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Welsh Government

# Operational guidance for schools and settings from the autumn term

Mae'r ddogfen yma hefyd ar gael yn Gymraeg.  
This document is also available in Welsh.

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## Introduction

Since 29 June, schools in Wales have been offering their learners the opportunity to attend sessions to 'check in, catch up and prepare'. This has been on a reduced basis taking into account the scientific advice available at the time and the measures that needed to be put in place to help reduce the risk of transmission. Things have since moved on and we now have more evidence and information available to us to inform our decisions for the operation of schools in the next academic year.

The Minister for Education announced on 9 July that all learners would return to school in the autumn term. The Welsh Technical Advisory Group (TAG), which provides scientific and technical advice to Government during emergencies, recommends that schools [“plan to open in September with 100% of pupils physically present on school sites, subject to a continuing, steady decline in the presence of COVID-19 in the community.”](#)

In addition, our NHS Test and Trace system is up and running, and we are clear about the measures that need to be in place to create safer environments within schools.

We also know that the risk to children themselves of becoming severely ill from COVID-19 is very low. Current [evidence](#) points to “Infection with SARS-CoV-2 appears to take a milder course in children than in adults: most infected children present with mild symptoms or are asymptomatic, and very few develop severe or life threatening disease. There remains some on-going uncertainty in transmissibility of the disease by children, but real world observation of schools opening in England and other countries has shown little transmission by children.”

These risks have to be carefully balanced with the negative health impacts of being out of school. School is also an important point of contact for public health and safeguarding services that are critical to the well-being of children and families.

Although it is not possible to ensure a totally risk-free environment, the Office of National Statistics' analysis on [coronavirus \(COVID-19\) related deaths linked to occupations](#) suggests that staff in educational settings tend not to be at any greater risk from the disease than many other occupations. There is no evidence that children transmit the disease any more than adults. There is currently a very low prevalence of positive tests among education workers at 3.8% cumulative, among the lowest rates of critical workers.

Taking into account the improved situation we now find ourselves in, the balance of risk is now overwhelmingly in favour of children returning to school. Being out of school is detrimental for children's cognitive and academic development and their health and well-being, particularly for disadvantaged children; and, can have an impact both in the short and longer term. We know that lower academic achievement also translates into long-term economic costs. We also know that school closures have affected some families' ability to work. By getting our learners back into school as quickly and as safely as possible will bring positive benefits on a number of fronts not least their mental and emotional wellbeing.

This guidance document provides a framework for school leaders to put in place proportionate protective measures for children and staff but also enables learners to receive an education that offers a broad and balanced curriculum allowing them to thrive and progress. It also recognises that a school's context will determine how the combination of these measures are used to best effect to help minimise the risk of transmission in each individual setting.

School leaders will need to make judgments at a school level about how to balance and minimise any risks from COVID-19 with providing a full educational experience for children and young people. In doing so schools will be asked to minimise the number of contacts that every learner has during the school day as part of implementing the system of controls outlined in this guidance to reduce the risk of transmission.

The autumn term will start on 1 September and schools that can accommodate all learners from the start of the term should do so. There will be a period of flexibility in recognition that schools may want to focus on priority year groups such as Years 7, 12, 13 and Special Units for secondary and early years and Year 6 in the primary sector such as those new to secondary schools, those sitting exams next summer or those in Reception classes. This will also allow time, up to a fortnight, for any planning and reorganisation. It is expected that planning and preparation days will take place at the start of term to enable schools and settings to work with their staff on reviewing their risk assessments, processes and associated systems.

From the second week of term it is expected that schools and settings will need to maximise the number of learners in attendance leading to a full return on the 14 September when school attendance will be compulsory for all pupils.

There cannot be a one size fits all approach, it is recognised that each school and setting will have local challenges to address. This guidance is designed to enable local authorities working with their schools and settings to plan for the autumn term, recognising that the guidance will evolve over the coming weeks to reflect the latest Welsh Government policies particularly around school transport, shielding and Black, Asian and Minority Ethnic (BAME) communities.

Local authorities will be able to support schools and settings in relation to catering, cleaning, facilities management, and HR. It will be important for schools and settings to work closely with their local authorities in taking forward this guidance.

Local authorities will not be expected to continue to provide emergency childcare provision in the autumn term.

The intention is for independent schools to follow the measures set out in this document in the same way, it covers expectations for children with special educational needs and other barriers to learning. However further guidance will be published on supporting vulnerable and disadvantaged groups and early years and nursery provision shortly.

This guidance sets out the public health advice schools and settings must follow to minimise the risks of COVID-19 transmission. It also includes the process that should be followed if anyone develops COVID-19 symptoms while at school. The guidance provides a set of principles to help schools and settings do this, and in turn minimise risks.

A recent report by the Public Health Agency of Sweden found that “Children are not a major risk group of the COVID-19 disease and seem to play a less important role from the transmission point of view....The negative effects of closing schools must be weighed against the possible positive indirect effects it might have on the mitigation of the COVID-19 pandemic.”

<https://www.folkhalsomyndigheten.se/publicerat-material/publikationsarkiv/c/covid-19-in-schoolchildren/>

We will continue to monitor the situation carefully and every school will also need to plan for the possibility of a local lockdown and how they will ensure continuity of education within a broader framework of local restrictions.

## **Public Health Wales advice to minimise COVID-19 risks**

Employers, schools and settings must comply with health and safety law, which requires them to assess risks and put in place proportionate control measures.

Schools with their employers should thoroughly review their health and safety risk assessments in collaboration with the local authority and trade unions and draw up plans for the autumn term that address the risks identified using the system of controls set out below. Essential measures include:

- a requirement that people who are unwell with symptoms of COVID-19 stay at home
- robust hand and respiratory hygiene including ventilation
- continue increased cleaning arrangements
- active engagement with Test, Trace, Protect
- formal consideration of how to reduce contacts and maximise distancing between those in school wherever possible and minimise potential for contamination so far as is reasonably practicable.

How contacts are reduced will depend on the school's circumstances and should include:

- grouping learners together
- avoiding contact between groups as much as possible
- arranging classrooms with forward facing desks, recognising this may not be possible or appropriate in all schools/settings
- staff maintaining distance from learners and other staff as much as possible.

## Risk assessment

Local authorities as the employers and schools, must protect people from harm. This includes taking all necessary steps to protect staff, learners and others from COVID-19 within schools and settings.

As part of planning for full return in the autumn term, it is a legal requirement that schools should revisit and update their risk assessments by building on the learning to date and the practices they have already developed. This will enable them, to consider the additional risks and control measures to put in place for a return to full capacity in the autumn term. Schools and settings, working with their local authority health and safety adviser and trade unions, should also review and update their wider risk assessments and consider the need for relevant revised controls considering the implications of COVID-19. A local authority working with their schools and settings should ensure that they implement sensible and proportionate control measures which follow the health and safety hierarchy of controls at Annex A, to reduce the risk to the lowest reasonably practicable level, but do not negatively impact the well-being of learners and staff.

Local authorities should communicate the control measures to schools and settings. Schools and setting should work with staff, parents/carers and learners so that there is clarity on what and how the revised arrangements will work in practice and have active arrangements in place to monitor that the controls are:

- effective
- working as planned
- updated appropriately considering any issues identified and changes in public health advice.

Local authorities, working with their schools and settings should continue to ensure they are complying with their security plans and ensuring that any changes as a result of COVID-19 compliance do not impact negatively on their security plans. In responding to COVID-19 this should not be contrary to the individual school's security plan and cognisance should be taken of the Welsh Government and WECTU booklet entitled '[Protecting Schools, an integrated security approach – Head Teachers toolbox](#)'

For more information on what is required of local authorities and school employers in relation to health and safety risk assessments, see Annex B.

## Protective measures

Having assessed their risk, schools and settings as far as reasonably possible must work through the following measures, adopting it in a way that addresses the risk identified in their assessment, works for their school/setting and allows them to deliver for all learners. If schools and settings follow the guidance set out here, they will effectively reduce risks in their school and create an inherently safer environment.

### Measures

This is the set of actions schools and settings must take, wherever possible.

#### Prevention

- Minimise contact between individuals wherever possible. For younger learners the emphasis will be on separating groups, and for older learners it will be on distancing.
- Minimise contact with individuals who are unwell by ensuring that those who have COVID-19 symptoms, or who have someone in their household who does, do not attend school.
- Clean hands thoroughly more often than usual.
- Ensure good respiratory hygiene by promoting the 'catch it, bin it, kill it' approach.
- Continue enhanced cleaning, including cleaning frequently touched surfaces often, using standard products such as detergents and bleach.
- Where necessary, in specific circumstances (set out later in the guidance), wear appropriate personal protective equipment (PPE).
- Where possible ensure appropriate ventilation.

#### Response to any infection

- Engage with the [Test, Trace, Protect strategy](#).
- Manage confirmed cases of COVID-19 among the school community and contain any outbreak by following local health protection team advice.

#### Prevention

- 1. Minimise contact with individuals who are unwell by ensuring that those who have COVID-19 symptoms, or who have someone in their household who does, do not attend school.**

Under no circumstances should learners or staff attend schools/setting if they:

- feel unwell, have any of the four identified COVID-19 symptoms (a new continuous cough, a high temperature or loss of taste or smell) or they have tested positive to COVID-19 in the past 7 days
- live in a household with someone who has symptoms of COVID-19 or has tested positive to COVID-19 in the past 14 days.

All schools and settings must follow this process and ensure all staff are aware of it. Schools and settings should have a clear escalation policy and procedures in place if learners or staff begin to show symptoms of COVID-19 while at the school/setting. These need to be fully understood by staff, learners (where able) and parents/carers.

Those showing symptoms should be kept separate until they can be collected and taken home. Ideally, this should be in a separate room, supervised at a distance of two metres where possible, but recognising this may not be possible with younger learners. If they need clinical advice, they (or a member of staff or their parent/carer) should go online to [111 Wales](#) (or call 111 if they don't have internet access).

Surfaces that learners or staff with symptoms have come into contact with should be carefully and thoroughly cleaned. Further cleaning guidance is provided at point 4 below.

Anyone displaying symptoms of COVID-19 should stay at home and begin to [self-isolate](#) for 7 days while making arrangements to be tested. If the test result is negative the individual with symptoms will not be required to complete the full 7 days self-isolation period. Anyone who lives with someone displaying COVID-19 symptoms, or is in an extended household arrangement with someone displaying symptoms must stay at home for 14 days from the day the first person became ill or until the outcome of the COVID-19 test is known.

The present advice is that it is not necessary to screen temperatures. Learners' parents/carers can check for signs of a high temperature. In any case, screening will not identify all cases of COVID-19 and the means of checking temperature may put staff at greater risk of transmission, as well as cause worry or concern for learners. We will keep this under review. Staff should of course be vigilant for changes to learners' temperatures and signs of fever.

## **2. Clean hands thoroughly more often than usual.**

COVID-19 is an easy virus to kill when it is on skin. This can be done with soap and running water or hand sanitiser. Schools supported by their local authorities must ensure that learners clean their hands regularly, including when they arrive at school, when they return from breaks, when they change rooms and before and after eating. Regular and thorough hand cleaning is going to be needed for the foreseeable future. Points to consider and implement include:

- whether the school/setting has enough hand washing or hand sanitiser 'stations' available so that all learners and staff can clean their hands regularly
- supervision of the use of hand sanitiser given the risks around ingestion. Young learners and those with complex needs should continue to be helped to clean their hands properly
- building these routines into the school's culture, supported by behaviour expectations and helping ensure younger learners and those with complex needs understand the need to follow them.

### **3. Ensure good respiratory hygiene by promoting the ‘catch it, bin it, kill it’ approach.**

The ‘catch it, bin it, kill it’ approach continues to be very important, so schools and settings must ensure that they have enough tissues and bins available in the school to support learners and staff to follow this routine. As with hand cleaning, schools and settings must ensure younger learners and those with complex needs are helped to get this right, and all learners understand that this is now part of how school and settings operates. Some learners with complex needs may find it difficult to maintain good respiratory hygiene as effectively as their peers. This should be considered in risk assessments in order to support these learners and the staff working with them, and is not a reason to deny these learners face-to-face education.

### **4. Increased cleaning, including cleaning frequently touched surfaces often using standard products, such as detergents and bleach.**

Schools and settings should follow the [latest cleaning](#) in non-healthcare settings. Points to consider and implement include:

- putting in place a cleaning schedule that ensures cleaning is generally enhanced and includes:
  - more frequent cleaning of rooms/shared areas after they have been used by different groups
  - frequently touched surfaces being cleaned more often than normal
- where possible, providing separate toilets for different contact groups. Where this is not possible, using hand sanitiser before entering the toilet and ensuring toilets are cleaned regularly will help. Learners must be encouraged to clean their hands thoroughly after using the toilet.

### **5. Minimise contact between individuals and maintain social distancing wherever possible.**

The latest published [evidence](#) in relation to the transmissibility in learners under the age of 12 seems to be particularly low. Children under the age of 18 make up 22 to 25 per cent of the population, but consistently make up <2% of the total COVID-19 caseload in every country. Minimising contacts and mixing between people reduces transmission of COVID-19. This is important in all contexts, and schools and settings must consider how to implement this. Schools and settings must do everything possible to minimise contacts and mixing.

#### **Minimising contacts and social distancing**

We know that minimising contacts and mixing between people reduces transmission of COVID-19. Schools must consider how to best implement this and do everything possible within their own context to minimise contacts and mixing while delivering a broad and balanced curriculum. It is acknowledged, however, that schools will have constraints relating to buildings and staffing resources and an element of flexibility may be needed in order that children and accommodated in this return to school.

The overarching principle to apply is reducing the number of contacts between learners and staff. This can be achieved through keeping groups separate and through maintaining distance between individuals. Both measures will help, but the balance between them will change depending on the:

- learners' ability to distance
- layout of the school
- feasibility of keeping distinct groups separate while offering a broad curriculum (especially at secondary schools).

It is likely that for younger learners the emphasis will be on separating groups, and for older learners it will be on social distancing. For learners old enough, they should be supported to maintain distance and not touch staff where possible.

### **How to group learners**

Consistent groups help reduce the risk of transmission by limiting the number of learners and staff in contact with each other to only those within the group. It is accepted that learners and especially the youngest learners, cannot socially distance from staff or from each other and consistent groups provide an additional protective measure. Maintaining distinct contact groups that do not mix makes it quicker and easier, in the event of a positive case, to identify those who may need to self-isolate and to keep that number as low as possible.

The use of small contact groups brings a number of educational and operational challenges which restricts the normal operation of schools. This is the case in both primary and secondary schools, but is particularly difficult in secondary schools.

However, given the decrease in the prevalence of COVID-19 and the plan for the autumn term for the resumption of the full range of curriculum subjects, schools may need to change the emphasis on contact groups, increasing the size of the groups, but staying within their system of controls.

In secondary schools, particularly in the older age groups at Key Stage 4 and 5, the contact groups are likely to need to be the size of a year group to enable schools to deliver the full range of curriculum subjects and for learners to receive specialist teaching. If this can be achieved with small groups, they are recommended. At primary school, and in the younger years at secondary (Key Stage 3), schools may be able to implement smaller groups the size of a full class. If that can be achieved, it is recommended, as this will help to reduce the number of people who could be asked to isolate should someone in a group become ill with COVID-19.

Schools should assess their circumstances and if class-sized groups are not compatible with offering a full range of subjects or managing the practical logistics within and around school, they can look to implement a year group (or half year group) sized contact groups. Whatever the size of the group, they should be kept apart from other groups where possible and older learners should be encouraged to keep their distance within groups. Schools with the capability to do it should take steps to limit interaction, sharing of rooms and social spaces between groups as much as possible. When using larger groups the other measures from the system of

controls become even more important; to minimise transmission risks and to minimise the numbers of learners and staff who may need to self-isolate. We recognise that younger learners will not be able to maintain social distancing, and it is acceptable for them not to distance within their group.

Both the approaches of separating groups and maintaining distance are not 'all-or-nothing' options, and will still bring benefits even if implemented partially. Some schools may keep learners in their class groups for the majority of the classroom time, but also allow mixing into wider groups for specialist teaching, wraparound care and transport. Siblings may also be in different groups. Making efforts to keep these groups at least partially separate and minimising contacts between learners will still offer public health benefits as it reduces the network of possible direct transmission.

All teachers and staff can operate across different classes and year groups in order to facilitate the delivery of the school timetable. This will be particularly important for secondary schools. Where staff need to move between classes and year groups, they should try and keep their distance from learners and other staff as much as they can, ideally 2 metres from other adults. Again, we recognise this is not likely to be possible with younger learners and teachers in primary schools can still work across groups if that is needed to enable a full educational offer.

Where mixing between groups cannot be avoided, schools and practitioners should run the **approach to risk estimation and management** process to reduce the risk of transmission between contact groups.

It is important that schools and settings have the flexibility to manage and respond to risks in an appropriate way. As schools and settings seek to minimise the risks of transmission, they should consider the process detailed at Annex A.

### **Measures within the classroom**

Maintaining a distance between people while inside and reducing the amount of time they are in face-to-face to contact lowers the risk of transmission. It is strong public health advice that staff in secondary schools maintain distance from their learners, staying at the front of the class, and away from their colleagues where possible. Ideally, adults should maintain a 2 metre distance from each other, and from learners. We know that this is not always possible, particularly when working with younger learners, but if adults can do this when circumstances allow that will help. In particular, they should avoid close face-to-face contact and minimise time spent within 1 metre of anyone. Similarly, it will not be possible when working with many learners who have complex needs or who need close contact care. These learners' educational and care support should be provided as normal.

For learners old enough, they should also be supported to maintain distance and not touch staff and their peers where possible. This will not be possible for the youngest learners and some learners with complex needs and it is not feasible in some schools where space does not allow. Schools doing this where they can, and even doing this some of the time, will help.

When staff or learners cannot maintain distancing, particularly with younger learners in primary schools, the risk can also be reduced by keeping learners in the smaller, class-sized groups described above.

Schools should make small adaptations to the classroom to support distancing where possible. That should include seating learners side by side and facing forwards, rather than face to face or side on, and might include moving unnecessary furniture out of classrooms to make more space.

### **Measures elsewhere**

Contact groups should be kept apart where possible, meaning that schools should avoid large gatherings such as assemblies or collective worship with more than one group.

When timetabling, groups should be kept apart and movement around the school site kept to a minimum. While passing briefly in the corridor or playground is low risk, schools should avoid creating busy corridors, entrances and exits. Schools should also consider staggered break times and lunch times (and time for cleaning surfaces in the dining hall between groups).

Schools and settings should also plan how shared staff spaces are set up and used to help staff to distance from each other. Use of staff rooms should be minimised, although staff must still have a break of a reasonable length during the day.

### **Measures for arriving at and leaving school**

Where possible, schools should consider staggered starts or adjusting start and finish times to keep groups apart as they arrive and leave school. Staggered start and finish times should not reduce the amount of overall teaching time. A staggered start may, for example, include condensing/staggering free periods or break time but retaining the same amount of teaching time, or keeping the length of the day the same but starting and finishing later to avoid rush hour. Schools should consider how to communicate this to parents/carers and remind them about the process that has been agreed for drop off and collection, including that gathering at the school gates and otherwise coming onto the site without an appointment is not allowed.

Schools should also have a process for removing face coverings when learners and staff who use them arrive at school and communicate it clearly to them. Learners must be instructed not to touch the front of their face covering during use or when removing them. They must wash their hands immediately on arrival (as is the case for all learners), dispose of temporary face coverings in a covered bin or place reusable face coverings in a plastic bag they can take home with them, and then wash their hands again before heading to their classroom.

### **Other considerations**

Some learners with special educational needs (SEN) will need specific help and preparation for the changes to routine that this will involve, so teachers and special

educational needs coordinators should plan to meet these needs, for example using social stories.

Supply teachers, peripatetic teachers and/or other temporary staff can move between schools. They should ensure they minimise contact and maintain as much distance as possible from other staff. Specialists, therapists, clinicians and other support staff for learners with SEN should provide interventions as usual. Schools should consider how to manage other visitors to the site, such as contractors and ensure site guidance on social/physical distancing and hygiene is explained to visitors on or before arrival. Where visits can happen outside of school hours, they should. A record should be kept of all visitors.

Where a learner 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, schools should work through the system of controls collaboratively, enabling them to address any risks identified and allowing them to jointly deliver a broad and balanced curriculum for the learner.

Schools and settings should ensure outdoor playground equipment should be more frequently cleaned. This would also apply to resources used inside and outside by wraparound care providers. It is still recommended that learners limit the amount of equipment they bring into school each day, to essentials such as lunch boxes, bags, hats, coats, books, stationery and mobile phones. Learners and staff can take books and other shared resources home, although unnecessary sharing should be avoided, especially where this does not contribute to learners' education and development. Similar rules on hand washing, cleaning of the resources and rotation should apply to these resources.

For individual and very frequently used equipment, such as pencils and pens, it is recommended that staff and learners have their own items that are not shared. Classroom-based resources, such as books and games, can be used and shared within the contact group; these should be cleaned regularly, along with all frequently touched surfaces. Resources that are shared between contact groups, such as sports, art and science equipment should be cleaned frequently and meticulously and always between contact groups, or rotated to allow them to be left unused and out of reach for a period of 48 hours (72 hours for plastics) between use by different contact groups.

If non-symptomatic children present behaviours which may increase the risk of droplet transmission (such as biting, licking, kissing or spitting) or require care that cannot be provided without close contact, they should continue to receive care in the same way, including any existing routine use of PPE.

In these circumstances, to reduce the risk of coronavirus (COVID-19) transmission, no additional PPE is necessary as these are non-symptomatic children in a non-healthcare setting and so the risk of viral transmission is very low. However, additional space and frequent cleaning of surfaces, objects and toys will be required. Cleaning arrangements should be increased in all settings, with a specific focus on surfaces which are touched a lot.

## 6. Where necessary, wear appropriate personal protective equipment (PPE)

It is important to remember that social/physical distancing, hand hygiene and respiratory hygiene (catching a cough or sneeze in a tissue or covering the mouth and nose with an elbow or sleeve) remain strongly evidenced to be the most effective ways to prevent the spread of coronavirus.

There is therefore no need to use personal protective equipment (PPE) when undertaking routine educational activities in classroom/school settings.

The list below covers when PPE may be required.

### Routine activities

- **No PPE** is required when undertaking routine educational activities in classroom or school settings.

### Suspected COVID-19

- **Gloves, aprons and a fluid-resistant surgical mask** should be worn if a child or young person becomes unwell with symptoms of COVID-19 and needs direct personal care.
- **Eye protection** should also be worn if a risk assessment determines that there is a risk of splashing to the eyes such as from coughing, spitting, or vomiting.
- **Gloves and aprons** should be used when cleaning the areas where a person suspected of having COVID-19 has been.

### Intimate care

- **Gloves and aprons** should continue to be used when providing intimate care to a child or young person. This can include personal, hands-on care such as washing, toileting, or first aid and certain clinical procedures such as assisted feeding.
- **Fluid-resistant surgical masks and eye protection** should also be worn if a risk assessment determines that there is a risk of splashing to the eyes such as from coughing, spitting, or vomiting.
- **Gloves, fluid repellent gowns, FFP3 masks and eye protection** are indicated when undertaking aerosol generating procedures such as suction.
- **Gloves and aprons** should be used when cleaning equipment or surfaces that might be contaminated with body fluids such as saliva or respiratory secretions.

Guidance also sets out that gloves and an apron should be used when cleaning areas where a person suspected of having COVID-19 has been.

The use of PPE by staff within education settings should be based on a clear assessment of risk, taking into account each individual setting and the needs of the individual learner. Schools, settings and local authorities already have risk assessments processes in place which should be used to identify the need for the use of PPE. Following any risk assessment, where the need for PPE has been

identified, it should be readily available and provided. Further information has been provided by the [Health and Safety Executive](#).

All staff should understand how to put on or remove PPE in the right order, safely dispose of the waste and use correct hand hygiene steps to reduce the risk of onward transmission of infection.

In any case, hand washing should always be practiced before putting on and after removing PPE. Schools and settings should contact their local authority to obtain PPE to cover the above, and to discuss any relevant training requirements.

### **Use of face coverings for health purposes**

The Chief Medical Officer has been clear that there is minimal evidence to support the widespread wearing of non-medical face coverings in the community. Non-medical face coverings are recommended where social distancing cannot be maintained.

They are not a replacement for far more effective measures such as social distancing and hand hygiene.

Schools and settings should ensure, where possible that they organise the environment and they operate to ensure that social distancing can be maintained throughout a routine day.

Considering the well-being of learners is critical to any considerations around whether staff or older learners wear face coverings. No one who may not be able to handle face coverings as directed (e.g. young learners, or those with special educational needs or disabilities) should wear them as it may inadvertently increase the risk of transmission.

### **Face coverings and implications for deaf learners or learners with any level of hearing loss**

The impact of wearing a face coverings for a deaf learner or learners with any level of hearing loss should be carefully considered, as communication for many deaf people relies in part on being able to see someone's face clearly. The National Deaf Children's Society has provided the following communication tips, which staff may find useful in this regard:

<https://www.facebook.com/112180125505122/videos/3087775494640238> and <https://www.ndcs.org.uk/blog/the-impact-of-face-masks-on-deaf-children/>

### **Response to any infection**

## **7. Engage with the Test Trace Protect (TTP) Strategy**

The new [Test, Trace, Protect strategy](#) published on 13 May was implemented across Wales from 1 June.

This strategy sets out the next phase of our approach to tackling coronavirus; testing people with symptoms in the community, tracing those who have come into close contact with people who have tested positive for coronavirus, and protecting family, friends and our community by self-isolating.

Test, Trace, Protect works by:

- testing those people who have coronavirus symptoms, asking them to isolate from family, friends and their community while taking a test and waiting for a result. People can apply for a test for themselves or someone in their household with symptoms. This includes adults and children including the under 5s. Information and [guidance](#) for staff and how to apply for a test can be found [the Welsh Government website](#).
- tracing those people who have been in close contact with people that have tested positive for the virus, requiring them to take precautions through self-isolation. Further information on contact tracing and how it operates can be found [on the Welsh Government website](#).
- ensuring that if the symptoms are not due to coronavirus, individuals and their contacts can get back to their normal routines as soon as possible
- providing advice and [guidance](#), particularly if the person who has symptoms or their contacts are in the 'shielding group' or the [increased risk](#) group.

By reducing transmission in our communities, and quickly identifying and isolating those at risk of developing COVID-19 following their close contact with a positive individual (e.g. a known contact or family member) we will support the wider opening of schools, colleges and early years settings.

Schools and settings should reinforce these messages and in particular, remind all those who show any of the symptoms to self-isolate immediately and book a test. Those living with someone showing symptoms should also self-isolate.

In the event of a positive test, a contact tracer will contact the person tested to help identify potential contacts. A second contact tracer will then get in touch with those contacts and advise them to self-isolate for 14 days from their last contact with the person who tested positive. These people will only be required to take a test if they develop symptoms.

People are considered as potential contacts if they were in contact with the person who has tested positive during a period beginning up to two days before symptom onset and ending when the case entered home isolation. This is based on current understanding of the main period of infectivity.

A contact is defined as someone who has had **close contact** during this period, specifically:

- within one metre of the person who has tested positive and has been coughed on, had a face-to-face conversation, had skin-to-skin physical contact, or been in other forms of contact within one metre for one minute or longer
- within two metres of the person testing positive for more than 15 minutes
- having travelled in a vehicle with the person who has tested positive.

Where staff have maintained social/physical distancing rules and adhered to hygiene measures during work and where required have used personal protective equipment (PPE) or worked behind an appropriate screen or partition, they would not be regarded as part of a contact tracing exercise for these purposes.

A positive test on site therefore does not require closure of that site. The process of testing and contact tracing is part of the 'new normal' and where schools and settings follow these guidelines carefully, there is no cause for alarm. The latest information can be found on the [Welsh Government website](#).

## 8. Manage confirmed cases of COVID-19 among the school community

Building upon the Disease Outbreak Plan for Wales (2020) Public Health Wales has provided specific advice regarding the investigation and management of clusters and outbreaks of COVID-19 in educational settings in Annex C. The advice outlines what steps should be taken to protect individuals and communities where outbreaks are occurring, as well as reducing spread to other communities.

1. Identification of cases in possible cluster.
2. Gathering of minimum information.
3. Initial cluster management and risk assessment.
4. Declaration of outbreak and management.

### Identifying clusters and outbreaks

A potential **cluster** is defined as two or more cases of COVID-19 among learners or staff in an educational setting within 14 days or an increased rate of absence due to suspected or confirmed cases of COVID-19.

A potential **outbreak** is defined as two or more confirmed cases of COVID-19 among learners or staff who are direct close contacts, proximity contacts or in the same 'bubble'\* in the school/setting, within 14 days" (\*This may be a class, year group or other defined group.).

It is important to highlight that if only one person has been identified with a case of COVID-19 in a school or setting the regular Test, Trace, Protect (TTP) contact tracing process should be followed.

Confirmed cases of COVID-19 in a school or setting should be flagged by local contact tracing teams and followed up with educational settings to establish the potential of clusters or outbreaks. However if a potential cluster or outbreak has been identified by the setting or local authority they must contact their regional multi-agency TTP Team as soon as the potential cluster or outbreak has been identified.

## **Gathering of minimum information and managing a cluster**

Regional TTP teams will work with the head of the school or setting and local authorities to gather a range of information related to the unique nature of the school/setting, the context and situation in which the cases have occurred and to establish if the Welsh Government advice for schools and settings is being implemented correctly alongside guidance on infection control measures/social distancing measures for staff and students (including the use of PPE if learners require personal care). A risk assessment will be undertaken and if an outbreak is not declared the regional TTP team will continue to work with the school/setting to manage and review the cluster.

### **When an outbreak is declared**

The Outbreak Control Team will, based on the individual circumstances of the outbreak and the school/setting, consider:

- a. adjustments to how the school/setting is operating to facilitate infection prevention and control measures and social distancing
- b. if further groups need to be asked to self-isolate (e.g. class groups, other functional groups or year groups)
- c. whether to undertake an enhanced investigation including testing of a wider group\*.

**\*The group for testing may be wider than the group identified for exclusion and could include the whole school or a distinct section of the school (e.g. year group, pre-school, primary or secondary school).**

An outbreak will be declared over when there has been 28 days since the onset of the last confirmed case in the school/setting and the results of any possible cases in learners or staff in that time have tested negative.

### **Rapid deployment of PCR antigen testing**

The rapid deployment of testing is available to support outbreaks in schools/settings by the NHS Wales TTP Programme and Local Health Boards will facilitate PCR antigen testing for everybody in the school/setting contact group that are affected by the outbreak and everyone in the school/setting if it has been established that the setting has not followed Welsh Government guidelines for schools and/or infection prevention and control measures.

The method for delivery and sampling of rapid antigen tests can be executed in a range of ways such as the deployment of Mobile Testing Units (MTUs), temporary testing satellites and drop off and collection routes. The most appropriate testing channel will be discussed and agreed between all stakeholders.

## **Antibody testing**

There is currently a programme of antibody testing being rolled out to at least 10% of your education staff (teachers, and support staff) that have worked in hub schools during the pandemic. We have increased the sample and expect over 9,000 to be tested. This will assist in understanding the seroprevalence of the virus in this cohort.

Welsh Government has also agreed that antibody testing should be repeated on this cohort following the end of term with consideration being given to the inclusion of an additional sample group consisting of the broader school community. Retesting of the original cohort will provide information about both the duration of positivity in previously positive individuals and the rate of seroconversion in individuals that previously tested negative. The latter will provide both new estimates of point prevalence over time and information about changes in prevalence in this cohort over time.

## **Rolling testing**

Latest evidence suggests there would be very limited benefit in adopting blanket testing of teachers and support staff in schools in Wales. With such a high number of false positives, there could be harm arising from unnecessarily isolating cases and their contacts as a result of the broader Test, Trace, Protect system, while a smaller number of results may have given false reassurance. The rapid deployment of PCR antigen testing is available for all schools and settings.

## **Testing kits**

We intend to provide each school and setting in Wales with a supply of home testing kits to ensure there is flexibility in the testing available, further information will follow

Welsh Government officials have developed an information [leaflet](#) specifically for education settings which provides detail regarding the wider TTP programme.

## School operations

### Transport

The latest advice and guidance in relation to public transport is being issued shortly, this will include the use of face coverings on public transport. We will work with local authorities on the impact this will have on school transport. In any school transport, priority should be given to those who are unable to attend without it.

Local authorities are required to assess the travel needs of learners who are aged under 19 in their area. This includes those who they are legally required to provide transport for and those for whom they may wish to provide discretionary transport when assessing travel needs. An authority is also required to have regard to:

- the needs of disabled learners and learners with learning difficulties
- any particular needs of learners who are 'looked after' or formerly looked after by a local authority
- the age of a learner
- the nature of the route that the learner is expected to take between home and the places where they receive education or training. In assessing the travel needs of learners, local authorities must take into account the fact that travel arrangements they make in light of the assessment must not cause unreasonable levels of stress, take an unreasonable amount of time or be unsafe.

### Attendance

All learners will return to their school or setting in the autumn term unless they have a medical/health reason not to. This will include learners who are still shielding, if the advice at the time is that they should attend school. Those learners who have been advised that they no longer have the need to shield, or whose parents/carers have chosen to send their child to school should be supported to attend without restriction, but encourage social distancing and regular hand washing.

The Welsh Government's view is that it would be difficult for a local authority/school to justify issuing a Fixed Penalty Notice (FPN) or commencing proceedings for non-school attendance. The Welsh Government will monitor the situation over the first half term.

If a learner is unable to attend the physical setting of the school it is vital that the school continues to engage regularly with the learner remotely. [Learning guidance](#) is available to support schools and settings in doing so.

Schools and settings should keep a record of attendance and families should notify their school if their child is unable to attend and explain the reason for this to enable the school to record attendance correctly. This will help schools, settings and local authorities plan for, and understand any barriers to, learners returning to school and identify any further support needed. It will be critical that all learners engage with the

school and any concerns about engagement, or the welfare of a learner, are followed up immediately.

Guidance on recording attendance will clarify coding in advance of the autumn term.

### **Public Health Wales advice on staff and learner attendance**

Under no circumstances should learners or staff attend schools/settings if they:

- feel unwell, have any of the three identified COVID-19 symptoms (a new continuous cough, or a high temperature or loss of or change to their sense of taste or smell) or they have tested positive to COVID-19 in the past 7 days
- live in a household or are part of an extended household with someone who has symptoms of COVID-19 or has tested positive for COVID-19 in the past 14 days.

### **Extremely vulnerable or ‘shielding staff’ or learners**

The advice on shielding is expected to be updated imminently, currently, however ‘shielding’ means protecting those people who are extremely vulnerable to the complications of COVID-19 because they have particular existing health conditions. This includes children, who are extremely vulnerable and at high risk of developing serious illness if they are exposed to COVID-19 because they have underlying health conditions. These individuals will have received a shielding letter from the Chief Medical Officer. Staff and learners in this category must not be asked to attend schools or settings but should be supported to work or learn from home.

However, it should be noted that the advice for shielding is constantly being reviewed in the light of evolving evidence and the levels of infection in the community. Other countries in the UK have announced that shielding will be paused, so allowing these individuals to return to work or school if the environments are “COVID safe”. The Royal College of Paediatrics and Child Health (RCPCH) has published guidance which has been accepted by the Chief Medical Officers across the UK, which has meant that a significant number of children who were shielding, no longer need to do so. These individuals have been assessed by a clinician and advised they no longer need to shield, so should be allowed to return without impediment or the need to see any letters to this effect. Shielding is advisory and is not enforceable by law. We anticipate that updated guidance on shielding will be published shortly, we will update this guidance accordingly.

There are circumstances where children would be unable to attend school for health reasons irrespective of COVID-19 and they should be supported to learn from home if they are able to do so.

### **Clinically vulnerable staff or learners at ‘increased risk’**

In the context of COVID-19 individuals at ‘increased risk’ are at a greater risk of severe illness from COVID-19. This category includes people aged over 70, those who are pregnant and those who have a range of chronic health conditions. Pregnant women are specifically advised to work from home after 28 weeks’ gestation. While people in this category can go out to work, they should work from

home if at all possible. If staff or learners do attend, extra care must be taken to ensure these individuals, and those around them adhere to strict social distancing guidelines. In the case of learners, we would only expect these to attend where parents/carers consent to this. Schools and settings may wish to consider undertaking individual risk assessments if necessary and arranging a meeting with the appropriate individual to discuss their concerns.

If in doubt about whether their health condition means they should not be attending their school or setting. Staff, parents and carers should take advice from their GP or hospital doctor. Schools should work with local authorities in clarifying queries relating to staff attendance. However, those learners and staff members in the “increased risk” group can attend school/setting providing social/physical distancing measures are strictly adhered to and safety measures are in place in the school/setting but they may wish to discuss the risks of doing so with their GP or hospital doctor before making that decision followed by further discussion with the school/their employer regarding their decision having taken into account the advice of their GP/hospital doctor.

If in doubt about whether their health condition means they should not be attending their school or setting, staff, parents and carers should review the advice on the Welsh Government website, and, if still uncertain, take advice from their local authority occupational health service, GP, hospital doctor, or occupational health clinician. Schools should work with local authorities in clarifying queries relating to staff attendance.

### **Living with a person who is either shielding or at increased risk**

If a learner or staff member lives in a household with someone who is at increased risk or is “shielding”, they should only attend a school or setting where they are strictly able to adhere to the social/physical distancing measures and the learner is able to understand and follow those instructions. This may not be possible for very young learners, and older learners without the capacity to adhere to the instructions on social/physical distancing. In those instances, we do not expect those learners to attend and they should be supported to learn at home. Likewise, we would not expect any staff who are at increased risk and attending the work place to be placed with learners who cannot reasonably adhere to the social/physical distancing measures. This should however be considered in the light of the most current advice around shielding.

### **Parents/carers and learners who are anxious about returning to schools and settings**

All other learners must attend school. Schools should bear in mind the potential concerns of learners, parents/carers who may be reluctant or anxious about returning and put the right support in place to address this. This may include learners who have themselves been shielding previously but have been advised that this is no longer necessary, those living in households where someone is clinically vulnerable, or those concerned about the comparatively increased risk from coronavirus (COVID-19), including those from BAME backgrounds or who have certain conditions such as obesity and diabetes.

If parents/carers of learners with significant risk factors are concerned, we recommend schools/settings discuss their concerns and provide reassurance of the measures they are putting in place to reduce the risk in school/setting. Schools and settings should be clear with parents/carers that learners of compulsory school age must be in school unless a statutory reason applies (e.g. the learner has been granted a leave of absence, is unable to attend because of sickness, is absent for a necessary religious observance, etc.).

### **Action for all schools and local authorities**

Schools and settings should work with learners, parents and carers to secure regular school attendance from the start of term as this will be essential to help learners catch up on missed education, make progress and promote their well-being and wider development.

We are asking schools/settings and local authorities to:

- communicate clear and consistent expectations around attendance to parents and carers throughout the summer ahead of the new school year
- identify learners who are reluctant or anxious about returning or who are at risk of disengagement and develop plans for re-engaging them. This may include meeting to discuss the barriers to returning. This should include disadvantaged and vulnerable learners and young people, especially those who were persistently absent prior to the pandemic or who have not engaged with school regularly during the pandemic
- work closely with other professionals such as youth workers, mental health support as appropriate to support the return to school, including continuing to maintain regular contact with the child's social worker if they have one, informing of attendance patterns.

## School workforce

### The All Wales COVID-19 Workforce Risk Assessment BAME

Local authorities and schools will already have risk assessment processes in operation, however in addition, the All Wales COVID-19 Workforce Risk Assessment Tool has been developed to help staff to consider their own health and well-being status to see if they are at higher risk of developing more serious symptoms if they come into contact with the COVID-19 virus. The Tool uses government guidelines, and the most up-to-date research, evidence and data available to identify known risk factors, including age, sex, ethnicity, underlying health conditions, Body Mass Index (BMI) and any relevant family history in relation to COVID-19. It is a combination of these various factors coming together which contribute to the severity of infection.

The approach of the COVID-19 Workforce Risk Assessment is a self-assessment in the first instance. This supports and empowers staff to consider their health and well-being, and understand their personal risk of developing more serious symptoms if they come into contact with the COVID-19 virus as either low, high or very-high.

Following their self-assessment staff should have confidence to discuss their safety at work and any concerns they may have with their line manager to consider the right actions to mitigate and manage that risk and ensure staff are as protected as much as possible.

The Tool includes signposts to health and well-being resources to help individuals to manage their health and well-being as well as the important and continuing messages of:

- good hand hygiene
- reasonable social distancing in informal workplace activity.

The Tool was designed for those working in the NHS and Social Care in Wales, however education staff are encouraged to use the Risk Assessment, and to complete this online through the national e-learning platform [Learning@Wales](#). Work is ongoing to develop sector specific guidance specifically for education. This will be completed in August.

Schools and settings will want to consider seeking advice from the local authorities health and safety adviser(s) regarding its stress risk assessment process. You may also wish to consider the need for an individual stress risk assessment, as a number of factors are important considerations in relation to staff well-being. The Health and Safety Executive provide a generic [Stress Risk Assessment](#)<sup>1</sup> for use.

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<sup>1</sup> <https://www.hse.gov.uk/stress/risk-assessment.htm>

## Employer health and safety

Local authorities and schools/settings have a legal obligation to protect their employees, and others, from harm and should continue to assess health and safety risks and consider how to meet equalities duties. Following the steps in this guidance and accessing support from the local authorities health and safety adviser will mitigate the risks of COVID-19 to learners and staff and help schools to meet their legal duties to protect employees and others from harm.

## Staff deployment

Schools and settings may need to alter the way in which they deploy their staff, and use existing staff more flexibly to welcome back all learners during the autumn term. Managers should discuss and agree any changes to staff roles with individuals.

It is important that planning builds in the need to avoid increases in unnecessary and unmanageable workload burdens.

If, having pursued all the immediate options available, you still have concerns about your staffing capacity a discussion with the local authority is recommended.

## Recruitment

Recruitment should continue as usual.

Initial Teacher Education (ITE) partnerships have worked flexibly to ensure this year's NQTs are ready and prepared to enter the classroom. They will be supported by the ITE partnerships and regional consortia as they embark on their induction programmes. This provision has been designed specifically to support NQTs in the transition from ITE to induction and to develop their teaching practice in the current circumstances.

Changes have been made to the Regulations governing induction to ensure that NQTs will not be disadvantaged by schools' working arrangements during the Coronavirus pandemic. Guidance on the revised arrangements is available on the [Induction area on Hwb](#). The amended Regulations will come into force on 15 July and will remain in place until 31 August 2021.

- Interviewing remotely may be a new experience for many schools. The DfE teaching blog provides some information on the [experience of implementing interviews remotely](#). There is also advice that can be sent to candidates on [how to prepare for remote interviews](#).
- When recruiting, schools must continue to adhere to the legal requirements regarding pre-appointment checks. We refer schools to statutory guidance [Keeping Learners Safe](#).

## Supply teachers

Schools can continue to engage supply teachers and other supply staff during this period. We strongly recommend that schools use [The National Procurement Services Supply Teachers Framework for Wales](#) when hiring agency workers, as this offers a list of preferred suppliers that must be transparent about the rates they charge.

To minimise the numbers of temporary staff entering the school premises, and secure best value, schools may wish to use longer assignments with supply teachers/staff and agree a minimum number of hours across the academic year. This advice for supply teachers also applies to other temporary staff working in schools such as support staff working on a supply basis, peripatetic teachers such as sports coaches, and those engaged to deliver before and after school clubs.

## Expectation and deployment of student teachers

Our ITE partner schools have equal status and responsibility within their ITE Partnerships to deliver their ITE. The integration of school-HEI experiences is fundamental to successfully ensuring student teachers receive high-quality ITE. We therefore strongly encourage schools within ITE Partnerships to continue hosting student teachers. ITE students have the potential to play a unique and significant role in supporting schools during this time. Schools should discuss with their ITE Partnerships how they can flexibly and innovatively continue to provide their portion of ITE programmes while supporting both school and student teacher's needs.

## Staff well-being

Staff and learner well-being should be the primary concern. Key to helping learners feel safe is making sure the staff are feeling safe, this can be achieved by having reliable and consistent information, involving staff in decision-making at local level and having a coherent shared understanding of what the post COVID-19 plan is. The workload of staff at all levels should be monitored by schools and local authorities to ensure it is reasonable and appropriate. Schools and settings will need to consider the potential impacts on the health and well-being of staff and leaders, including work-life balance. There should be clear routes by which concerns can be raised with management and leadership. Clear support mechanisms should be put in place, for example access to employee assistance programmes and to [Education Support Partnership](#).

Timetabling and rotas should support staff's well-being.

Local authorities and governing bodies should be conscious of the well-being of all staff, including senior leaders. It is natural that some staff may require more support than others. Senior leaders will need to consider how to support those who have:

- found the long period at home hard to manage
- concerns over having to deal with learners' well-being issues in the classroom with a lack of support

- developed anxieties related to the virus and their own health and well-being (i.e. fears of contracting the virus in the classroom)
- pre-existing issues that may have increased as a result of the COVID-19 pandemic
- experienced bereavement.

COVID-19 makes it more important than ever that we acknowledge the need to provide a reflective space for staff to deal with and process the often stressful, uncomfortable and sometimes painful experiences of working with learners, young people, their families and the systems around them.

When it is not possible to employ a counsellor for this specific purpose, leaders in schools provide opportunities for staff to discuss issues with them or their colleagues. Sharing experiences and discussing their feelings and emotions can identify areas where additional support is needed, and is a valuable exercise in itself for helping people support their own well-being.

Local authorities should work with schools and settings to provide support to staff working closely with the occupational health provision. All parts of the system should work together to ensure that staff's well-being is supported both directly and indirectly (such as managing messaging, avoiding duplication of work and avoiding unnecessary demands on staff).

Staff should be aware of the Education Workforce Council's [Code of Professional Conduct and Practice](#) and may wish to draw on their good practice guides.

### **Learner well-being**

Learner and staff well-being should be of primary concern. When phasing all learners back to schools and settings, local authorities working with their schools and staff should consider how this has an impact on well-being.

For example, staff should positively reinforce behaviours around social/physical distancing and hygiene as opposed to stigmatising mistakes. Likewise, the timetable and layout should ensure that there are appropriate opportunities for breaks and time outdoors.

Schools and settings will be alert to identify and support learners who exhibit signs of distress. Pastoral care and bereavement support should be planned for and put in place.

More detailed guidance on supporting well-being through learning is found in the [Learning guidance](#)

### **Intensive/specialist support**

For those learners requiring more intensive and/or specialist support this should be available in an appropriate and timely fashion, supported by a clear risk assessment. Local authorities and services across the NHS and social care should work with

schools and settings to identify and support learners' needs. In this respect there is already much good practice to draw on including:

- funding provided to local authorities this year to support the expansion of school and community-based counselling; training teachers in learners' well-being and to introduce universal and targeted interventions in schools
- the work of the Adverse Childhood Experiences (ACE) Hub to train teachers in trauma informed practice and the development of an all-Wales Traumatic Stress Service. This acts as an improvement initiative which offers resources, training and advice to upskill professionals in all sectors to work with people using evidence-based treatment for trauma
- school nursing, which has developed close working arrangements with psychology services in recent years and provide drop-in services in schools which are increasingly providing more mental health support
- development of Matrics Cymru which has been designed to assist in the development, planning and delivery of a Wales-wide approach to providing psychological services to learners and their families
- additional resources which will be made available to support young people, teachers and leaders, and others. This includes focus on learners' mental and emotional health and well-being and providing well-being support in the new environment. The first of these resources was launched on 1 June and is a [Young person's mental health toolkit](#), comprising a variety of online resources which can help them through lockdown and beyond. It contains information on websites, apps, helplines, and more which support mental health and well-being.

Many learners will follow the rules but a minority may not understand. Young learners, for example, will be prone to share equipment and objects, hugging and touching without due thought. This can be particularly so for learners with special educational needs in special schools, especially those with physical needs receiving a lot of tactile support. Special school staff should consult parents and carers about specific support needs, and use their discretion flexibly in agreeing the way forward for specific learners. Schools and settings may need to consider what adjustments are needed to their behaviour policies to respond to this.

## **Safeguarding**

Learners will have encountered different experiences and home environments during lockdown and all staff should be reminded of their safeguarding duties within the statutory safeguarding guidance for education settings [Keeping learners safe](#) and with the [Wales Safeguarding Procedures](#).

The role of the designated safeguarding person (DSP) will be vital and all staff and learners should be informed of who the DSP is and how to contact them. Accessing a trusted adult, or the DSP, may be more difficult with social/physical distancing so schools and settings should consider how learners can talk privately.

At the early stages schools, settings and children's services should continue to work closely together to ensure every child and family has the support needed. Local authorities will already have a range of working practices in place to ensure that

safeguarding partners can work together to keep learners safe. There is an opportunity now for these working practices to be further consolidated.

The Welsh Government has produced a non-statutory [guide](#) to remind practitioners working across agencies of their responsibilities to safeguard learners and to support them in responding to concerns about learners at risk. The guide links to and should be used with the national [Wales Safeguarding Procedures](#).

## Catering

We expect that kitchens will be fully open from the start of the autumn term and normal legal requirements will apply about provision of food to all pupils who want it, including for those eligible for free school meals. Further information and guidance will be provided, to cover any potential issues with the provision of free school meals either on a national or local basis if the need arises.

Schools should of course deliver meals in accordance with the Healthy Eating in Schools (Nutritional Standards and Requirements) (Wales) [Regulations 2013](#). Those meals should be designed to reduce access to food and drink high in fat, sugar and salt, and increase the take-up of fruit and vegetables and oily fish. Other food and drink provided during the day should also be based on the **food and drink requirements** of those [Regulations](#).

Guidance for the hospitality sector has been developed and is available at the following link, this includes guidance on catering facilities which local authorities, schools and settings may find helpful to refer to. Further advice is also available on:

<https://www.food.gov.uk/>

<https://gov.wales/tourism-and-hospitality-businesses-guidance-phased-reopening.html>

<https://www.ukhospitality.org.uk/page/WalesGuidance>

## Estates

We do not consider it necessary for schools and setting to make significant adaptations to their site to enable them to welcome all learners back.

It is highly unlikely that, schools will need to deliver any of their education on other sites (such as community centres/village halls) because spaces used by more than one class or group can be cleaned between use.

All buildings-related risk assessments should be prepared in consultation with the local trade unions. Following a risk assessment, some schools may determine that small adaptations to their site are required, such as additional wash basins. This will be at the discretion of individual schools/settings, based on their particular circumstances.

It is important that, prior to reopening for the autumn term, all the usual pre-term building checks are undertaken to make the school safe. If buildings have been

closed or had reduced occupancy during the COVID-19 outbreak, water system stagnation can occur due to lack of use, increasing the risks of Legionnaires' disease. HSE guidance covering water management and legionella is available: <https://www.hse.gov.uk/pubns/books/l8.htm>

Drinking Water Inspectorate's guidance on bringing buildings back into use after a period of disuse may be helpful. The guidance covers a range of quality issues that should be considered the guidance is available on the DWI's general web page

In classrooms it will be important that schools improve ventilation (for example, by opening windows where it is safe to do so.) Good ventilation is essential at all times. Schools should ensure all systems are working in their normal operating mode.

Natural ventilation via windows or vents should be used as far as possible. Where centralised or mechanical ventilation is present, recirculatory systems should be adjusted to full fresh air, if this is not possible systems should be operated as normal. Where ventilation units have filters present ensure enhanced precautions are taken when changing filters.

### **Educational visits**

[National guidance for the management of outdoor learning, off-site visits and learning outside the classroom](#) is provided by the Outdoor Education Advisers' Panel. Welsh Government supports this guidance produced by a partnership of experts to help ensure that educational visits and activities are safe.

### **School uniform**

It is for the governing body of a school to make decisions regarding school uniform. Some schools relaxed their uniform policy over the summer term. We would, however, encourage all schools to return to their usual uniform policies in the autumn term. Uniform can play a valuable role in contributing to the ethos of a school and setting an appropriate tone.

If a governing body decides to relax its uniform policy a poverty conscious approach should be taken, which bears in mind that some families may struggle to purchase specific or additional items of clothing. PDG-Access should be promoted to eligible families.

### **Breakfast Clubs and after school provision**

Local authorities, working with their schools should consider resuming any breakfast and after school provision, where possible whether this is provision offered by the school or run out of the school by a private provider. It is likely that schools and settings will need to respond flexibly and build this up. It is recognised that this may be logistically challenging, particularly when offering facilities across year groups.

Local authorities should support schools and providers will need to work in close partnership to fully consider how they can make before and after school provision work alongside their wider protective measures.

Schools and childcare partnerships working is vital in this regard as many parents rely on wrap around and out of school childcare at either end of the school day.

### **Contingency planning**

Although the intention is for all learners to return to school in the autumn, every school will also need to plan for the possibility of a further local lockdown.

Given our uncertainty over future transmission levels, for the foreseeable future, it is essential that we prepare for a range of possible circumstances.

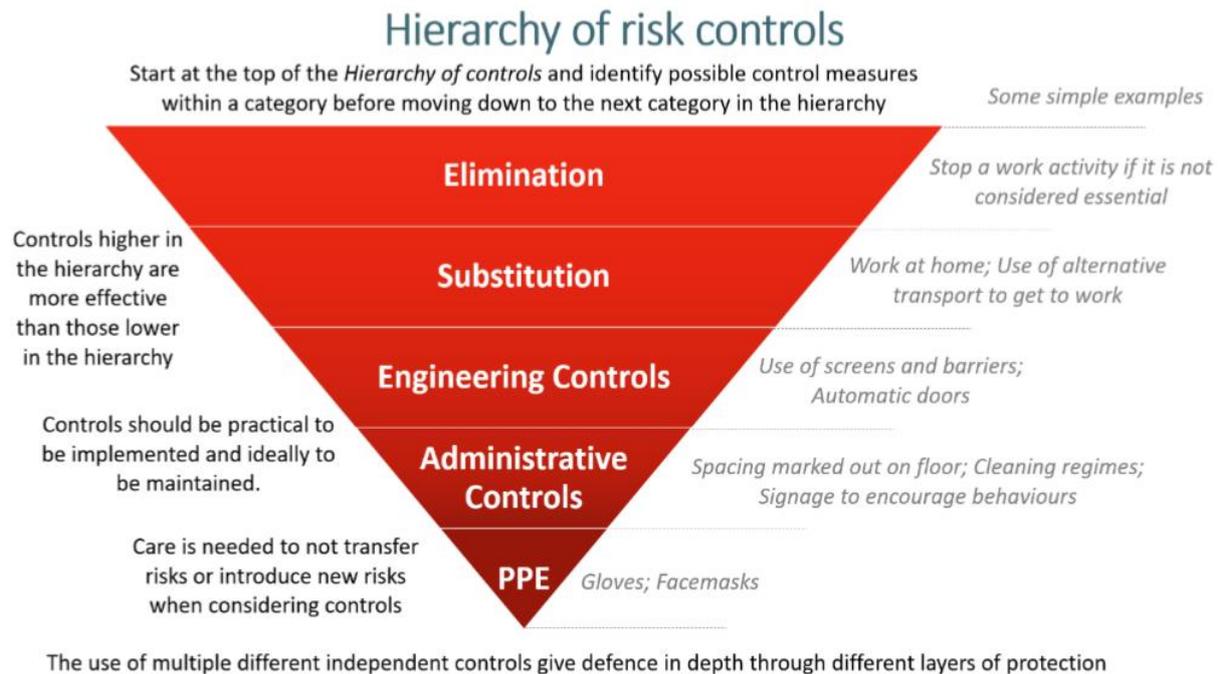
Welsh Government will work closely to monitor health conditions working closely with Public Health Wales and local authorities, in particular in the case of potential localised outbreaks.

### **Policies and procedures**

Schools and settings, working closely with the local authority may wish to revisit their policies and procedures in light of this guidance, including; fire evacuation, behaviour and security.

## Annex A: Approach to risk estimation and management

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/891990/S0329 Risk Estimation to inform risk assessment.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/891990/S0329_Risk_Estimation_to_inform_risk_assessment.pdf)



This hierarchy of controls is a way to prioritise risk control measures based on how effective different types of control are in reducing risks. Risk reduction measures should be assessed in order of the priority given in the hierarchy; it is not a case of simply jumping to the easiest control measure to implement. Types of control higher up the hierarchy are more effective at reducing risks than those lower down. Controls should be practical to be implemented and, ideally, should be able to be maintained easily over time.

It is critical to remember that it will only rarely be feasible to eliminate the risk completely. The combination of controls introduced should aim to reduce the risk to as low as reasonably practicable prioritising structural, environmental interventions over individual level ones.

This of course does not simply mean considering risks of transmission, but also balancing these against risks to wider health and well-being and learning. Ultimately schools need the flexibility to respond to these risks as they are able to.

When considering contact between contact groups, we would advise schools to consider:

1. **Elimination:** Redesign the activity such that the risk is removed or eliminated.

2. **Substitution:** Replace the activity with an activity that reduces the risk. Care is required to avoid introducing new hazards from the substitution.
3. **Engineering controls:** Design measures that help control or mitigate risk.
4. **Administrative controls:** Identifying and implementing the procedures to improve safety.
5. Having gone through this process, PPE should be used where the guidance states recommends this.

## **Annex B: Health and safety risk assessment**

### **Coronavirus (COVID-19) specific**

Everyone needs to assess and manage the risks from coronavirus (COVID-19). This means school employers and leaders are required by law to think about the risks the staff and pupils face and do everything reasonably practicable to minimise them, recognising they cannot completely eliminate the risk of coronavirus (COVID-19). School employers must therefore make sure that a risk assessment has been undertaken to identify the measures needed to reduce the risks from coronavirus (COVID-19) so far as is reasonably practicable and make the school COVID-secure. General information on how to make a workplace COVID-secure, including how to approach a coronavirus (COVID-19) risk assessment, is provided by the [HSE guidance on working safely](#).

Local authorities will continue to support schools and settings undertake a COVID-19 risk assessment by considering the measures in this guidance to inform their decisions and control measures. A risk assessment is not about creating huge amounts of paperwork, but rather about identifying sensible measures to control the risks in the workplace, and the role of others in supporting that. The risk assessment will help local authorities, schools and settings and employers decide whether they have done everything they need to. Local authorities and schools as employers have a legal duty to consult their employees on health and safety in good time. It also makes good sense to involve pupils (where applicable) and parents in discussions around health and safety decisions to help them understand the reasons for the measures being put in place. Employers can do this by listening and talking to them about how the school will manage risks from COVID-19 and make the school COVID-secure. The people who do the work are often the best people to understand the risks in the workplace and will have a view on how to work safely. Involving them in making decisions shows that the school takes their health and safety seriously.

### **Sharing your risk assessment**

Schools and settings should share the results of their risk assessment with their workforce. If possible, they should consider publishing it on their website to provide transparency of approach to parents, carers and pupils (HSE would expect all employers with over 50 staff to do so).

### **Monitoring and review of risk controls**

It is important that employers know how effective their risk controls are. They should monitor and review the preventive and protective measures regularly, to ensure the measures are working, and taking action to address any shortfalls.

### **Roles and responsibilities**

All employers are required by law to protect their employees, and others, from harm. Under the Management of Health and Safety at Work Regulations 1999, the minimum employers must do is:

- identify what could cause injury or illness in the organisation (hazards)
- decide how likely it is that someone could be harmed and how seriously (the risk)
- take action to eliminate the hazard, or if this isn't possible, control the risk.

Schools must appoint a competent person to ensure they meet their health and safety duties.

The relevant duties under health and safety legislation fall to the employer. While in many cases the day-to-day running of the school may be delegated to the headteacher and the school management team. In most cases, the employer is responsible for ensuring that risks are managed effectively. This includes health and safety matters.

The Health and Safety Executive (HSE) provides more information on the role of local authorities and schools as employers in the guidance [The role of school leaders - who does what](#) and a simple guide to who the employer is in each type of school setting in its [FAQs section](#), under 'Who is accountable for health and safety within a school?'. References to actions by employers in this guidance may in practice be carried out by headteachers in schools, but the employer will need to assure themselves that they have been carried out, as they retain the accountability for health and safety. If not already done, employers should ensure that a coronavirus (COVID-19) risk assessment for their school is undertaken as soon as possible. As many pupils have already attended school earlier in the year, the employer is likely to have gone through a lot of this thinking already. We recommend that employers use this document to identify any further improvements they should make.

## **Wider guidance on the risk assessment process**

Health and safety risk assessments identify measures to control risks during education and childcare setting activities. Health and safety law requires the school employer to assess risks and put in place measures to reduce the risks so far as is reasonably practicable. The law also requires employers to record details of risk assessments, the measures taken to reduce these risks and expected outcomes. Schools need to record significant findings of the assessment by identifying:

- the hazards
- how people might be harmed by them
- what they have in place to control risk.

Records of the assessment should be simple and focused on controls. Outcomes should explain to others what they are required to do and help staff with planning and monitoring.

Risk assessments consider what measures you need to protect the health and safety of all:

- staff

- learners
- visitors
- contractors.

Schools will need to think about the risks that may arise in the course of the day. This could include anything related to the premises or delivery of its curriculum or activities, whether on-site or in relation to activities offsite.

### **Consulting employees (general)**

It is a legal requirement that employers must consult with the health and safety representative selected by a recognised trade union or, if there isn't one, a representative chosen by staff. As an employer, you cannot decide who the representative will be.

At its most effective, full involvement of staff creates a culture where relationships between employers and staff are based on collaboration, trust and joint problem solving. As is normal practice, staff should be involved in assessing workplace risks and the development and review of workplace health and safety policies in partnership with the employer. Consultation does not remove the employer's right to manage. They will still make the final decision but talking to employees is an important part of successfully managing health and safety.

Leaders are encouraged to ensure that consultation on any changes to risk assessments that will be in place for the start of the autumn term commence with staff before the summer break, to ensure that those that are on term-time only contracts have adequate time to contribute.

### **Resolving issues and raising concerns**

Employers and staff should always come together to resolve issues. As providers widen their opening, any concerns in respect of the controls should be raised initially with line management and trade union representatives, and employers should recognise those concerns and give them proper consideration. If that does not resolve the issues, the concern can be raised with [HSE](#). Where the HSE identify employers who are not taking action to comply with the relevant public health legislation and guidance to control public health risks, they will consider taking a range of actions to improve control of workplace risks. The actions the HSE can take include the provision of specific advice to employers through to issuing enforcement notices to help secure improvements.



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**Operational Public Health Advice Note for Welsh Government on the investigation and management of clusters and incidents of COVID-19 in educational and childcare settings**

**Author:** Dr Anna Schwappach/ Dr Gwen Lowe

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**FOR WELSH GOVERNMENT AND KEY PARTNERS**

**Review Date:** 7 July 2020

**Purpose and Summary of Document:** To outline the national processes for investigation and management of any clusters and outbreaks of COVID-19 that occur in educational and childcare settings in Wales after 29 June 2020.

## **1 Purpose of this Advice Note**

**This advice note sets out the public health advice for how clusters and incidents of COVID-19 should be investigated and managed when they occur in education and childcare settings in Wales.** It will be reviewed and updated as necessary, in line with national guidance.

## **2 Background**

In March 2020, the Welsh Government (WG) introduced national lockdown measures for preventing the spread of COVID-19 within communities in Wales. Alongside this, the WG announced the closure of most educational and childcare settings. All schools closed for formal education by the 20 March and remained closed for the next 3 months. Whilst children of key workers and vulnerable children continued to attend 'Hub' schools and childcare settings, this represented a very small proportion of normal attendee numbers. There have not been any recognised clusters or outbreaks in these.

On 3 June 2020, the WG Minister for Education announced that schools would increase operations from the 29 June until the 24 July, so all learners have the opportunity to 'check in, catch up and prepare for summer and September'. This increase in pupil numbers will also coincide with a re-opening or increase in numbers of children attending many childcare settings such as day nurseries, which was announced by the First Minister and commenced on 22 June. Whilst WG has outlined steps that should be taken in order to maintain social distancing, it is recognised that there may be circumstances when it will not be possible to maintain social distancing between children and also adults at educational and childcare settings. This is therefore likely to lead to an increase in contact between children and adults from different households with a resultant possible increase in transmission of COVID-19.

Investigation and control of clusters and incidents of cases of COVID-19 will aim to:

1. Protect individuals and communities where outbreaks are occurring, as well as reducing spread to other communities
2. Evaluate control measures to inform national recommendations for outbreak control and ongoing policy and guidance for educational and childcare settings
3. Better understand the epidemiology and transmission of SARS-CoV-2 in educational and childcare settings

### **3 Definitions**

#### **Educational settings to include:**

- *Early years settings e.g. nursery settings*
- *Primary schools*
- *Secondary schools*
- *Special schools/residential settings*
- *Further Education colleges*
- *Higher educational and childcare settings, including halls of residence*

#### **Childcare settings to include:**

- *Full Day Care*
- *Sessional Day Care*
- *Childminders*

- *Open Access Play Provision*
- *Out of School Care*
- *Creche*

### **Potential cluster – needing further investigation**

*"Two or more confirmed cases of COVID-19 among students or staff in the same educational or childcare setting within 14 days"*

or

*"Increase in background rate of absence due to suspected or confirmed cases of COVID-19 (does not include absence rate due to individuals shielding or self-isolating as contacts of cases)"*

### **Potential incident – needing further investigation**

*"Two or more confirmed cases of COVID-19 among children, students or staff who are direct close contacts, proximity contacts or in the same group or cohort (sometimes referred to as 'bubbles')\* in the educational or childcare setting within 14 days".*

*\* a small group, cohort ('bubble') might be a class, year group or other defined group. This definition aims to distinguish between transmission occurring in the community versus transmission occurring within the educational or childcare setting.*

### **Case**

*Confirmed case: laboratory test positive case of COVID-19 with or without symptoms*

*Possible case: new continuous cough and/or high temperature and/or a loss of, or change in, normal sense of taste or smell (anosmia)*

### **Contact**

*Direct close contacts: Face to face contact with a case for any length of time, within 1m, including being coughed on, a face to face conversation, unprotected physical contact (skin to skin). This includes exposure within 1 metre for 1 minute or longer.*

*Proximity contacts: Extended close contact (within 2m for more than 15 minutes) with a case or travelled in a small vehicle with a confirmed case*

### **Infectious period**

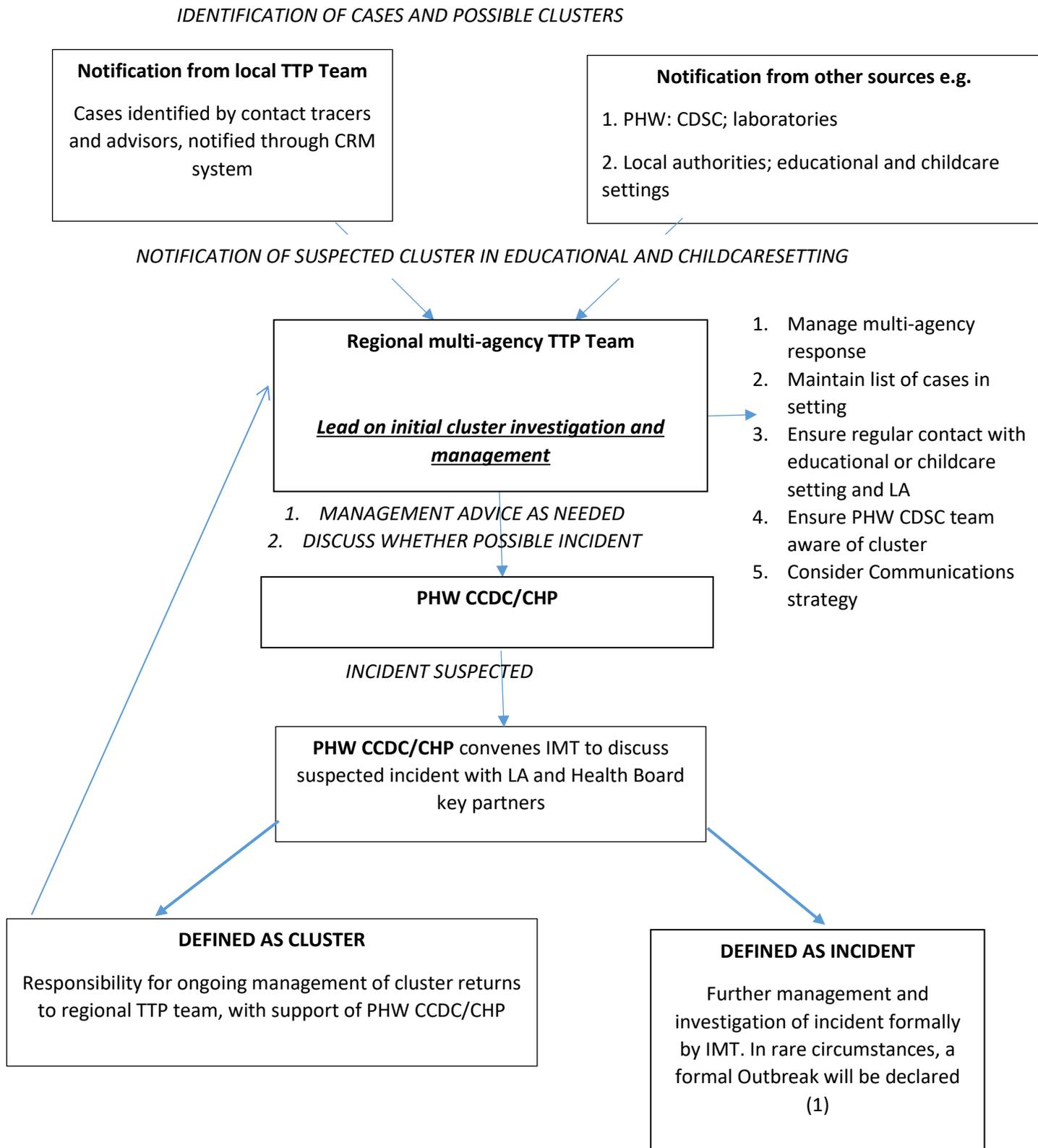
The infectious period is considered to be from 48 hours prior to symptom onset to 7 days after, or 48 hours prior to testing if the case was asymptomatic.

## **4 Summary of actions in investigation and management**

A summary of the overarching steps in investigation and management of clusters and incidents of COVID-19 in educational and childcare settings is outlined in figure 1. Further detail is given in section 5 but these are, broadly:

1. Identification of cases in possible cluster
2. Gathering of minimum information
3. Initial cluster management and risk assessment
4. Identification of an incident and incident management

**Figure 1: Flow chart for investigation and management of clusters and incidents of COVID-19 in educational and childcare settings**



(1) Communicable Disease Outbreak Plan for Wales, 2020; CCDC: Consultant in Communicable Disease Control; CDSC: Communicable Disease Surveillance Centre CHP: Consultant in Health Protection; CRM: Customer Relationship Manager; EDPH: Executive Director of Public Health; IMT: Incident Management Team; LA: Local Authority; OCT: Outbreak Control Team; TTP: 'Track, Trace, Protect' contact tracing system.

## **5 Investigation and management of clusters and outbreaks**

### **5.1 Identification of clusters**

Clusters of cases in educational and childcare settings will be identified by:

- Notification ('flagging') of individual cases if possible on the CRM contact tracing system by contact tracers and contact advisors (through discussion with confirmed cases and contacts (or their parent/guardian)). These possible 'flagged' cases should be escalated to the regional level through the CRM system.
- Direct notifications from usual sources, such as from laboratories and the PHW CDSC surveillance team, educational and childcare settings and local authorities, and health practitioners (including school nurses). These notifications may come through local and regional teams, or directly to the national PHW team, including through the national 0300 00 300 32 number. If they come directly to the national team they should initially be fed down into the regional team.

**When a confirmed case is identified in an educational or childcare setting contact should be made with that setting to identify if there are any further cases there. If there are concerns that there could be a cluster of cases in this educational or childcare setting, the regional TTP team will become the point of co-ordination for the further investigation of this possible cluster.**

### **5.2 Gathering of minimum information**

A clear lead for the investigation of a possible cluster should be appointed in the regional TTP to enable a rapid and timely risk assessment of the situation.

Early and affective communication between the regional lead for a cluster and the head of the educational or childcare setting with a possible cluster is crucial. A clear point of contact with a designated person in the setting (usually the Head Teacher, Manager or equivalent and a deputy if needed) should be established. This contact should ideally be available outside of normal working office hours. The educational or childcare setting should be asked to regularly update the regional team with any new information until the regional lead considers that the cluster is no longer of concern.

The initial response to a possible cluster should involve the regional TTP team gathering information on cases and possible links between them. They should gather this information from, for example, cases (or their parents/guardians),

contacts, educational or childcare institutions (through the head of the setting) and LAs.

**Initial data collection should include the following information:**

1. Setup of setting:
  - Nature of educational or childcare setting (e.g. LA/ church school/ nursery)
  - Layout of school/setting buildings and number of sites
  - Total children/students currently attending, numbers of small groups, cohorts ('bubbles') and number of children/students in each one
  - Total number of all staff, *\*including but not limited to teaching, support, administrative, cleaning, caretaking, catering staff and any volunteers or helpers*
  - Any vulnerable or extremely vulnerable children or staff who are attending setting and which small group or cohort they are in; if the setting is a special school, identify the nature of pupils' special needs
2. Whether the setting is aware of and following guidance on infection control measures/social distancing measures for staff and students (including the use of PPE if pupils require personal care)
3. Confirmed and possible cases in children/students and which small group or cohort (classes, groups and year groups) they attend; include symptomatic children/students awaiting testing and any known to have been hospitalised
4. Confirmed and possible cases in staff\* (to include symptomatic staff awaiting testing and any known to have been hospitalised); their roles and groups they interact with; check whether staff move between sites if applicable
5. Onset dates of cases and symptoms of cases (dates of test where asymptomatic)
6. Any siblings or children of cases who also attend the setting
7. Potential number of contacts meeting contact definitions; prompt the setting to consider if visitors (e.g. parent/guardians, governors, professional visits, supply teachers) in the relevant time period may be contacts
8. The operational impact on the educational or childcare setting thus far of cases and self-isolation of contacts and likely impact of any new self-isolation
9. Communication with parent/guardians thus far, with information on what has been sent out to date

### **5.3 Initial cluster management and risk assessment**

The regional cluster lead should develop the initial investigation and management of the cluster of cases in order to assess how significant the risk from it may be (box 1).

Initial investigation of a cluster should consider:

- *Whether the index case or initial cases are likely to have acquired their infection in the setting or from another source, such as at home*
- *Whether the cases are connected in time and space or whether there is evidence to suggest a wider spread of cases*
- *Whether there are any initially obvious causes of the cluster of cases e.g. social distancing measures were not followed at the time*

**Box 1: Initial risk assessment should be based on:**

- a. Severity** – any children, students or staff reported to have been admitted to hospital, ICU or known to have died as a result of COVID-19
- b. Spread** – Establish the date 48 hours before the earliest onset of symptoms or positive test for any confirmed or suspected case, number of confirmed or suspected cases currently absent, number of cases by year group and class
- c. Uncertainty** – can the setting distinguish between absence rate for symptoms of COVID-19 vs absence due to non-attendance due to shielding/self-isolation as contacts or parental choice to withdraw child from school.
- d. Control measures** – assess actions taken to date and number of cases and contacts already self-isolating, check compliance with self-isolation of cases, infection control, handwashing, current social distancing measures in place, layout and separation of staff and students, consider the ages of children/young people and likely adherence to measures.
- e. Context** – communication issues, operational issues, anxiety or misinformation circulating in staff and parent/guardians/children/young people; ages and groups affected; children’s adherence to social distancing/IPC measures; vulnerable children.

**The following actions should be taken:**

1. There should be a detailed discussion with the head of the educational or childcare setting to ensure that all WG advice for schools (including IP and C guidance) is being implemented and to consider whether any additional actions can be taken to increase measures already put in place<sup>2</sup>.
2. Where a cluster is identified in an educational or childcare setting, it will become particularly important to ensure that all identified cases and contacts are following WG/PHW guidance on testing and isolation and extra resources may be needed in the local TTP team to ensure timely follow-up with them.
3. The educational or childcare setting should be asked to contact the regional team managing the cluster if they identify any new cases or have any other concerns. They should be advised of a clear route for this (named contact/s

<sup>2</sup> See guidance at: <https://gov.wales/protective-measures-childcare-settings-keep-childcare-safe>; <https://gov.wales/keep-education-safe-operational-guidance-schools-and-settings-covid-19#section-43726>; <https://www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-settings/covid-19-decontamination-in-non-healthcare-settings>

and number for them both in and out of hours). The educational or childcare setting should be emailed a copy of the Minimum Dataset for Educational and childcare Settings spreadsheet, if this assists them in keeping track of absences related to COVID-19. If the regional team are not contacted by the school regularly, they should make contact with the school themselves until the cluster is considered over. The educational or childcare setting should also be reminded that other infections such as meningitis are still prevalent, and should seek medical attention where appropriate.

4. Educational and childcare settings should be reminded that, as per WG/PHW guidance, if a child, young person or staff member develops symptoms compatible with COVID-19, they should be sent home, advised to self-isolate for 7 days and arrange to have a test to see if they have COVID-19. Further details on what to do in this situation are explained in detail in WG guidance<sup>3</sup>.
5. The local TTP team will contact all cases and contacts of cases to give advice on testing and isolation (as per national guidance and under the guidance of the regional team). However in general:
  - a. If a child, young person or staff member tests negative, and is well, they can return to their educational or childcare setting when recovered from their acute illness.
  - b. If a child, young person or staff member tests positive, the rest of their class or group within their childcare or education setting (if defined as contacts) should be sent home and advised to self-isolate for 14 days from the last point of contact with the case.
  - c. Any contacts who become symptomatic will be advised to arrange a test for COVID-19 or, if they do not get tested, should remain excluded for 14 days from the last point of contact with the confirmed case.
  - d. The other household members of that wider class or group (i.e. household contacts of contacts) do not need to self-isolate unless the child, young person or staff member they live with in that group subsequently develops symptoms.
6. The regional cluster lead should consider what wider communications are needed with staff, governors, parent/guardians and pupils. This may include the educational or childcare setting sending out standard letters to contacts and non-contacts, as well as displaying posters and using on-line platforms such as Scoop and Hwb. Settings should be provided with this template letter.
7. The regional lead should also make contact with the PHW CDSC team, both to make sure that they are aware of the suspected cluster under review and to identify whether they have any further information that might be relevant to this cluster investigation and management.

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<sup>3</sup> See guidance at: <https://gov.wales/keep-education-safe-operational-guidance-schools-and-settings-covid-19#section-43726>

8. A cluster should usually be considered over when there has been 28 days since the onset of the last confirmed case in the educational or childcare setting and the results of any possible cases in children/students or staff in that time have tested negative.

**Where the regional lead for the cluster has concerns about a high risk cluster or a potential incident, they should discuss it with the PHW Consultant in Communicable Disease Control/Consultant in Health Protection (CCDC/CHP) assigned to their region. If they are not available, the COVID-19 duty CCDC/CHP should be contacted instead. Together they should consider the information available and decide whether a cluster of cases *could* constitute an incident. If they think it could be an incident they should proceed to point 5.4.**

## **5.4 Incidents in an educational or childcare setting**

If an educational or childcare setting based incident is suspected, the following actions should be taken:

1. The PHW CCDC/CHP will make urgent contact with designated senior colleagues in the relevant LA, PHW and Health Board, in line with existing Health Protection arrangements. An urgent incident meeting (Incident Management Team (IMT)) is likely to be convened to which key individuals who are needed to investigate and manage the situation will be invited. Any immediate control measures needed immediately will be implemented prior to this meeting. Urgent actions to control the situation (including class closures/ whether widespread swabbing required) will be agreed at this meeting.

## **Box 2: When to declare an outbreak in an educational or childcare setting**

Most clusters and incidents will be comprehensively dealt with under the arrangements described in 5.4 and 5.5, which allows for investigations and control measures to be rapidly instituted, including wider swabbing of identified school classes/groups, if required.

In rare circumstances, an educational or childcare setting incident will be so complex it will require management under the comprehensive formal structures of an Outbreak Control Team.

When and how an outbreak should be declared and managed is explained in detail in the Communicable Disease Outbreak Plan for Wales (2020).

**When a decision is made to formally declare an outbreak, the outbreak should be managed as per the guidance in the Communicable Disease**

## **5.5. Management of an incident in an educational or childcare setting**

The further management of an incident will develop from decisions taken by the IMT and may vary based on the particular circumstances of the incident, the characteristics and risks from the cases and the characteristics and type of educational or childcare setting. However, the following points should be considered:

1. An approach for further investigation and management should be agreed by the IMT as soon as possible. The key questions that it should seek to answer include:
  - a. How was infection introduced into this setting?
  - b. What is known about the extent of spread?
  - c. Could influenza/another virus be co-circulating?
2. The IMT should discuss with the head of the educational or childcare setting, whether further measures need to be taken in the setting based on risk assessment and pattern of spread. These should include consideration of whether:
  - a. Adjustments should be made to how the educational or childcare setting is operating to facilitate IP and C measures and social distancing.

- b. Further groups need to be asked to self-isolate (e.g. class groups, other functional groups or year groups).
3. The IMT should make an assessment on whether to undertake an enhanced investigation including testing of a wider group of staff and children/students. The group for testing may be wider than the group identified for exclusion and could include the whole school/setting or a distinct section of the school/setting (e.g. year group, preschool, primary or secondary school). Wider testing should be particularly considered when mass testing might enable real time public health decision making to protect the health of individuals who attend the educational and childcare setting, their families or the wider community.
4. Examples of situations when this might be considered could include those when:
  - the index case is a confirmed case in a child attending a mainstream school/setting and risk assessment suggests that the household is not the source i.e. suspicion is that infection is acquired in the setting
  - one confirmed case in a teacher/staff member with suspected cases in children in a mainstream school/setting i.e. suspicion is that the teacher/staff member acquired the infection from the children
  - suspected cases in more than one child attending mainstream school with the index a confirmed case in a family member i.e. we know how infection got into school but there appears to be onward transmission and need to assess extent of this.
5. How any mass testing may be undertaken is likely to vary depending on the nature of any incident and the educational and childcare setting, and the quickest and most practical way of getting this done. The IMT will make the decision on this. Options for undertaking mass testing could include:
  - a. swabbing of children and staff by health professionals at the setting or a designated clinic/site or by a Mobile Testing Unit
  - b. parents swab children and staff self-swab at school
  - c. postal self-swabbing at home for children and staff
6. In some circumstances there may be the need for other further investigations in a subset of the incident. These could include:
  - i. more detailed follow up of households of positive cases
  - ii. follow-up antibody testing
  - iii. genomic testing
7. In an incident in an educational or childcare setting, it will be important to work closely with LA education colleagues and these may become co-opted members of IMTs. There should also be a clear line of communication between the educational or childcare setting and IMT, with a named point of contact (that should ideally also be available out of hours). Educational and childcare settings

should be asked to regularly update IMT members with progress until the incident is over.

8. The importance of a clear communications strategy is particularly important in educational and childcare settings, given the level of media attention that this kind of incident is likely to generate. Early involvement of colleagues from communications teams in PHW and partner organisations is therefore crucial.

**An incident should be declared over when there has been 28 days since the onset of the last confirmed case in the educational or childcare setting and the results of any possible cases in children/students and/or staff in that time have tested negative.**