation, providers should continue to seek to identify 'households', which will form the units by which they will manage any response to a suspected or confirmed positive case. Providers' approach to deciding what constitutes a household will depend on the physical layout of the accommodation, taking into account who shares a kitchen or bathroom. A household in halls of residence is normally considered to be those students living in the same flat, or on the same floor, who share a kitchen or bathroom, rather than an entire block. Accommodation providers should make clear which kitchen(s) or bathroom(s) are intended for each household's use.

If a household within student accommodation is not obvious, providers may need to identify students as belonging to households (these households may be greater than 6 people). There should be an easily accessible record of who is in each of these provider-defined households, and students should understand what constitutes their household for the purposes of any guidance on interactions within and between households.

Students living in halls of residence, or houses of multiple occupation (HMO), who are required to self-isolate, should do so in their current accommodation. Students should discuss this with their provider, and with the manager of their halls if they are privately owned, or the landlord of their HMO.

Educational visits and field trips

There are no restrictions on educational visits and field trips within the UK.

International visits

Providers should refer to the [guidance on international travel before booking and travelling](#).

Providers should be aware that the travel list (and broader international travel policy) is subject to change. The travel lists may change during a visit and travellers must comply with international travel legislation and have contingency plans in place to account for these changes.

We recommend that you consider whether to go ahead with planned international educational visits at this time, recognising the risk of disruption to education resulting from the need to isolate and test on arrival back into the UK.



Department
for Education

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