

FAQs Schools and educational settings

SECTION	Question	Answer	Link
PPE	We have had two or more cases of COVID-19 in the school, should staff be wearing PPE?	No. staff should be wearing PPE only in particular situations i.e. if in contact with a child who spits, when dealing with AGPs, nappy changing, and when caring for those with complex needs. See link opposite: It includes information on spitting, AGPs, nappy changing etc.	https://www.gov.uk/government/publications/safe-working-in-education-childcare-and-childrens-social-care/safe-working-in-education-childcare-and-childrens-social-care-settings-including-the-use-of-personal-protective-equipment-ppe
	Should teachers be marking books?	Should they be advised to get children to self-assess wherever is possible?	
	How should PPE and face coverings be disposed of?	Used PPE and any disposable face coverings that staff, children, young people or other learners arrive wearing should be placed in a refuse bag and can be disposed of as normal domestic waste unless the wearer has symptoms of coronavirus, in line with the guidance opposite.	https://www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-settings

		<p>Any homemade non-disposable face coverings that staff or children, young people or other learners are wearing when they arrive at their setting must be removed by the wearer and placed into a plastic bag that the wearer has brought with them to take it home. The wearer must then clean their hands. To dispose of waste from people with symptoms of coronavirus, such as disposable cleaning cloths, tissues and PPE:</p> <ul style="list-style-type: none">• put it in a plastic rubbish bag and tie it when full• place the plastic bag in a second bin bag and tie it• put it in a suitable and secure place marked for storage for 72 hours <p>Waste should be stored safely and securely kept away from children. You should not put your waste in communal waste areas until the waste has been stored for at least 72 hours. Storing for 72 hours saves unnecessary waste movements and minimises the risk to waste</p>	
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		operatives. This waste does not require a dedicated clinical waste collection in the above circumstances. Settings such as residential care homes or special schools that generate clinical waste should continue to follow their usual waste policies.	
CLEANING AND WASTE	Does my school need deep cleaning on a regular basis?	No. Clean and disinfect regularly touched objects and surfaces more often than usual, using your standard cleaning products. See link opposite	https://www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-settings/covid-19-decontamination-in-non-healthcare-settings
	There has been a case or case in the school, what do we need to tell our cleaners?	Alert your cleaning staff of any situation involving a suspected case and the areas that the case has had contact with. See link opposite	https://www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-settings/covid-19-decontamination-in-non-healthcare-settings
	Will the cleaners have to be excluded if they have cleaned the area and case is now positive?	It is advised that the cleaners use a disposable apron and gloves to clean and dispose of waste. Hands should be washed with soap and water for 20 seconds after all PPE has been removed. Unless they meet the criteria for close contact with a confirmed case they should not need to be	https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance/stay-at-home-guidance-for-households-with-possible-coronavirus-covid-19-infection

		excluded to self-isolate at home.	
	Does my school need deep cleaning on a regular basis?	No. Clean and disinfect regularly touched objects and surfaces more often than usual, using your standard cleaning products. See link opposite	https://www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-settings/covid-19-decontamination-in-non-healthcare-settings
INFECTION CONTROL & HAND HYGIENE	Are there extra precautions staff need to take after work, for example washing clothes?	There is no need for stringent cleaning of people or clothes following a day in an educational or childcare setting. The advice for settings is to follow steps on social distancing (as well as possible), handwashing and other hygiene measures including cleaning of surfaces.	
	Can alcohol gel be used by children in school? The COSH requirements state if used by children should be below a certain % but for COVID needs to be higher?	Alcohol gels with at least 70% alcohol should be available as they are effective in killing this virus and can be used safely, and under supervision, by children in schools.	
ISOLATION AND CONTACT TRACING	Should a child come to school if a member of their household is unwell?	If a member of the child's household is unwell with Covid-19 symptoms, then the child should isolate for 14 days or 7 days from the	https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance/stay-at-home-guidance-for-households-with-possible-coronavirus-covid-19-infection

		<p>date they themselves become symptomatic.</p> <p>See Main Messages section of guidance in link</p>	
	Which contacts need to self-isolate?	<p>Current guidance recommends that where the child, young person or staff member tests positive, the rest of their class or group within their childcare or education setting should be sent home and advised to self-isolate for 14 days.</p> <p>Please note: The other household members of that wider class or group do not need to self-isolate unless the child, young person or staff member they live with in that group subsequently develops symptoms.</p> <p>See link above</p>	<p>https://www.gov.uk/government/publications/coronavirus-covid-19-implementing-protective-measures-in-education-and-childcare-settings/coronavirus-covid-19-implementing-protective-measures-in-education-and-childcare-settings</p>
	A child reports to us that they have had contact with someone with symptoms, but the parents have not informed us – what should we do?	<p>No one with symptoms should be attending school and anyone who develops symptoms while at school should be isolated and sent home as soon as possible. Schools should regularly remind parents of the</p>	<p>https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance/stay-at-home-guidance-for-households-with-possible-coronavirus-covid-19-infection</p>

		<p>government guidance on staying at home and the importance of a household self-isolating if anyone in the household develops symptoms. See link opposite</p>	
	<p>Do you have specific advice on who is a contact of a case, i.e. the definitions?</p>	<p>A contact is defined as a person who, in the period 48 hours prior to and 7 days after the possible or confirmed case’s symptom onset or specimen collection date, has at least one of the following types of exposure:</p> <p>Household contact: Those that are living or spending significant time in the same household e.g. those that live and sleep in the same home, students in university accommodation that share a kitchen and sexual partners and people who have cleaned a household where a case lives without personal protective equipment.</p> <p>Non- household contact:</p>	

		<p>Direct contact: Face to face contact with a case for any length of time, including being coughed on or talked to. This includes exposure within 1 metre for 1 minute or longer.</p> <p>Proximity contact: Extended close contact (within 2 metres for more than 15 minutes) with a case or travelled in a small vehicle with a case.</p>	
	<p>Can our pregnant members of staff work?</p> <p>What if staff have pregnant household members?</p>	<p>There is no evidence that pregnant women are more likely to get seriously ill from coronavirus. See links opposite</p> <p>But pregnant women have been included in the list of people at moderate risk (clinically vulnerable) as a precaution. This is because pregnant women can sometimes be more at risk from viruses like flu.</p> <p>It is important that pregnant women follow the advice to:</p> <ul style="list-style-type: none"> •Wash hands regularly 	<p>https://www.gov.uk/government/publications/staying-alert-and-safe-social-distancing/staying-alert-and-safe-social-distancing</p> <p>https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance/stay-at-home-guidance-for-households-with-possible-coronavirus-covid-19-infection</p>

		<ul style="list-style-type: none"> •Follow the advice on social distancing – such as staying at home as much as possible •Avoid contact with someone who is displaying symptoms of coronavirus •Avoid non-essential travel use of public transport when possible •Work from home, when possible <p>All pregnant women should follow the government advice in the link opposite</p>	
	<p>Head teacher concerned that a child has been on 14-day isolation due to showing symptoms of covid-19, has returned to school and is still coughing. The school want to send him home, but the parents are Keyworkers and concerned as the child has already done 14 days isolation. The school are concerned he may not have had COVID-19 during the initial isolation but now could and they could be putting others at risk by keeping him at school?</p>	<p>If child has completed 7 days isolation from symptom onset and has not had a temperature for 48 hours, then they can return to school as the child completed 14 days isolation with the rest of the family.</p> <p>A post viral cough is common, and the child should be encouraging to practice respiratory and hand hygiene. Children should be social distanced whilst at school.</p>	
TESTING	<p>What is recommendation for testing in under 5's?</p>	<p>The National Testing Service (P2) are now doing testing in under 5s.</p>	

	<p>If a child tests negative can they return to school even if they have symptoms? If not can their siblings?</p>	<p>Contacts should only be tested if they develop symptoms. If a contact of a confirmed case develops symptoms during the 14-day period they can be tested via NHS111. If the result is positive than they need to self-isolate for 7 days from the onset of symptoms. If the result is negative, then they can return to school provided they feel well and they have not had a fever for 48 hours. Any siblings of child will need to self-isolate for 14 days starting from the day the contact developed symptoms.</p>	
	<p>We have staff who are asymptomatic but wish to be tested is this possible?</p>	<p>Currently only people who are symptomatic can access a test via NHS 111</p>	
<p>STAFFING</p>	<p>Can the school still have supply teachers come in if there have been multiple cases?</p>	<p>Staff should look after same groups where possible and staff should not be working across multiple groups, sites or schools.</p>	
<p>GENERAL</p>	<p>What is the current advice on using hydrotherapy and swimming pools for therapy in specials schools?</p>	<p>The current position is that public swimming pools, which would include school</p>	<p>https://www.gov.uk/government/publications/coronavirus-outbreak-faqs-what-you-can-and-cant-do/coronavirus-outbreak-faqs-what-you-can-and-cant-do#public-spaces--outdoor-activities--exercise</p>

		<p>swimming pools, should remain closed.</p> <p>Hydrotherapy pools in special schools should remain closed until NHS hydrotherapy pools re-open. Opening of hydrotherapy pools in special schools should follow the guidance for opening NHS therapy pools.</p> <p>See link opposite</p>	
	<p>We have received several enquiries from local schools regarding the grouping of children into “bubbles” and operating part-time timetables in preparation for wider opening schools on June 1st. Can you advise on how best to achieve this?</p>	<p>Although you are raising a very important question, may I ask that you to contact the Department for Education directly as they are responsible for guidance related to schools reopening in time of COVID19 pandemic?</p> <p>See link opposite</p>	<p>https://www.gov.uk/government/organisations/department-for-education</p>
	<p>Are hot air hand driers a safe means for drying hands in school settings?</p>	<p>The "Working safely during coronavirus (COVID-19)" guidance published by BEIS includes the following:</p> <p>Develop cleaning, handwashing and hygiene procedures.</p>	<p>https://www.gov.uk/guidance/working-safely-during-coronavirus-covid-19</p>

		<p>You should increase the frequency of handwashing and surface cleaning by:</p> <ul style="list-style-type: none">• encouraging people to follow the guidance on hand washing and hygiene• providing hand sanitiser around the workplace, in addition to washrooms• frequently cleaning and disinfecting objects and surfaces that are touched regularly• enhancing cleaning for busy areas• setting clear use and cleaning guidance for toilets• providing hand drying facilities – either paper towels or electrical dryers. <p>This is replicated in the sector-specific guidance for various industries, see link opposite: Queries regarding schools specifically should be referred to DfE.</p> <p>PHE Senior PHE Medical Advisors have advised that there are no concerns</p>	
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		regarding the use of hand dryers.	
	Can children or staff with allergies go back to school?	if a child or staff member meets the criteria for being in an extremely/vulnerable group, they should follow the relevant guidance on shielding and/or social distancing. See links opposite	https://www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19#who-is-clinically-extremely-vulnerable https://www.gov.uk/government/publications/staying-alert-and-safe-social-distancing/staying-alert-and-safe-social-distancing#clinically-vulnerable-people
	What if they have a sibling in the school? If younger child, how will school pickups and drop offs be dealt with if one child is meant to stay at home and one is meant to be at school?	It is very important that individuals with symptoms that may be due to coronavirus and their household members stay at home. Staying at home will help control the spread of the virus to friends, the wider community, and particularly the most vulnerable. See link opposite	https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance/stay-at-home-guidance-for-households-with-possible-coronavirus-covid-19-infection
	We have had a child confirmed as a case and had contact with catering staff at lunch, do they need to be excluded?	It depends on the level of contact. Staff would need to be excluded only if they had Face to face contact with a case for any length of time, including being coughed on or talked to. This includes exposure within 1 metre for 1 minute	

		or longer OR the staff member had extended close contact (within 2 metres for more than 15 minutes) with the case.	
	I am very anxious about reopening my setting please can you provide any advice/support as to when I can reopen and how to do it safely?	<p>Comprehensive government advice about strategies for returning to work are available and can be found in the link opposite.</p> <p>Please read this and discuss the best way forward with your colleagues. If you have any concerns after doing this, then please do contact us again should you need further support or advice.</p>	https://www.gov.uk/government/publications/coronavirus-covid-19-implementing-protective-measures-in-education-and-childcare-settings/coronavirus-covid-19-implementing-protective-measures-in-education-and-childcare-settings
	What would be the advice for a child who is still on immunosuppressant medication who is beginning to show symptoms of coronavirus?	<p>please refer to the link opposite for Public Health advice.</p> <p>If the child is symptomatic and at higher risk of contracting COVID-19, please go through NHS 111 online service and advise the family to call NHS111 accordingly - NHS111 should be able to advise on community testing.</p>	https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance/guidance-for-households-with-grandparents-parents-and-children-living-together-where-someone-is-at-increased-risk-or-has-symptoms-of-coronavirus-cov

	<p>School open for keyworker children - been informed by a parent that 2 out of 3 of children have developed a rash and are being tested for COVID, both children were last at the school yesterday. Would like advice on what they should do? They are still open for other children.</p>	<p>Children that are symptomatic suggestive of COVID-19, we would advise that students are excluded from the school for 7 days from symptom onset, the rest of the household to self-isolate for 14 days. We would advise that the areas the suspected COVID cases have been are decontaminated, as outlined in the guidance found in the link opposite.</p> <p>The rash is still a very unusual presentation of COVID-19. The children who are getting tested for COVID-19 are likely to have been by a health professional, but we would like to emphasise that it is important that the children are assessed by a GP or other clinician, so that other causes of rash could be investigated.</p> <p>There have been some rare reports of children who have multi-system inflammatory syndrome (PIMS), which has been</p>	<p>https://www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-settings/covid-19-decontamination-in-non-healthcare-settings.</p>
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		<p>compared to Kawasaki disease. Parents should be advised to contact NHS111 if their child has any of the following symptoms:</p> <ul style="list-style-type: none"> • a fever that will not go away • abdominal pain, diarrhoea, or vomiting • rash or changes in skin colour • trouble breathing • the child seems confused or overly sleepy. 	
<p>SCHOOL CLOSURE</p>	<p>Should we close the school if we are informed of positive or suspected cases of COVID-19?</p>	<p>There is no guidance to recommend exclusion of asymptomatic staff/students or closure at a school if a staff or student becomes symptomatic or tests positive. Our advice for this school is that 'we are not recommending closure as this is not recommended in the guidance. The head should discuss with the local authority any decision to close.</p> <p>A: Need to stress this point - Closures are either a school/commissioner decision due to business</p>	

		continuity issues, or only otherwise following discussion with local HPT i.e. exceptional circumstances.	
	I work in a school where we have had disagreements with the headteacher on whether it is safe to keep our school open during the corona virus crisis. Is there any advice on how we should proceed?	<p>Schools should refer to the guidance for education and childcare settings on how to implement social distancing and continue to follow the advice on handwashing and other measures to limit the risk of spread of coronavirus.</p> <p>If you do not feel that your workplace is safe, you will need to flag this with the head teacher initially, local authority education department. Unfortunately, it is not a PHE role to make visits to assess whether risk measures are adequate at your school. This falls under the purview of the HSE.</p>	https://www.gov.uk/government/publications/coronavirus-covid-19-implementing-protective-measures-in-education-and-childcare-settings/coronavirus-covid-19-implementing-protective-measures-in-education-and-childcare-settings
SOCIAL DISTANCING	Will there be further guidance around social distancing in primary school children. Should schools be following social distancing as far as possible or do we accept that this will not be followed but mitigate in other ways?	The guidance acknowledges that there may be difficulties in maintaining social distancing in primary aged children and that it will be difficult for pupils and staff to remain 2 meters apart from each other.	https://www.gov.uk/government/publications/coronavirus-covid-19-implementing-protective-measures-in-education-and-childcare-settings/coronavirus-covid-19-implementing-protective-measures-in-education-and-childcare-settings

		<p>Schools should therefore work through the hierarchy of measures set out below:</p> <ul style="list-style-type: none">•avoiding contact with anyone with symptoms•frequent hand cleaning and good respiratory hygiene practices•regular cleaning of settings•minimising contact and mixing <p>It is still important to reduce contact between people as much as possible, and we can achieve that and reduce transmission risk by ensuring children, young people and staff where possible, only mix in a small, consistent group and that small group stays away from other people and groups.</p> <p>By applying regular hand cleaning, hygiene and cleaning measures and handling potential cases of the virus as per the advice, then the risk of transmission will be lowered.</p>	
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<p>COMMUNICATION</p>	<p>What we tell parents and pupils and when?</p> <p>If we suspect a case but not confirmed? - not sure whether we just wait?</p>	<p>When a case has been confirmed within the school we will provide you with letters to send to parents informing them. It is important to keep the specific details of the case confidential so no further details about the person will be provided. If a child has been identified as being a contact of the case the parents will receive a further letter which may instruct them to isolate their child for 14 days.</p> <p>If there have been several cases over a shorter period, we will be working with other agencies such as the local authority and we may provide you with further</p>	

		correspondence after consultation with them.	
	Should we tell OFSTED?	The school should follow their normal procedures in notifying the local authority or OFSTED of any case or outbreak of a communicable disease.	