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Department for Education

Guidance

SEND and specialist settings - additional operational guidance: coronavirus (COVID-19)

Updated 6 April 2021

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Latest updates and reviews

This guidance will be regularly reviewed.

On 5 April we updated the guidance on face coverings (systems of controls - annex A).

Who this guidance is for

This additional guidance is for the leaders and staff of:

- special schools, including non-maintained special schools
- special post-16 institutions (SPIs)
- alternative provision (AP) (including hospital schools)

The purpose of this guidance is to provide additional information and support that will be helpful to you in delivering education in these settings. Separate guidance is available for:

- early years
- schools
- further education (FE colleges and providers)
- children's social care
- out-of-school settings

You should work closely with young people, parents or carers, staff and unions when agreeing the best approaches for your circumstances.

Summary

These main guidance documents include operational issues which are common to both mainstream and specialist settings and which apply to schools and FE settings.

The schools coronavirus (COVID-19) operational guidance contains information on:

- school workforce (vulnerable staff, pregnancy, employers' health and safety, equalities, supporting staff, staff deployment, supply staff, other support, recruitment, ITT, performance management, staff leave)
- transport (dedicated transport, public transport, pupils travelling from abroad)
- school meals
- remote education (expectations, online safety)
- estates (ventilation, fire safety, building checks)
- educational visits
- school uniform
- wraparound provision and extra-curricular activity
- curriculum (RSHE, music, dance and drama)
- catch-up support
- behaviour, discipline and wellbeing
- safeguarding
- elective home education
- inspection (state-funded schools, independent schools)
- assessment and exams
- contingency planning
- health and safety risk assessment – coronavirus (COVID-19) specific

The further education coronavirus (COVID-19) operational guidance contains information on:

- changes to delivery
- minimising coronavirus (COVID-19) risks (delivering exams, site safety, off-site provision and work placements, public facing facilities)
- music, physical activity and sports
- education and training delivery (on-site delivery, remote education, digital support)
- transport
- workforce (vulnerable staff, pregnancy, employers' health and safety, supporting staff, recruitment and ITE)
- supporting vulnerable students
- transition to FE
- supporting students with special educational needs and disability (SEND)
- safeguarding
- mental health and wellbeing
- residential providers
- funding (16 to 19 funding arrangements, T-Levels, free meals, AEB, traineeships, supported internships and access to work and high-needs funding)
- exams and assessment
- inspection
- health and safety risk assessment – coronavirus (COVID-19) specific

1. Introduction

This is additional guidance for special schools, special post-16 institutions, and alternative provision (including hospital schools), and has been updated to reflect that from 8 March 2021 all pupils and students should be allowed to attend school or college.

It should be read alongside the main guidance documents:

- schools coronavirus (COVID-19) operational guidance
- further education coronavirus (COVID-19) operational guidance

From 8 March, you should continue to allow all pupils and students to attend.

Shielding advice is being paused nationally from 31 March. From 1 April, all CEV pupils should attend their school unless they are one of the very small number of pupils under paediatric or other specialist care and have been advised by their GP or clinician not to attend. Pupils who live with someone who is CEV should continue to attend school as normal.

Any pupils or students not attending their setting because they are following public health advice should receive remote education.

Joint working with young people, parents and carers and families continues to be essential, alongside collaborative working with local partners and all other organisations involved with supporting the child or young person and their family.

2. Public health advice

We have worked closely with the Department of Health and Social Care (DHSC) and PHE to develop this guidance. Based on the latest evidence, including the recent ONS data, PHE and DHSC advise that the risks to education staff are no different from those for most other occupations.

Implementing the system of controls creates a safer environment for pupils and staff where the risk of transmission of infection is substantially reduced. The way to control this virus is the same even with the current new variants. We are further strengthening the measures to provide more reassurance and to help decrease the disruption the virus causes to education.

Where something is essential for public health reasons, as advised by PHE, we have said 'must'. Where there is a legal requirement we have made that clear. This guidance does not create any new legal obligations.

You must comply with health and safety law and put in place proportionate control measures.

You should:

- review your health and safety risk assessments
- address the risks identified using the system of controls: annex A

All elements of the PHE endorsed system of controls in annex A are essential. All settings need to cover all key elements, but the way you implement the elements will differ based on your individual circumstances

Health and safety legislation

Educational providers must protect people from harm. This includes taking reasonable steps to protect staff, pupils and others from coronavirus (COVID-19) within your setting.

To support the wider return of more pupils and students, you should consider any additional risks and control measures needed to enable a return to full capacity.

To prepare for this you should:

- update your risk assessment
- make sure you're following the system of controls to reduce the risk to the lowest reasonably practicable level
- have a contingency plan in place for any local outbreaks or changes in restrictions
- communicate any changes in your processes with parents and carers

You should implement sensible and proportionate control measures which follow the health and safety hierarchy of controls to reduce the risk to the lowest reasonably practicable level.

You must continue reviewing and updating your risk assessments, treating them as 'living documents' as the circumstances at your school or college and the public health advice changes. This includes having active arrangements in place to monitor that the controls are:

- effective
- working as planned

You should notify your staff and their health and safety representatives of review outcomes.

Staff who are clinically extremely vulnerable (CEV) and clinically vulnerable (CV)

CEV staff are currently advised not to attend the workplace. Staff who are CEV will previously have received a letter from the NHS or their GP telling them this (no new letter is required), and there is guidance for everyone in this group. It provides advice on what additional measures individuals in this group can take.

Employers should talk to staff about how they will be supported, including working from home.

You should continue to pay CEV staff on their usual terms.

Those living with someone who is CEV can still attend work where home-working is not possible and should ensure they maintain good prevention practice in the workplace and home settings.

Shielding advice is being paused nationally from 31 March. From 1 April, CEV individuals are no longer advised to shield but must continue to follow the rules in place for everyone under the current national restrictions. Staff in education settings who are CEV will be advised to continue to work from home where possible, but if they cannot work from home should attend their workplace.

CEV individuals (over 18) have been prioritised for vaccination in phase 1 before the general population and in line with the priority ordering set by the Joint Committee on Vaccination and Immunisation. Current DHSC guidance advises that CEV individuals should continue to shield, while shielding is still advised, even after they have been vaccinated. This may change as we get further data on the effects of vaccination.

CV staff can continue to attend their setting. While at work they must follow the system of controls to minimise the risks of transmission. Staff who live with those who are CV can attend the workplace but should ensure they maintain good prevention practice in the workplace and at home.

You will need to follow the specific guidance for pregnant employees because pregnant women are considered clinically vulnerable.

The guidance on staff who are CEV and CV will be kept under review.

Further information on workforce can be found in the:

- schools coronavirus (COVID-19) operational guidance
- further education coronavirus (COVID-19) operational guidance

3. Attendance

From 8 March 2021 school attendance is mandatory for all pupils.

It is vital for pupils and students to attend school or college to minimise, as far as possible, the longer-term impact of the pandemic on their education, wellbeing and wider development.

The usual rules on school attendance apply to all pupils including:

- parents' duty to secure their child's regular attendance at school (where the child is a registered pupil at school, and they are of compulsory school age)
- the ability to issue sanctions, including fixed penalty notices in line with local authorities' codes of conduct

As usual, you are responsible for recording attendance, following up absence and reporting children missing education to the local authority. Special post-16 institutions should continue to allow students to attend as per their usual timetable.

Encouraging regular school attendance

Guidance for schools and local authorities to support them to improve school attendance is available.

You should continue to communicate clearly and consistently the expectations around school attendance to families and any other professionals who work with the family where appropriate. Where necessary, discussions should have a collaborative approach, focusing on the welfare of the child or young person and responding to the concerns of the parent, carer or young person. This conversation is particularly important for children with a social worker.

It is likely that some pupils, parents and households may be reluctant or anxious about attending school.

This may include pupils who:

- have themselves been shielding previously but have been advised they no longer need to shield
- live in a household where someone is clinically vulnerable or clinically extremely vulnerable (including young carers)
- are concerned about the possible increased risks from coronavirus (COVID-19) such as those who have certain medical conditions

Discuss any concerns with parents and carers and provide reassurance about the measures you are putting in place to reduce any risks, including the system of controls and testing. Discuss with individual parents other specific accommodations that can be put in place to ensure that the pupil can regularly attend, and emphasise the benefits of regular attendance.

You should also identify pupils who are reluctant or anxious about attending or who are at risk of disengagement and develop plans for re-engaging them.

You may want to put particular emphasis on:

- disadvantaged and vulnerable children and young people
- pupils who were persistently absent prior to the pandemic
- pupils who have not engaged with school regularly during the pandemic

To support families who will need additional help to secure pupils' regular attendance, you can use the additional catch-up funding that has been provided, as well as existing pastoral and support services, attendance staff and pupil premium funding. To help schools make the best use of this funding, the Education Endowment Foundation (EEF) has published a support guide for schools with evidence-based approaches to catch up and a further school planning guide: 2020 to 2021.

You should also work closely with other professionals where appropriate to support school attendance. Continue to notify the pupil's social worker, if they have one, of non-attendance.

4. Special schools and special post-16 institutions: attendance expectations

Vulnerable children, and children of critical workers, should continue to be able to attend school unless they receive a positive test result or have to self-isolate. From 8 March 2021, school attendance is mandatory for all pupils.

From 8 March we expect that every 16 to 19 student (or 19 to 25 with an EHCP) undertakes the majority of their planned hours on site. Special post-16 institutions should continue to allow students to attend as per their usual timetable.

You may encounter instances where you cannot provide your usual interventions and provision at adequate staffing ratios, or with staff with vital specialist training. You may need to alter the way in which you deploy your staff and use existing teaching and support staff more flexibly. If, having pursued all the immediate options available, you still have concerns about staffing capacity, you should talk to your local authority or academy trust point of contact. You should continue to work collaboratively with families to agree an approach that is in the child or young person's best interests.

5. Alternative provision: attendance expectations

From 8 March, school attendance is mandatory for all pupils.

You may encounter instances where you cannot provide your usual interventions and provision at adequate staffing ratios, or with staff with vital specialist training. You may need to alter the way in which you deploy your staff and use existing teaching and support staff more flexibly. If, having pursued all the immediate options available, you still have concerns about staffing capacity, you should talk to your local authority or academy trust point of contact. You should continue to work collaboratively with families to agree an approach that is in the child or young person's best interests.

Hospital schools (including child and adolescent mental health services (CAMHS) units)

From 8 March, school attendance is mandatory for all pupils. Providers should offer full-time education where it is safe and feasible to do so and in line with hospital infection prevention and control (IPC) measures. You should work with your local NHS trusts to deliver a broad and balanced curriculum for all pupils as far as their health permits. We expect local NHS trusts to continue to work collaboratively with headteachers to enable pupils to receive their education, including through access to classrooms and space in which to teach. Where it's not possible to provide face-to-face education for all pupils, for example, because of current physical capacity restraints at the hospital, then please use your own risk assessments to prioritise the pupils with the greatest need.

Mainstream schools should continue to support their pupils in hospital, including through remote learning support, to minimise the impact of their hospital stay on their education.

6. Recording attendance

Special schools and alternative provision (AP)

You should record attendance in accordance with the pupil registration regulations for all pupils, in the normal way.

You should use code X if a pupil is self-isolating or quarantining because of coronavirus (COVID-19) in accordance with relevant legislation or guidance published by PHE or the DHSC.

Schools should follow up on absences of pupils who are expected to be in school.

We will review and provide further advice to you in due course on what should be included in pupils' attendance records in end of year reports.

Post-16 provision

If the vulnerable student wishes to be absent from face-to-face education during local or national restrictions, they should let their setting know. The young person should not be included in the coronavirus (COVID-19) attendance monitoring data as 'expected to attend'. Further information on how to complete the educational setting status form is available.

7. Special residential settings

We want children and young people in residential specialist provision to continue to receive high-quality teaching and specialist professional support because they are more likely than most to have particular needs that are extremely challenging to manage or provide for at home. Some will also lack suitable alternative accommodation and therefore be disproportionately impacted by being out of their setting.

You may encounter instances where you cannot provide your usual support and provision at adequate staffing ratios, or with staff with vital specialist training. You may need to alter the way in which you deploy your staff and use existing teaching and support staff more flexibly. If, having pursued all the immediate options available, you still have concerns about staffing capacity, you should talk to your local authority or academy trust point of contact.

The local authorities, which have placed the child or young person in your setting, should be kept informed if there are risks to your ability to deliver provision. This will ensure the children or young people continue to be supported. Local authorities should help with any staff movements needed as far as possible and ensure appropriate infection and public health risks have been appropriately considered.

If you are temporarily unable to provide full provision it is likely to be preferable to allow the child or young person to remain resident, rather than to send them home, particularly if they lack suitable alternative accommodation. The setting should discuss this with the family and young person and the commissioning local authority.

Any necessary health and therapy support (including access to medical supplies) should continue to be provided if the child or young person returns to their family home.

For residential special schools and residential special post-16 institutions, local authorities should maintain a register of all pupils and students with Education, Health and Care (EHC) plans, plus any still under assessment for EHC plans, who have been sent home due to issues related to coronavirus (COVID-19). The local authority should also contact the family frequently to ensure that risks are being managed and to establish whether additional support is necessary and how that will be delivered.

All pupils and students can travel between their boarding provision and home, including those who attend weekly boarding provision. However, residential providers should support pupils and students to reduce travel between home and educational accommodation, for example, only travelling when necessary for the purpose of education. Those involved in the provision of home to school or college transport should do all that is reasonably practicable to maximise social distancing where possible and minimise the risk of transmission. Public transport should be avoided if possible.

Where the Health Protection (Coronavirus, Restrictions) (All Tiers) (England Regulations 2020 (as summarised in the national lockdown guidance) have introduced limits on people gathering indoors or outdoors, there are exceptions to ensure that where children and young people live away from home in residential settings they are still able to have visits from parents. We expect parental visits to happen only in very exceptional circumstances. You should ensure that appropriate arrangements are in place to allow children and young people to remain in contact with their parents and carers.

8. EHC plans

Where a pupil or student has an EHC plan, it remains the duty of the local authority and health commissioning body to secure or arrange the provision specified in the plan (under section 42 of the Children and Families Act 2014).

All therapies and support that would normally be in place for children and young people with EHC plans should be provided, and our focus is on supporting local authorities, health commissioning bodies and education settings to do so. However, there may be times when it becomes more difficult to do so than usual.

In collaboration with local authorities and health partners (where applicable), you should work with families to co-produce alternative arrangements for delivering provision. These decisions should be considered on a case-by-case basis which takes account of the needs and circumstances of the child or young person, avoiding a 'one size fits all' approach.

In some circumstances local authorities have worked collaboratively with settings and families to agree flexible and creative solutions for delivering support.

The statutory duties and timescales remain in place for EHC needs assessments and reviews. If the format needs to be different because children or young people are isolating or shielding, it may be more appropriate to gather information electronically and to hold the review by phone or virtually. However, it is important that the assessments and reviews continue to ensure that the child or young person, and their parent and carer, is at the centre of the process.

In addition, local authorities must continue to meet their statutory duties to finalise placements for September. It is important that you co-operate in supporting requests about potential placements, providing families with advice and information where requested.

At this stage, we do not intend to use the powers under the Coronavirus Act 2020 to modify the section 42 duty, but we will keep this position under review based on the evidence.

9. Children or young people self-isolating or shielding

A small number of pupils and students will still be unable to attend in line with public health advice to self-isolate because they:

- have symptoms or have had a positive test result
- live with someone who has symptoms or has tested positive and are a household contact
- are a close contact of someone who has coronavirus (COVID-19)

We know from growing evidence that many children identified at the start of the pandemic as CEV are not at increased risk of serious outcomes from coronavirus (COVID-19) and children are gradually being removed from the shielding patient list (SPL) as appropriate, following review with a clinician.

Shielding advice is being paused nationally from 31 March. From 1 April, all CEV pupils should attend their school unless they are one of the very small number of pupils under paediatric or other specialist care and have been advised by their GP or clinician not to attend. Pupils who live with someone who is CEV should continue to attend school as normal.

Schools should not encourage parents to request unnecessary medical evidence such as doctors' notes from their GP when their child is absent from school due to illness. This is normal practice and is already set out in the school attendance guidance but is especially important in the context of the pandemic and the coronavirus (COVID-19) vaccination programme. If evidence is required, it can take the form of prescriptions, appointment cards, text or email confirmation of appointments, rather than a doctors' note. As usual, input from GPs should only be sought where there are complex health needs or persistent absence issues.

You are required to provide remote education to pupils who are unable to attend school on-site because they are complying with government guidance, as provided for in the Temporary Continuity Direction. You should keep a record of this activity but do not need to record it in the attendance register.

You should offer pastoral support to pupils and students who are:

- self-isolating
- shielding
- vulnerable

The DHSC guidance for CEV is not compulsory, although pupils, students and parents are strongly advised to follow the guidance in order to help stay safe. However, in some exceptional circumstances it may be that the health risks need to be balanced with the wider impact of the child or young person not attending education and accessing the support that would normally be delivered. This might be due to the level of support that they need or their ability to access remote education and additional services such as therapies, as well as the impact on wellbeing for the wider family.

In these circumstances you should work with parents and the other organisations to agree the best arrangement for the or young person and their family to ensure that they continue to receive the support they need.

Where pupils are not able to attend school, as they are following clinical or public health advice related to coronavirus (COVID-19), the absence will not be penalised.

Where pupils who are self-isolating are within our definition of vulnerable, it is important that you put systems in place to keep in contact with them.

When a vulnerable pupil is required to self-isolate, you should:

- notify their social worker (if they have one)
- agree with the social worker the best way to maintain contact and offer support

You should have procedures in place to:

- check if a vulnerable pupil is able to access remote education support
- support them to access it (as far as possible)
- regularly check if they are accessing remote education

10. Working with health bodies, local authorities and other agencies

Where children and young people with an EHC plan are in receipt of health provision, you should work collaboratively with their local authority, Clinical Commissioning Group (CCG) and health providers to agree appropriate support in view of the latest and current local public health guidance. Therapists and other professionals may continue to visit education settings to provide therapies and support, where this is reasonably necessary.

Where children and young people with EHC plans are not attending their education setting, multi-agency professionals should collaborate to agree how the provision set out in the EHC plan can be delivered. This may include face-to-face visits to the home, or virtual support by means of video or telephone calls, or via email.

11. Visiting specialists, support staff and wider provision

There is an exception within the coronavirus (COVID-19) regulations to allow for the continued provision of health and care services. This means that children and young people can continue to receive appropriate support from health and social care services where it is reasonably necessary for the purposes of provision specified in an EHC plan. Specialists, therapists, clinicians and other support staff for pupils with special educational needs and disability (SEND) can provide interventions as usual where this is reasonably necessary, including where this requires them to move between settings.

Settings have continued to offer wraparound provision, such as breakfast and after-school clubs. Vulnerable children and young people can access this provision in any circumstances. For information on which children are eligible to attend wraparound childcare and out-of-school settings for face-to-face provision please see the guidance on protective measures for holiday and after-school clubs, and other out-of-school settings.

12. Respite care

Social care services for disabled children which provide respite care are able to continue to operate. This includes provision for residential and non-residential respite services to continue, and both formal and informal care in the family home. Read our coronavirus (COVID-19) guidance for children's social care services.

13. Remote education expectations and delivery

Those not receiving on-site education should have suitable remote education, taking into account the expectations set out in the:

- schools coronavirus (COVID-19) operational guidance
- further education coronavirus (COVID-19) operational guidance

The temporary continuity direction makes it clear that the schools affected have a duty to provide remote education for state-funded, school-age children whose attendance would be contrary to government guidance or law around coronavirus (COVID-19).

Post-16 settings should refer to the detailed guidance on remote education expectations set out in the further education coronavirus (COVID-19) operational guidance.

For pupils and students with SEND, and those in alternative provision settings, their teachers are best placed to know how their needs can be most effectively met to ensure they continue to make progress if they are not in face-to-face education.

We recognise that some pupils and students with SEND may not be able to access remote education without adult support and so expect you to work with families to deliver an ambitious curriculum appropriate for their level of need. Further details on delivering remote education for children and young people with SEND is set out in remote education good practice.

You should have systems for checking, daily, whether pupils and students are engaging with their work, and work with families to rapidly identify effective solutions where engagement is a concern.

14. School transport

Transport services to education settings should continue to be provided and local authorities remain under a statutory duty to provide free home to school transport for all eligible children and young people. The transport to school and other places of education guidance remains in place.

If you are involved in home to school or college transport, you should take all reasonable actions to maximise social distancing where possible and to minimise the risk of transmission. What is practicable will vary according to your particular circumstances.

The approach to school transport should follow the system of controls where possible. You should:

- maximise social distancing
- ensure that children and young people either sit with their 'bubble' or with the same group each day
- ensure that all users clean their hands before entering and exiting
- put in place additional cleaning of vehicles
- put in place organised queuing and boarding where possible
- maximise ventilation of fresh air (from outside the vehicle), particularly through opening windows and ceiling vents

The transport guidance acknowledges that implementing bubbles even partially will still bring benefits, and that settings may need to allow mixing into wider groups in certain circumstances, including on transport. However, we know that vehicle capacity and the complexity of some home to school transport arrangements mean there will often be limits to the extent to which mixing can be minimised.

Where it is not possible, the other measures in the system of controls become even more important.

In accordance with advice from PHE, children and young people aged 11 and over should wear a face covering when travelling on dedicated transport to secondary school. This does not apply to people who are exempt from wearing a face covering on public transport. More information on this can be found in the safer travel guidance for passengers. You should support local authorities in promoting the use of face coverings on school transport and help them to resolve any issues regarding use of face coverings where appropriate.

Transport operators should conduct a risk assessment for all their operations including dedicated school transport services. This will determine the most appropriate safety measures to put in place such as for social distancing and face coverings. The guidance for operators provides further advice for staff.

Drivers and passenger assistants, who should wear a face covering, will not normally require PPE on home to school transport, even if they are not able to maintain a distance from the children and young people on the transport. However, where the care and interventions that a child or young person ordinarily receives on home to school transport requires the use of PPE, that should continue as usual. For more information, read:

- children who regularly spit or require physical contact (in the 'children with complex medical needs' section)
- guidance on the specific steps that should be taken to care for children with complex medical needs, such as tracheostomies - this includes aerosol-generating procedures

In order to maximise home to school transport capacity, some local authorities have asked some parents to accept personal travel budgets or mileage allowances to take their child to their school or other education setting. This is permissible with the parent's consent but is not something which parents or local authorities can insist on. Local authorities should not expect parents to commit to accepting a personal payment or mileage allowance for a specified period of time and accepting a personal payment or mileage allowance will not impact on their eligibility for dedicated school transport in the future. Reasonable notice will be needed to put home to school arrangements back in place for the child or young person when this is required again.

Children, young peopleand staff can continue to use public transport where necessary. When they do, they should follow the safer travel guidance for passengers. Weencourage everyone to walk, cycle or scoot wherever possible and safe.

Although the provision of transport for post-16 students is not a statutory duty for local authorities, it is often critical to those learners being able to access college provision. We ask local authorities to continue to provide transport if they had been doing so previously.

15. Asymptomatic testing

Asymptomatic cases comprise up to a third of all coronavirus (COVID-19) cases, and rapidly identifying and containing them will help stop individuals who carry the infection unknowingly spreading it. Rapid testing using LFD support the identification of people who are infectious but do not have any coronavirus (COVID-19) symptoms. Those who test positive will then self-isolate, helping to reduce transmission of the virus.

Rapid testing using LFDs will support the wider return to face-to-face education by helping to identify people who are infectious but do not have any coronavirus (COVID-19) symptoms.

Staff in primary aged settings will continue to test with LFDs twice a week at home, or on site if working at an all-though setting, Primary age pupils will not be tested with LFDs.

For secondary school staff and pupils (where appropriate) we are moving to a home testing model (for the majority of pupils, they will move to home testing following the first 3 on-site tests). The lateral flow devices used have received regulatory approval from the MHRA for self-use. Home test kits will be available for all staff. Once pupils have been tested 3 times at school, they will be provided with home test kits for regular testing. Testing remains voluntary but strongly encouraged.

In colleges and special post-16 institutions, both students and staff will be supplied with LFD test kits to self swab and test themselves twice a week at home.

Independent training providers (ITPs) and adult and community learning providers (ACLPs) will have access to home testing kits through the COVID-19 education testing programme. Providers will be able to order test kits for staff and students so they can test twice a week, at home.

We recognise that specialist settings need greater flexibility when delivering testing. There will be a range of children and young people in these settings, and different approaches to testing will be needed. We have given specialist settings flexibility to be able to work with pupils, students and their families to agree the most appropriate way of them participating in twice-weekly testing. There's further guidance on mass asymptomatic testing in specialist settings.

Where you do not have enough staff to carry out assisted swabbing on pupils who cannot self-swab, additional workforce capacity may be available from Medacs.

Home test kits will be available for all secondary and FE staff. Primary staff should already have access to home testing kits.

Testing remains voluntary and no child or young person will be tested unless informed consent has been given by the appropriate person and the child and young person is willing to be tested. You should not make a negative test a requirement to attend.

There is additional guidance in rapid asymptomatic testing programme.

Staff or students with a positive LFD test result must self-isolate in line with the stay-at-home guidance. They will also need to arrange a lab-based polymerase chain reaction (PCR) test to confirm the result if the test was done at home. Those with a negative LFD test result can continue to attend school or college and use protective measures.

For further support on rapid asymptomatic testing, including queries regarding Medacs, you can call the DfE helpline on 0800 046 8687 if you have further questions.

Additionally, the households, childcare and support bubbles of pupils, students and staff of schools, nurseries and colleges can get twice weekly rapid asymptomatic lateral flow tests. Further guidance is available on rapid lateral flow testing for households and bubbles.

16. Funding

Local authorities will continue to receive their high needs funding and should continue to pay top-up and other high needs funding to schools and colleges. The Education and Skills Funding Agency (ESFA) will also continue to pay high needs funding direct to academies and colleges in the normal way. This will ensure that you can continue to employ and pay staff supporting pupils and students with SEND and those in alternative provision.

Funding should be maintained and services should not be reduced because some or all children and young people are not in attendance, whether this is because of sickness or self-isolation, or because you have had to close temporarily or restrict attendance.

Similarly, where settings are paying top-up or other funding for pupils attending alternative provision or are paying for other SEND or alternative provision services, we expect these payments to continue so that teachers and other staff can be paid in accordance with their existing employment contracts.

For residential school provision, while the educational costs are funded from the dedicated schools grant, the residential costs are met from social care budgets. Similarly, residential college places may be funded through a combination of ESFA funding, local authority high needs funding and children's and adult social care funding. Local authorities will continue to receive funding for social care provision and should continue to pay residential costs so that the employment and payment of staff supporting children and young people who require residential provision can continue.

System of controls: annex A

We know that the predominant new variant of coronavirus (COVID-19) is more transmissible, however PHE advice remains that the way to control this virus is the same, even with the current new variants.

In this section, where something in this guidance is essential for public health reasons, as advised by Public Health England (PHE), we have said 'must'. Where there is a legal requirement we have made that clear. This guidance does not create any new legal obligations.

This is the set of actions you must take. They are grouped into 'prevention' and 'response to any infection'.

If you follow the system of controls, you will effectively reduce risks in your setting and create an inherently safer environment.

These additional measures will be reviewed in partnership with health experts to decide whether evidence suggests that these measures can be eased ahead of the summer term.

Prevention

You must always:

1) Minimise contact with individuals who are required to self-isolate by ensuring they do not attend the setting.

2) Ensure face coverings are used in recommended circumstances.

3) Ensure everyone is advised to clean their hands thoroughly and more often than usual.

4) Ensure good respiratory hygiene for everyone by promoting the 'catch it, bin it, kill it' approach.

5) Maintain enhanced cleaning, including cleaning frequently touched surfaces often, using standard products such as detergents.

6) Consider how to minimise contact across the site and maintain social distancing wherever possible.

7) Keep occupied spaces well ventilated.

In specific circumstances:

8) Ensure individuals wear the appropriate personal protective equipment (PPE) where necessary.

9) Promote and engage in asymptomatic testing, where available.

Response to any infection

You must always:

10) Promote and engage with the NHS Test and Trace process.

11) Manage and report confirmed cases of coronavirus (COVID-19) amongst the setting community.

12) Contain any outbreak by following local health protection team advice.

1. Minimise contact with individuals who are required to self-isolate by ensuring they do not attend the setting

When an individual develops coronavirus (COVID-19) symptoms or has a positive test

Pupils, students, staff and other adults must not come into the setting if:

- they haveone or more coronavirus (COVID-19) symptoms
- a member of their household (including someone in their support bubble or childcare bubble if they have one) has coronavirus (COVID-19) symptoms
- they are legally required to quarantine having recently travelled from certain other countries outside the Common Travel Area
- they have had a positive test
- have been in close contact with someone who tests positive for coronavirus (COVID-19)

They must immediately cease to attend and not attend for at least 10 days from the day after:

- the start of their symptoms
- the test date if they didn't have any symptoms but have had a positive test (whether this was a lateral flow device (LFD) or polymerase chain reaction (PCR) test)

You must follow this process and ensure everyone onsite or visiting is aware of it.

Anyone told to isolate by NHS Test and Trace or by their public health protection team, has a legal obligation to self-isolate, but you may leave home to avoid injury or illness or to escape the risk of harm. There's more information can be found on NHS Test and Trace: how it works.

If anyone in your setting develops a new and continuous cough or a high temperature, or has a loss of, or change in, their normal sense of taste or smell (anosmia), you must:

- send them home to begin isolation. The isolation period includes the day the symptoms started and the next 10 full days

- advise them to follow the guidance for households with possible or confirmed coronavirus (COVID-19) infection
- advise them to arrange to have a test as soon as possible to see if they have coronavirus (COVID-19)

Other members of their household (including any siblings and members of their support or childcare bubble if they have one) should self-isolate. Their isolation period includes the day symptoms started for the first person in their household, or the day their test was taken if they did not have symptoms, whether this was a LFD or PCR test, and the next 10 full days. If a member of the household starts to display symptoms while self-isolating, they will need to restart the 10-day isolation period and book a test.

If anyone tests positive whilst not experiencing symptoms but develop symptoms during the isolation period, they must restart the 10-day isolation period from the day they developed symptoms.

In non-residential settings, if a child or young person or student displays coronavirus (COVID-19) symptoms, or has a positive test, while at their setting they should avoid using public transport and wherever possible, be collected by a member of their family or household.

In exceptional circumstances, if parents or carers cannot arrange to have their child collected, if possible and safe to do so the child should walk, cycle or scoot home following a positive test result. If this is not possible, alternative arrangements may need to be organised by the school or education setting. The local authority may be able to help source a suitable vehicle which would provide appropriate protection for the driver, who must be made aware that the individual has tested positive or is displaying symptoms.

If a pupil or student is awaiting collection, observe the following:

- they should be moved, if possible, to a room where they can be isolated behind a closed door, depending on the age and needs of the pupil or student, with appropriate adult supervision if required
- a window should be opened for fresh air for ventilation if it is safe to do so
- if it is not possible to isolate them, move them to an area which is at least 2 metres away from other people
- if they need to go to the bathroom while waiting to be collected, they should use a separate bathroom if possible - the bathroom must be cleaned and disinfected using standard cleaning products before being used by anyone else
- PPE must be worn by staff caring for the child or young person while they await collection if a distance of 2 metres cannot be maintained (such as for a very young child or those with complex needs) - more information onPPE use can be found in the safe working in education, childcare and children's social care settings guidance

In an emergency, call 999 if someone is seriously ill or injured or their life is at risk. Anyone with coronavirus (COVID-19) symptoms should not visit the GP, pharmacy, urgent care centre or a hospital, unless advised to.

If a pupil or student in a residential setting shows symptoms, they should initially self-isolate in their residential setting household. Most will benefit from self-isolating in their residential accommodation so that their usual support can continue. Others will benefit more from self-isolating in their home.

The individual should not use public transport if they are symptomatic. If arranging their return to their family home to isolate you should follow advice on transport arrangement in thesafe working in education, childcare and children's social care settings guidance.

Public Health England (PHE) has good evidence that routinely taking the temperature of pupils and students is not recommended as this is an unreliable method for identifying coronavirus (COVID-19).

Further information is available on how to manage and report confirmed cases of coronavirus (COVID-19) amongst your school or college community.

When an individual has had close contact with someone with coronavirus (COVID-19) symptoms

Any member of staff who has provided close contact care to someone with symptoms, regardless of whether they are wearing PPE, and all other members of staff, pupils or students who have been in close contact with that person, do not need to go home to self-isolate unless:

- the symptomatic person subsequently tests positive
- they develop symptoms themselves (in which case, they should self-isolate immediately and arrange to have a test)
- they are requested to do so by NHS Test and Trace or thePublic Health England (PHE)advice service (orPHElocal health protection team if escalated), which is a legal obligation
- they have tested positive from an LFD test as part of a community or worker programme

Everyone must wash their hands thoroughly for 20 seconds with soap and running water or use hand sanitiser after any contact with someone who is unwell. The area around the person with symptoms must be cleaned after they have left, to reduce the risk of passing the infection on to other people. Seeguidance on the cleaning of non-healthcare settings.

If you are contacted by NHS Test and Trace or your local health protection team and told to self-isolate because you have been a close contact of a positive case, you have a legal obligation to do so.

2. Ensure face coverings are used in recommended circumstances

In schools and colleges where pupils and students in year 7 and above are educated, we recommend that face coverings should be worn by pupils or students when moving around the premises outside of classrooms, such as in corridors and communal areas where social distancing cannot easily be maintained.

In addition, we also recommend in those settings that face coverings should be worn by adults, students and pupils in classrooms and during activities unless social distancing can be maintained. This does not apply in situations where wearing a face covering would impact on the ability to take part in exercise or strenuous activity, for example in PE lessons.

Face coverings do not need to be worn by pupils or students when outdoors on the premises.

Subject to the roadmap process, as part of step 3, we expect these precautionary measures to no longer be recommended. This would be no earlier than 17 May and will be confirmed with one week's notice.

In secondary schools, we recommend that face coverings should be worn by staff and adults (including visitors) in situations where social distancing is not possible (for example, when moving around in corridors and communal areas).

In primary (or all-through settings), we recommend that face coverings should be worn by staff and adults (including visitors) in situations where social distancing between adults is not possible (for example, when moving around in corridors and communal areas). Children in primary school (or those of primary age in all-through settings) should not wear face coverings.

The use of face coverings may have a particular impact on those who rely on visual signals for communication. Those who rely on visual signals for communication, or speak to or provide support to such individuals, are currently also exempt from any requirement to wear face coverings in schools or in public places.

Transparent face coverings which may assist communication with someone who relies on lip reading, clear sound or facial expression to communicate can also be worn. There is currently very limited evidence regarding the effectiveness or safety of transparent face coverings, but they may be effective in reducing the spread of coronavirus (COVID-19).

Settings have a duty to make reasonable adjustments for disabled pupils and students, to support them to access education successfully.

The following is a non-exhaustive list that provides examplesof possibleadjustments:

- the provision and effective use of assistive listening devices, such as radio aids
- an increased focus on the listening environment, minimising all unnecessary background noise - steps should be taken so that children withhearing loss are taught in classrooms with the best possibleacousticconditions
- allowing the use of speech-recognition apps on mobile devices and tablets in classrooms,taking into accountpossible variations in the effectiveness of such apps in different classroom situations
- additional communication support, including remote speech-to-text reporters or sign language interpreters
- separate one-to-one teaching and support, without the use of face coverings and in rooms where social distancing can be achieved or through a Perspex panel

Where appropriate, education settings should discuss with pupils and parents the types ofreasonable adjustmentsthat are being considered to support an individual.

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

Exemptions

Where face coverings are recommended there are some circumstances where people may not be able to wear a face covering.

Please be mindful and respectful of such circumstances and sensitive to those needs. Some people are less able to wear face coverings, and the reasons for this may not be visible to others.

This includes (but is not limited to):

- people who cannot put on, wear or remove a face covering because of a physical or mental illness or impairment, or disability
- where putting on, wearing or removing a face covering will cause you severe distress
- if you are speaking to or providing assistance to someone who relies on lip reading, clear sound or facial expressions to communicate
- to avoid harm or injury, or the risk of harm or injury, to yourself or others – including if it would negatively impact on your ability to exercise or participate in a strenuous activity

The same exemptions will apply in education and childcare settings and you should be sensitive to those needs, noting that some people are less able to wear face coverings and that the reasons for this may not be visible to others.

Access to face coverings

Due to the increasing use of face coverings in wider society, staff and pupils and students are already likely to have access to face coverings. PHEhas also published guidance onhow to make a simple face covering.

You should have a small contingency supply available for people who:

- are struggling to access a face covering
- are unable to use their face covering as it has become damp, soiled or unsafe
- have forgotten their face covering

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

Safe wearing and removal of face coverings

You should have a process for when face coverings are worn within your school or

college, and how they should be removed. You should communicate this process clearly to pupils, students, staff and visitors and allow for adjustments to be made for children and young people withspecial educational needs and disability (SEND) who may be distressed if required to remove a face covering against their wishes.

Safe wearing of face coverings requires the:

- cleaning of hands before and after touching – including to remove or put them on
- safe storage of them in individual, sealable plastic bags between use

Where a face covering becomes damp, it should not be worn, and the face covering should be replaced carefully. Staff, pupils and students may consider bringing a spare face covering to wear if their face covering becomes damp during the day.

You must instruct pupils and students to:

- not touch the front of their face covering during use or when removing it
- dispose of temporary face coverings in a 'black bag' waste bin (not recycling bin)
- place reusable face coverings in a plastic bag they can take home with them
- wash their hands again before heading to their classroom

Additional guidance is available on preventing and controlling infection, including the use of PPE, at safe working in education childcare and children's social care settings.

3. Ensure everyone is advised to clean their hands thoroughly and more often than usual

Coronavirus (COVID-19) is an easy virus to kill when it is on the skin. This can be done with soap and water or hand sanitiser. You must ensure that pupils and students clean their hands regularly, including:

- when they arrive at school or college
- when they return from breaks
- when they changerooms
- before and after eating

Consider how often pupils, students and staff will need to wash their hands and incorporate time for this in timetables or lesson plans.

Staff working with pupils and students who spit uncontrollably may want more opportunities to wash their hands than other staff.

Pupils and students who use saliva as a sensory stimulant or who struggle with 'catch it, bin it, kill it' may also need more opportunities to wash their hands.

Continue to help pupils and students with complex needs to clean their hands properly.

You will typically have handwash basins in or adjacent to classrooms, so you may be able to use these to maximise hand washing.

Frequent and thorough hand cleaning should now be regular practice. You should consider:

- whether you have enough hand washing or hand sanitiser stations available so that all pupils, students and staff can clean their hands regularly
- if you need to supervise hand sanitiser use given the risks around ingestion – skin friendly skin cleaning wipes can be used as an alternative
- building these routines into your school or college culture, supported by behaviour expectations and helping ensure younger pupils and those with complex needs understand the need to follow them

4. 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. Make sure enough tissues and bins are available to support pupils, students and staff to follow this routine. As with hand cleaning, you must ensure younger pupils and all those with complex needs are helped to get this right, and all pupils and students understand that this is now part of how the setting operates. The e-Bug coronavirus (COVID-19) website contains free resources for schools, including materials to encourage good hand and respiratory hygiene.

Some pupils and students with complex needs will struggle to maintain as good respiratory hygiene as their peers, for example those who spit uncontrollably or use saliva as a sensory stimulant. This should be considered in risk assessments in order to support these pupils and students and the staff working with them and is not a reason to deny these pupils and students face-to-face education.

5. Maintain enhanced cleaning, including cleaning frequently touched surfaces often, using standard products, such as detergents

In line with the risk assessment and timetabling of the day, put in place and maintain an enhanced cleaning schedule. This should include:

- more frequent cleaning of rooms or shared areas that are used by different groups
- frequently touched surfaces being cleaned more often than normal
- cleaning toilets regularly
- encouraging pupils and students to wash their hands thoroughly after using the toilet
- if your site allows it, allocating different groups their own toilet blocks

PHE has published guidance for cleaning non-health care settings. This contains advice on the general cleaning required in addition to the existing advice on cleaning when there is a suspected case.

6. Consider how to minimise contact and maintain social distancing wherever possible

Minimising contacts and mixing between people reduces transmission of coronavirus (COVID-19). This is important in all contexts, and you must consider how to implement this. You must do everything possible to minimise contacts and mixing while delivering a broad and balanced curriculum.

The overarching principle to apply is reducing the number of contacts between pupils, students and staff. This can be achieved through keeping groups separate (in 'bubbles') and through maintaining distance between individuals. These are not alternative options and both measures will help, but the balance between them will change depending on the:

- pupil and student's ability to distance
- layout of the building
- feasibility of keeping distinct groups separate while offering a broad curriculum or programme of learning

Maintaining distance or forming bubbles could be difficult in special settings, particularly given the need for staff to administer care support and provide therapies to the children and young people attending. However, the average number of pupils or students attending a special school orSPIis much lower than the average number in a mainstream school. This will help to limit the number of contacts for any individual.

How to group pupils (schools)

Consistent groups reduce the risk of transmission by limiting the number of pupils, students and staff in contact with each other to only those within the group.

Maintaining distinct groups or 'bubbles' 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 small as possible.

When using larger groups, the other measures from the system of controls become even more important to minimise:

- transmission risks
- the numbers of pupils and staff who need to self-isolate

Younger pupils and those with complex needs will not be able to maintain social distancing and it is acceptable for them not to distance within their group.

Using small groups can:

- restrict the normal operation of education
- present educational and logistical challenges

You will need to consider:

- the cleaning and use of shared spaces, such as:
  - playgrounds
  - boarding houses
  - dining halls
  - toilets
- the provision of specialist teaching and therapies

Assess your circumstances and try to implement 'bubbles' of an appropriate size to achieve the greatest reduction in contact and mixing. Make sure this won't affect the quality and breadth of teaching or access for support and specialist staff and therapists.

Whatever the size of the group, they should be kept apart from other groups where possible. Encourage pupils and students to keep their distance within groups. Try to limit interaction, sharing of rooms and social spaces between groups as much as possible.

Both the approaches of separating groups and maintaining distance are not 'all or nothing' options and will still bring benefits, even if partially implemented.

You may keep pupils and students in their class groups for most of the classroom time, but also allow mixing in wider groups for:

- specialist teaching
- wraparound care
- transport
- boarding pupils who may be in one group residentially and another during the school day

Siblings may also be in different groups.

All teachers and other staff can operate across different classes and year groups to facilitate the delivery of the timetable and specialist provision. Where staff need to move between groups, they should try and keep their distance from pupils and other staff as much as they can, ideally 2 metres from other adults. Try to minimise the number of interactions or changes wherever possible.

How to group students (post-16 institutions)

You should explore how you can reduce contacts between individuals and groups, and how to maintain distance where possible. All post-16 providers are different, and some measures will be more appropriate for certain age groups, or more easily manageable in certain buildings.

Where class-sized groups are not possible in order to deliver the full programme of study, or to manage the practical logistics within and around the site, other measures from the system of controls become even more important. We strongly recommend that, as a minimum, you plan to keep your year groups or cohorts of students separate from each other during the day. You will need to think about whether you can group students into smaller groupings and still deliver a full programme of study. However, there is no set requirement to make cohorts smaller than normal class size. By limiting contact between different groups, this means that if one person in a group tests positive for coronavirus (COVID-19), you can be confident that they have only had close contact with some or all of that group, rather than the whole year group. These are considerations you will need to make when reaching your decision.

Once groups are established, they should be kept apart and logistics such as start and finish times, lunch and break times, should be reviewed to ensure this.

Although passing briefly in the corridor or external areas is low risk, you should avoid creating very busy corridors or entrances and exits. You should also consider staggered break times and lunch times (and time for cleaning surfaces in the canteens and restaurants between groups). Avoiding big gatherings is strongly recommended, such as meetings with more than one group you are otherwise trying to keep apart.

Both the approaches of separating groups and maintaining distance are not 'all or nothing' options and will still bring benefits, even if implemented partially. You may keep students in their groups for most of the time, but also allow mixing into wider groups for specialist teaching, wraparound care and transport. Siblings may also be in different groups.

We recognise that some staff will need to move between groups, for example, teachers delivering maths and English for students studying a broad range of vocational and academic subjects. You should take steps to minimise the movement of staff between groups where possible, but if they need to teach multiple groups, they should adhere to broader protective measures such as maintaining distance from students where possible.

Measures within the classroom or learning environment

Maintaining a distance between people while inside and reducing the amount of time they are in face-to-face contact lowers the risk of transmission. There is strong public health advice that staff in secondary schools and colleges maintain distance from their pupils and students, staying at the front of the class and away from their colleagues where possible. Ideally, adults should maintain 2 metre distance from each other and from children and young people. If not possible, additional social distancing mitigations will be required.

We know that this is not always possible, particularly when working with children and young people with complex needs, or those who need close contact care. Provide educational and care support for these pupils and students as normal, with other increased hygiene protocols in place to minimise the risk of transmission.

Where possible, for example with older pupils and students with less complex needs who can self-regulate their behaviours without distress, they should also be supported to maintain distance and not touch staff and their peers. This will not be possible for the youngest children, and some pupils and students with complex needs. It may also not be feasible where space does not allow. Doing this where you can, even some of the time, will help.

When staff, pupils and students cannot maintain distancing, the risk can be reduced by keeping pupils and students in the smaller, class-sized groups.

You should make small adaptations to the classroom or learning environment to support distancing where possible. That should include seating pupils or students side by side and facing forwards, rather than face-to-face or side on. It might also include moving unnecessary furniture out of the classroom or learning environment to make more space.

Measures elsewhere

You 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 or setting kept to a minimum. While passing briefly in the corridor, playground or outdoor space is low risk, avoid creating busy corridors, entrances and exits. Consider staggered break times and lunch times. Make sure you allow time for cleaning surfaces in the dining hall or canteen between groups.

You should also plan how shared staff spaces are set up and used to help staff to distance from each other.

You should minimise the use of staff rooms, although staff must still have a break of a reasonable length during the day.

Measures for arriving at, and leaving the setting

Consider staggered starts or adjusting start and finish times to keep groups apart as they arrive and leave.

Staggered start and finish times should not reduce the amount of overall teaching time. A staggered start may include:

- condensing or staggering free periods or break time but retaining the same amount of teaching time
- keeping the length of the day the same but starting and finishing later to avoid busy periods

You should consider how to communicate any changes to parents. Remind them about the process that has been agreed for drop off and collection, including not to:

- gather at the gates
- come onto the site without an appointment

Travelling to the setting

Pupils, students and staff may use public transport where necessary, but we encourage them to walk, cycle or scoot to and from your education setting wherever it is possible and safe to do so. Wherepupils, studentsand staff need to use public transport, they should follow the guidance.

The transport to schools and other places of education guidance requires those involved in the provision of dedicated transport to setting to identify the risks. You should adopt measures to address those risks in a way that works in the local circumstances. Distancing should be maximised and mixing of groups should be minimised where possible and practical.

People aged 11 and over must wear a face covering when travelling on public transport. In accordance with advice from PHE, they must also wear a face covering when travelling on dedicated transport to their education setting. People who are exempt do not need to wear a face covering.

Other considerations

Some pupils and students withSEND(whether withEHCplans or on SEN support) will need specific help and preparation for the changes to routine that these measures will involve. Staff should plan to meet these needs, for example using social stories.

To make sure pupils and students with medical conditions are fully supported, work with:

- local authorities
- health professionals
- regional schools' commissioners
- other services

Use individual healthcare plans to help pupils and students receive an education in line with their peers. In some cases, the pupil's and student's medical needs will mean this is not possible, and educational support will require flexibility. Further information is available in the guidance on supporting pupils at school with medical conditions.

Specialists, therapists, clinicians and other support staff for pupils and students withSENDshould provide interventions as usual. They, as well as supply teachers, peripatetic teachers or other temporary staff can move between settings. They should ensure they minimise contact and maintain as much distance as possible from other staff. Such specialists will be aware of thePPEmost appropriate for their role. Settings should consider how to manage other visitors to the site, such as contractors, catering staff and deliveries, as well as cleaning staff on site who may be working throughout the setting and across different groups. This will require close co-operation between settings and the other relevant employers.

You should have discussions with key contractors about the setting's control measures and ways of working. They should ensure site guidance on physical distancing and hygiene is explained to visitors on or before arrival. Where visits can happen outside of school, college or FE provider hours, they should. A record should be kept of all visitors with sufficient detail to support rapid contact tracing if required by NHS Test and Trace.

As normal, you should engage with your local immunisation providers to provide immunisation programmes on site, ensuring these will be delivered in keeping with your settings control measures. These programmes are essential for pupil and student health and wellbeing and can also provide benefits for staff.

Where a pupil or student routinely attends more than one setting on a part time basis, for example because they are dual registered at a mainstream school and a special setting, the settings 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 pupil or student. Pupils and students should be able to continue attending both settings. While some adjustment to arrangements may be required, pupils and students in this situation should not be isolated as a solution to the risk of greater contact when required by specific public health advice.

Equipment

For individual and very frequently used equipment, such as pencils and pens, staff, pupils and students should have their own items.

Classroom or learning environment-based resources, such as books and games, can be used and shared within the bubble. These should be cleaned regularly, along with all frequently touched surfaces.

Resources that are shared between classes or bubbles, such as sports, arts, and science equipment should be cleaned frequently. When sharing equipment between different bubbles, you should:

- clean it before it is moved between bubbles
- allow them to be left unused for a period of 48 hours (72 hours for plastics)

You will need to assess the ability to clean equipment used in the delivery of therapies, for example, physiotherapy equipment or sensory equipment. Determine whether this equipment can withstand cleaning and disinfecting between each use before it is put back into general use. Where cleaning or disinfecting is not possible or practical, resources will have to be either:

- restricted to 1 user
- left unused for a period of 48 hours (72 hours for plastics) between use by different individuals

Outdoor and playground equipment should be more frequently cleaned than normal. This also applies to resources used inside and outside by wraparound care and out-of-school settings providers.

Pupils and students should limit the amount of equipment they bring into the setting each day, including essentials such as:

- lunchboxes
- hats and coats
- books
- stationery
- mobile phones

Bags are allowed.

Pupils, students and staff can take books and other shared resources home, although unnecessary sharing should be avoided. Similar rules on hand cleaning, cleaning of the resources and rotation should apply to these resources.

Parent and carers pick-up or drop-offs

We know that travel to setting patterns differ greatly between settings. If those patterns allow, settings should consider staggered starts or adjusting start and finish times to keep groups apart as they arrive and leave the setting.

Staggered start and finish times should not reduce the amount of overall time pupils and students spend in the setting. A staggered start may, for example, include keeping the length of the day the same but starting and finishing later to avoid rush hour.

Settings should consider how to communicate this to parents and carers, and remind them about the process that has been agreed for drop off and collection, including that gathering at the setting entrance and otherwise coming onto the site without an appointment is not allowed.

7. Keep occupied spaces well ventilated

Good ventilation reduces the concentration of the virus in the air, which reduces the risks from airborne transmission. This happens when people breathe in small particles (aerosols) in the air after someone with the virus has occupied an enclosed area.

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

These can be achieved by a variety of measures including:

- **mechanical ventilation systems** – these should be adjusted to increase the ventilation rate wherever possible and checked to confirm that normal operation meets current guidance and that only fresh outside air is circulated - if possible, systems should be adjusted to full fresh air or, if not, then systems should be operated as normal as long as they are within a single room and supplemented by an outdoor air supply
- **natural ventilation** – opening windows (in cooler weather windows should be opened just enough to provide constant background ventilation and opened more fully during breaks to purge the air in the space) - **opening internal doors** can also assist with creating a throughput of air
- **natural ventilation** – if necessary external opening doors may also be used (as long as they are not fire doors and where safe to do so)

The Health and Safety Executive guidance on air conditioning and ventilation during the coronavirus (COVID-19) outbreak and CIBSE coronavirus (COVID-19) advice provides more information.

To balance the need for increased ventilation while maintaining a comfortable temperature, consider:

- opening high level windows in colder weather in preference to low level to reduce draughts
- increasing the ventilation while spaces are unoccupied (for example, between classes, during break and lunch, when a room is unused)
- providing flexibility to allow additional, suitable indoor clothing – for more information see the advice on school uniform in the schools coronavirus (COVID-19) operational guidance
- rearranging furniture where possible to avoid direct draughts

Heating should be used as necessary to ensure comfort levels are maintained particularly in occupied spaces.

8. Ensure individuals wear the appropriate personal protective equipment (PPE) where necessary

Face coverings are not classified as PPE (personal protective equipment). PPE is used in a limited number of settings to protect wearers against hazards and risks, such as surgical masks or respirators used in medical and industrial settings. A face covering is a covering of any type which covers your nose and mouth.

Most staff in schools and colleges will not requirePPEbeyond what they would normally need for their work. If a pupil or student already has routine intimate care needs that involve the use of PPE, the same PPE should continue to be used.

AdditionalPPE for coronavirus (COVID-19)is only required in a very limited number of scenarios, for example, when:

- a pupil or student becomes ill with coronavirus (COVID-19) symptoms, and only then if a 2 metre distance cannot be maintained
- performingaerosol generating procedures (AGPs)

When working with pupils and students who cough, spit or vomit but do not have coronavirus (COVID-19) symptoms, anyPPEthat would be routinely worn, should be worn.

The guidance onsafe working in education, childcare and children's social care provides more information about preventing and controlling infection. This includes:

- when and how PPEshould be used
- what type of PPEto use
- how to source it

9. Promote and engage in asymptomatic testing, where available

Rapid testing remains a vital part of our plan to supress this virus. Schools and colleges should follow the guidance set out for their settings:

- primary schools, school-based nurseries and maintained nursery schools
- secondary schools and colleges
- specialist settings

10. Promote and engage with the NHS Test and Trace process

Staff members, pupil, students, parents and carers will need to:

- book a test if they or their child has symptoms - the main symptoms are:
  - a high temperature
  - a new continuous cough

    - a loss or change to your sense of smell or taste
- self-isolate immediately and not come to the setting if:
    - they develop symptoms
    - they have been in close contact with someone who tests positive for coronavirus (COVID-19)
    - anyone in their household or support or childcare bubble develops symptoms of coronavirus(COVID-19)
    - they are required to quarantine having recently visited countries outside the common travel area
    - they have been notified by NHS test and trace or the PHE local health protection team
- provide details of anyone they have been in close contact with, if they test positive for coronavirus (COVID-19) or if asked by NHS Test and Trace

Booking a PCR test for symptomatic testing

Anyone who displays symptoms of coronavirus (COVID-19) can and should get a test. Tests for symptomatic illness can be booked online through theNHS testing and tracingfor coronavirus (COVID-19) website, or ordered by telephone via NHS 119 for those without access to the internet.

Essential workers, which includes anyone involved in education or childcare, including students undertaking work placements in essential occupations, have priority access to testing.

All pupils and students can be tested if they have symptoms. This includes children under 5, but children aged 11 and under will need to be helped by their parents or carers if using a home testing kit.

PCR contingency supply

Separate to the asymptomatic testing regime, all settings were sent an initial supply of 10 PCR test kits before the start of the autumn term in 2020. You can replenish these kits when they run out by making an order through the online portal. You should call the Test and Trace helpdesk on 119 if the kits that you have ordered have not arrived.

Having a test at a testing site will deliver the fastest results for symptomatic cases. These PCR test kits are provided to be used in the exceptional circumstance that an individual becomes symptomatic and you believe they may have barriers to accessing testing elsewhere.

You will need to decide how to prioritise the distribution of your test kits. These kits can be given directly to:

- staff
- parents or carers collecting a pupil or student who has developed symptoms at the setting

These PCR tests kits will also help ensure that symptomatic staff can get a test. If they test negative, they can return to work as soon as they no longer have symptoms of coronavirus (COVID-19).

Further information ontest kits for schools andfurther educationproviders is available.

Ask parents, carers, students and staff to inform you as soon as they get their results.

NHS COVID-19 app

The app is available to anyone aged 16 and over to download if they choose. For some young people, particularly some withSEND, parents and carers will need to decide whether their use of the app is appropriate.

This will mean that some pupils and students in year 11, and most pupils and students in

years 12 and above, will be eligible to use the app and benefit from its features.

Staff members are also able to use the app.

Theguidance for schools and further education colleges in England provides information about how the app works and guidance for its use within schools in England.

11. Manage confirmed cases of coronavirus (COVID-19)

Swift action must be taken when someone tests positive for coronavirus (COVID-19). If someone who uses dedicated transport tests positive, local authorities should work with schools and colleges to identify close contacts.

Schools and colleges may receive support on this through the dedicated advice service introduced by PHE, which can be reached through the DfE helpline on 0800 046 8687, or their PHE local health protection team if escalated. Based on their advice, people who have been in close contact with the person who has tested positive must be sent home and advised to self-isolate immediately and for at least the next 10 full days counting from the day after contact with the individual who tested positive. It is a legal requirement for an individual to self-isolate if they have been told to do so by NHS Test and Trace.

A risk assessment may be undertaken to determine this, but a close contact includes anyone who:

- lives in the same household as someone with coronavirus (COVID-19) symptoms or who has tested positive for coronavirus (COVID-19)
- has had any of the following types of contact with someone who has tested positive for coronavirus (COVID-19) with a PCR or LFD test:
  - face-to-face contact including being coughed on or having a face-to-face conversation within 1metre
  - been within 1 metre for 1 minute or longer without face-to-face contact
  - been within 2 metres of someone for more than 15 minutes (either as a one-off contact, or added up together over 1 day)
  - travelled in the same vehicle or an aircraft

If someone who uses transport tests positive, the assessment is likely to take account of factors such as vehicle size, degree of face-to-face contact, length of time in close proximity and whether a Perspex screen is in place.

The advice service (or PHE local health protection team if escalated) will provide advice on who must be sent home. To support them in doing so, we recommend you keep a record of pupils, students and staff in each group, and any close contact that takes places between pupils, students and staff in different groups (see section 6 of the system of control for more on grouping pupils). This should be a proportionate recording process. You do not need to ask pupils and students to record everyone they have spent time with each day or ask staff to keep definitive records in a way that is overly burdensome.

Where individuals are self-isolating and are within our definition of vulnerable, it is important that settings put systems in place to keep in contact with them, offer pastoral support, and check they are able to access education support.

A template letter has been provided to all settings to send to parents of children asked to self-isolate. This can also be used for staff, if needed. It is important that this letter is shared promptly with all parents of children that have been asked to self-isolate as this letter allows parents who are on a low income and unable to work from home to apply to their local authority for financial support under the Test and Trace Support Payment scheme. They will not be able to make an application without providing this letter as supporting evidence. You must not share the names or details of people with coronavirus (COVID-19) unless essential to protect others.

Household members of those contacts who are sent home do not need to self-isolate themselves unless the pupil, student or staff member who is self-isolating subsequently develops symptoms, unless they have been told to self-isolate by NHS Test and Trace, in which case they must self- isolate; this is a legal obligation. If someone in a class or group that has been asked to self-isolate develops symptoms themselves within the 10 days from the day after contact with the individual who tested positive, they should follow guidance for households with possible or confirmed coronavirus (COVID-19) infection. They should get a test, and:

- if the test delivers a negative result, they should remain in isolation for the remainder of the 10-day isolation period - this is because they could still develop coronavirus (COVID-19) within the remaining days

- if the test result is positive, they must inform their setting immediately, and must isolate from the day of onset of their symptoms and at least the following 10 full days - their household should self-isolate starting from when the symptomatic person first had symptoms and the next 10 full days, following guidance for households with possible or confirmed coronavirus (COVID-19) infection

You should not request evidence of negative test results or other medical evidence before admitting children or young people or welcoming them back after a period of self- isolation.

The local public health team will also contact you directly if they become aware that someone who has tested positive for coronavirus (COVID-19) attended your setting, as identified by NHS Test and Trace or PHE local health protection.

Based on advice from Public Health England (PHE) and NHS Test and Trace, the testing programme initially included offering those who came into close contact with a positive case in schools and colleges the option of 7 days of daily contact testing (with self-isolation if a subsequent test was positive) as an alternative to self-isolation. PHE and NHS Test and Trace have now reviewed their initial advice in light of the higher prevalence and rates of transmission of the new variant. They have concluded that these changes in the virus warrant further evaluation work and that daily contact testing in place of self-isolation should be paused until this evaluation has taken place. We will update this guidance once this evaluation is complete.

Further guidance is available on testing and tracing for coronavirus (COVID-19).

Reporting actual or suspected cases through the education setting status form

From 11 January, we asked you to resume completing an educational setting status form. From 8 March the form was amended to reflect wider opening. The data you supply helps the government monitor the impact of coronavirus (COVID-19) on schools.

See guidance on how to complete the educational setting status form for more information.

Test and Trace support Payments

Some school, college, FE staff and some parents, carers and students may be eligible for a one-off Test and Trace support payment of £500. This is payable in one lump sum from your local authority.

To be eligible for a Test and Trace support Payment, you must:

- be on a low income
- be unable to work from home
- be at risk of losing income as a result of self-isolating
- be living in England
- meet the eligibility criteria

Staff identified as close contacts of a positive case will require an NHS Test and Trace Account ID number (CTAS number) to be able to claim a Test and Trace Support Payment or discretionary payment. Parents and carers of self-isolating children should be provided with a letter to support their application for payment, but will not require an NHS Test and Trace Account ID number (CTAS number).

The Department for Health and Social Care has launched the self-isolation service hub available by calling 020 3743 6715. The phone line is open 7 days a week, 8am to 8pm, allowing a setting to provide contact details of any staff who have been asked to self-isolate and are likely to be eligible for the Test and Trace support payment or discretionary payment.

In order for any of your staff or students who may be eligible for a payment from the Test and Trace Support Payment scheme to be able to claim, you must follow these steps:

1. Ensure that you collate a list of appropriate close contacts for the person who has tested positive within your establishment and inform these close contacts that they now need to self-isolate.

2. Call the new service hub on 020 3743 6715 as soon as you have the eight-digit NHS Test and Trace account ID (sometimes referred to as a CTAS number) of the person who has tested positive.

3. Provide the details of the person who has tested positive, along with the details of the relevant staff members you have identified as close contacts. If you do not have NHS Test and Trace account ID for the person who has tested positive - hub staff will assist in tracing the person in order to register their contacts on the Test and Trace system (CTAS).

4. NHS Test and Trace will then contact individuals to formally advise them of their need to self-isolate and provide them with an NHS Test and Trace account ID.

5. Following this, individuals who are employed or self-employed, on a low income, unable to work from home and losing income as a result may qualify for the Test and Trace support payment scheme through their local authority. Full information on the scheme and how to apply can be found at claiming financial support under the Test and Trace Support Payment scheme

Applications from parents and guardians who need to take time off work to care for a child who is self-isolating

Eligible parents or guardians of self-isolating children who are not required to self-isolate by NHS Test and Trace can also apply for the Test and Trace Support Payment scheme if they are on a low income, unable to work from home and need to take time off work to care for a child who is self-isolating. Parents and carers do not require an NHS Test and Trace Account ID number in order to claim and schools are not required to register all children asked to self-isolate with NHS Test and Trace in the same way as staff.

The scheme is open to eligible parents and carers of children aged 15 and under, and parents of young people aged 16-25 with an EHC Plan. The full eligibility criteria for the scheme, and further information on how parents and guardians can apply, can be found at Claiming financial support under the Test and Trace Support Payment scheme.

Schools should provide parents and carers of children advised to self-isolate with the template letter, detailing the child's name and the dates of their isolation period. The parent or guardian will need to use this letter as supporting evidence for as part of their application to their local authority for a payment from the Test and Trace Support Payment scheme. Parents whose children are told to self-isolate by their school will not be able to apply for financial support without a letter.

When a parent or guardian applies to the Test and Trace Support Payment scheme because they need to care for a child who is self-isolating, their local authority will be required to contact their child's school via phone or email to verify information about the child. This includes the child's name, age and dates of self-isolation. This is a standard check against fraudulent claims, and may take place before or after a payment is made.

You will only be asked to share information on children whose parents have made an application to their local authority for the Test and Trace Support Payment scheme. You may wish to update your Data Privacy Notice to reflect this.

12. Contain any outbreak by following PHE local health protection team advice

If you have 2 or more confirmed cases within 14 days, or an overall rise in sickness absence where coronavirus (COVID-19) is suspected, you may have an outbreak.

You should call the dedicated advice service who will escalate the issue to your local health protection team where necessary and advise if any additional action is required. You can reach them by calling the DfE helpline on 0800 046 8687 and selecting option 1 for advice on the action to take in response to a positive case.

In some cases, health protection teams may recommend that a larger number of other pupils or students self-isolate at home as a precautionary measure. This could be the whole site, class, group or year group.

If you are implementing the system of controls, addressing any issues you have identified and therefore reducing transmission risks, whole site closure will not generally be necessary.

You should not close except on the advice of health protection teams.

13. Admitting pupils, students and staff back to the setting

The pupil, student or staff member who tested positive for coronavirus (COVID-19) can return to their normal routine and stop self-isolating after they have finished their isolation period and their symptoms have gone or if they continue to have only a residual cough or anosmia. This is because a cough or anosmia can last for several weeks once the infection has gone. If they still have a high temperature after 10 days or are otherwise unwell, you should advise them to stay at home and seek medical advice.

You should not request evidence of negative test results or other medical evidence before admitting pupils, students or staff or welcoming them back after a period of self-isolation.

In the vast majority of cases, the student, parents and carers will be in agreement that those with symptoms should not attend the setting, given the potential risk to others. In the event that a parent, carer the student themselves insists on attending your setting, you can take the decision to refuse the pupil or student if, in your reasonable judgement, it is necessary to protect your pupils and staff from possible infection with coronavirus (COVID-19). Your decision would need to be carefully considered in the light of all the circumstances and current public health advice.

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