

January 2022

Outbreak Management Plan

Outbreak Plan Management Version: V2	
Date completed:4th January 2022	
Review Date: 31 st August 2022	
Plan Owner: Rachel Askew, Headteacher	
Scope of Plan	Our Lady of the Assumption Primary School

Some educational organisations may have multiple sites included within the scope of this plan. Outbreak prevention is partly within scope of this plan but should be mostly covered by your COVID-19 Risk Assessment.

Related Resources

OLA Risk Assessment – 4th January 2022.

Introduction

This plan outlines how we will manage single cases and clusters of COVID-19, as well as how we would operate if we are required to reintroduce measures/mitigations in our setting or area to prevent transmission of COVID-19 in the context of an outbreak. This includes how we would ensure every child, pupil or student receives the quantity and quality of education and care to which they are normally entitled. Outbreak prevention is partly within scope of this plan but should be mostly covered by your COVID-19 Risk Assessment.

A local outbreak is defined as two or more linked cases within a 14-day period:

https://www.gov.uk/government/publications/covid-19-epidemiological-definitions-of-outbreaks-and-clusters

Outbreaks can differ significantly regarding scale and significance from two linked cases in a class, to multiple cases across multiple year groups, to outbreaks linked with new variants of concern. Whilst the measures used to manage outbreaks will be the same, the number of measures and extent of measures taken, alongside the degree to which they become necessary requirements will vary.

Triggers for outbreak management plan

Mainstream School

- 5 children, pupils or staff within a year group/group test positive for COVID-19 within a 10-day period
- 10 children, pupils or staff over a number of year groups test positive for COVID-19 within a 10-day period
- 5+ staffing cases, or fewer if impacting on the capacity of the school to operate

Please note that action should be triggered as soon as the case threshold is reached if before 10 days.

If it is established that cases are not linked then extra mitigations may not be required

In the case of a significant local outbreak we will work with the Local Authority, Public Health and regional Health Protection Teams (HPTs). Below sets out all the possible measures/mitigations that will be considered in the case of a local outbreak. The actual measures implemented will be determined jointly and based on the specific situation. They will also balance carefully the impact on the delivery of education with the need to minimise transmission.

Any measures will only ever be considered for the shortest time possible, to allow the outbreak to be managed and minimise transmission of COVID-19. In all cases measures / mitigations will only be implemented to prevent larger scale school closure.

Governance Arrangements

Key Contact Details

Agency/Individual(s)	Contact details
Local Authority	COVID19schools@coventry.gov.uk
Public Health England (PHE) Health Protection Teams (NB PHE will become part of UK Health Security Agency (UKHSA) in October 2021)	wm.2019cov@phe.gov.uk Tel: 0344 225 3560 Option 0 Option 2
Response Lead/decision maker	Rachel Askew r.askew@ourlady.coventry.sch.uk
Committees supporting the response	Governing Body
Outbreak response team (internal and for attending external Incident Management Team meetings)	Rachel Askew (Headteacher), Louis <u>ae</u> Boothby (School Business Manager)

Key Stakeholders

Key stakeholders include those that attend the facility/setting (routinely or occasionally), those who will need to know what is happening and those that have a role in outbreak management in your setting.

Stakeholders	Role(s) in Outbreak Management
Staff (including employees and volunteers)	Reporting of symptomatic children
	Reporting of positive cases
	Follow routines to reduce transmission e.g. increased ventilation, regular cleaning
	Support in the identification of close contacts
Pupils	Follow guidance from school staff to reduce transmission
	Follow recommendations if identified as a close contact of a positive case
	Follow recommendation for a twice weekly LFT
Parents/carers	Follow recommendations if child is identified as a close contact of a positive case
	Follow recommendation for their child to have a twice weekly LFT
	Keep children at home if they display symptoms, however mild, and either arrange for a PCR test or isolate for 10 days
	Keep siblings of a positive case at home until they have a negative PCR
	Continue to wear a face mask when dropping-off and picking-up children
Governors	Support headteacher in implementing mitigation
Visitors	Take a LFT before visiting the school
	Follow recommendation to wear a face mask
	Arrange visits outside school hours
Contractors and delivery personnel	Take a LFT before visiting the school
	Follow recommendation to wear a face mask

Where to receive local outbreak advice	School newsletter, website
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Communications

Communications activities will be coordinated by the setting with support from LA local outbreak control team and regional Health Protection Teams in close liaison with the setting outbreak management coordination team.

Key Stakeholder	What they need to know	Communication media
Staff (including employees and volunteers)	If there has been a positive case or outbreak in setting. If they are a possible close contact. Actions following a positive case or outbreak.	e-mail letter to staff
Pupils	If they have been identified as a close contact following a positive case in setting. Recommendations/actions following a positive case.	Class teacher Teacher2partents Phone call Letters to parents Dojo
Parents/carers	If their child has been identified as a close contact following a positive case in setting. Recommendations/actions following a positive case or outbreak. Arrangements for remote learning. Changes to how the school operates/updated Risk assessment.	Teacher2partents Phone call Letters to parents Dojo Website
Visitors	If they have been identified as a close contact following a positive case in setting. Recommendations/actions following a positive case.	Phone call email

Contractors and delivery personnel	If they have been identified as a close contact following a positive case in setting. Recommendations/actions following a positive case.	Phone call email
Local Outbreak Teams (LA and regional Health Protection Teams)	If there has been a single case. If there have been multiple cases.	email

Preventing school transmission

Our refreshed risk assessments include how vaccination and good hand hygiene will be promoted among staff, and pupils and parents, how cleaning and good ventilation will be maintained, and how the school will operate from a distancing perspective.

Information about drop-in clinics across Coventry and Warwickshire and all vaccinations sites that you can book into can found in the links below:

https://www.happyhealthylives.uk/coronavirus/covid-19-vaccination/vaccination-drop-in-clinics/

https://www.happyhealthylives.uk/coronavirus/covid-19-vaccination/vaccination-sites/

Children and staff who are unwell will be advised that they should not attend school/setting. Any child or staff member with one or more of the COVID-19 symptoms (new continuous cough, high temperature, loss/change in taste/smell), irrespective of how mild, will be asked to isolate with their household and book a PCR test: https://www.gov.uk/get-coronavirus-test

We are aware of the range of less common symptoms of COVID-19: headache, sore throat, fatigue, muscle aches, blocked/runny nose, diarrhoea and vomiting, and will take this into consideration in an outbreak scenario, and when we are seeing a larger number of COVID-19 cases.

We will ensure that we remain informed about the latest travel and quarantine advice:

https://www.gov.uk/government/publications/actions-for-schools-during-the-coronavirus-outbreak/schools-covid-19-operational-guidance#travel

Our updated risk assessment can be found on the school website. (embed):

Action	Action detail	Lead	Dates	Supplies/resources required	Other considerations
Handwashing /sanitisation	Adults and pupils will be reminded to wash their hands regularly and sanitiser will be available in classes and in the reception area.	Class teachers Louisa Boothby		Hand sanitiser Paper towels soap	

Action	Action detail	Lead	Dates	Supplies/resources required	Other considerations
Maintaining a clean environment	Thorough cleaning of high touch areas on a daily basis. Cleaning of areas between classes. E.g. dining tables Cleaning of meeting areas	Louisa Boothby		<u>Cleaner and</u> <u>disinfectant</u> Anti-covid disinfectant	
Improved ventilation	Staff to monitor ventilation in classrooms/staffroom/office areas to ensure air is circulated. Staff to open windows as required and external doors if necessary. Use of CO2 monitors to check ventilation is adequate.	Louisa Boothby			Ensuring heating allows for increased ventilation during cold weather.
Ensuring symptomatic pupils or staff are not in school	Parents and staff will stay at home if displaying symptoms and be advised to take a PCR test. Staff will be alert to promptly identifying pupils displaying symptoms in school.	Louisa Boothby			
Identification of asymptomatic cases	Staff will be advised to take a LFT twice weekly. Parents will be advised to test their child with a LFT twice weekly.	Jo Goldsmith		LFT kits	
Social distancing	Staff will be asked to continue socially distancing in communal areas	Rachel Askew	3.9.21		

Reporting cases and when trigger thresholds have been met

We will continue to report all positive cases to the COVID19schools@coventry.gov.uk, alongside alerting the local authority when any of the triggers outlined in the above guidance have been met.

Response to positive cases

When managing outbreaks or where we meet the triggers outlined above, full class groups (note that interrogation of seating plans will not be required), and lunch time, break time and afterschool contacts (including on transport) will be asked to daily LFD test (for 7 days following contact). Staff contacts who have not had both vaccinations more than 14 clear days before the day of contact with the positive case will also be identified, as they will need to isolate for 10 clear days following the day of last contact with the case. If additional cases are identified in the same class/group, it may be recommended that additional communications are sent to parents/staff to recommend extending the daily LFD testing period. Further actions may also be recommended by the LA.

Reintroduction of consistent groups/zoning

It may become necessary to reintroduce 'zoning' for a temporary period, to reduce mixing between groups.

Reintroduction of face coverings

The use of face coverings may have a particular impact on those who rely on visual signals for communication. Those who communicate with or provide support to those who do, are exempt from any recommendation to wear face coverings in education and childcare settings.

No pupil or student will be denied education on the grounds of whether they are, or are not, wearing a face covering.

Reasonable adjustments will be made for disabled pupils to support them to access education successfully. Where appropriate, you should discuss with pupils and parents the types of reasonable adjustments that are being considered to support an individual.

Reintroduction of testing/Additional PCR testing

Consideration will be given as to whether the reintroduction of onsite asymptomatic LFD testing (secondary settings) or increased use of home testing by staff, and pupils is necessary. The national guidance also states that Secondary schools should also retain a small asymptomatic testing site (ATS) on-site so they can offer testing to pupils who are unable to test themselves at home.

We will also continue with our local recommendation that all pupils in early years and primary settings take twice weekly asymptomatic testing.

Where these measures are necessary, it will be important to work jointly with the LA and Public Health to identify any support required (e.g. supply of additional tests). Where onsite testing is reintroduced, we will look to do this in a way that does not negatively impact on the education for pupils.

There may also be occasions where a mobile symptomatic testing unit/service is made available on the school site and pupils are invited to take a PCR test, or additional PCR tests may be organised through other means.

All close contacts of positive cases will be asked to take daily LFTs for 7 days.

Contact tracing / isolating

From 14 December 2021:

Adults who are fully vaccinated and all children and young people aged between 5 and 18 years and 6 months identified as a contact of someone with COVID-19 are strongly advised to take a LFD test every day for 7 days and continue to attend their setting as normal, unless they have a positive test result.

Daily testing of close contacts applies to all contacts who are:

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

If daily LFD testing is not possible (e.g. some special school cohorts) we will advise as a minimum a PCR test and any additional LFD testing that the individuals can undertake. Also for settings with children with complex learning difficulties and/or medical needs, we will look to isolate positive cases for 10 days where possible

Children under 5 years are exempt from self-isolation and do not need to take part in daily testing of close contacts. Locally we will be recommending daily LFDs if possible, but otherwise a PCR test and regular LFD tests.

Household contacts of positive cases may be asked to take a PCR test (as well as daily LFT testing) and stay at home until they have had a negative PCR result.

Other restrictions

We may need to limit activities that require bringing parents and carers onto site (other than for drop off and pick up) e.g. open days, performances, open evenings. We may also reintroduce staggered start and finish times (if not already in operation) to minimise the number of people on the school site at the start and finish of the day.

We will also review any activities bringing pupils together in addition to the normal school day, or that required transportation for larger numbers of pupils (e.g. school trips / holidays - including residential educational visits). This could also include any activities bringing together pupils from a number of schools (e.g. transition/taster days/sports fixtures).

Clinically Extremely Vulnerable

Shielding is currently paused. In the event of a major outbreak or variant of concern that poses a significant risk to individuals on the shielded patient list (SPL), ministers can agree to reintroduce shielding. Shielding would be considered in addition to other measures to address the residual risk to people on the SPL, once the wider interventions are taken into account. Shielding can only be reintroduced by national government.

In the event of a reintroduction of shielding we would need to review staffing capacity to ensure we could continue to operate staffing in a safe manner. Any attendance reductions as a result of this would be in line with the principles below.

Current guidance on clinically extremely vulnerable individuals can be found in the link below:

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#school-college-and-other-educational-settings

We will ensure all vulnerable staff and pupils have their risk assessments reviewed in the light of Omicron. In some circumstances, a child or young person may have received personal advice from their specialist or clinician on additional precautions to take and they should continue to follow that advice.

Attendance Restrictions and Remote Education

As a last resort, we may need to introduce attendance restrictions.

We will provide high-quality remote education for all pupils not able to attend because

- they have tested positive for COVID-19 but are well enough to learn from home; or
- attendance at their setting has been temporarily restricted

Where attendance restrictions are necessary there will be an order of priority applied in terms of which pupils would continue to attend on-site provision. The only deviation to this will be where they are required to isolate (either as a result of testing positive or as a result of a local reintroduction of close contact isolation – see above).

Priority for onsite attendance will always be given to vulnerable children and young people and children of critical workers. The national definition of vulnerable children has been updated. The previous definition included three categories of children and young people who should benefit from on-site provision:

- those with a social worker
- those with an Education, Health and Care Plan

• a group of children considered locally, including by settings and local authorities, to be 'otherwise vulnerable'

The guidance on children of critical workers and vulnerable children who can access school or education settings has been expanded to include a broader definition of children classified as vulnerable. In addition to the above, this list now includes:

- children known to children's social care services in the past
- children whose home circumstances might be particularly challenging because of domestic abuse, parental offending, adult mental health issues, and drug and alcohol addiction

For more information go to: <u>https://www.gov.uk/government/publications/coronavirus-covid-19-maintaining-educational-provision/guidance-for-schools-colleges-and-local-authorities-on-maintaining-educational-provision</u>

Second priority will be given to pupils in key stage 1.

Where attendance restrictions are needed, we will be vigilant and responsive to all safeguarding threats with the aim of keeping vulnerable children and young people safe, particularly as more children and young people will be learning remotely.

If we must temporarily stop onsite provision on public health advice, we will discuss any alternative arrangements necessary for vulnerable children and young people with the local authority. Where vulnerable children and young people are absent or do not take up a place offered to them, we will:

- follow up with the parent or carer, working with the local authority and social worker (where applicable), to explore the reason for absence and discuss their concerns
- encourage the child or young person to attend educational provision, working with the local authority and social worker (where applicable), particularly where the social worker and the Virtual School Head (where applicable) agrees that the child or young person's attendance would be appropriate
- focus the discussions on the welfare of the child or young person and ensuring that the child or young person is able to access appropriate education and support while they are at home
- have in place procedures to maintain contact, ensure they are able to access remote education support, as required, and regularly check if they are doing so

Staffing Capacity

Where staffing capacity (following use of available supply teaching capacity) is impacting on our ability to open fully we will follow the principles outlined in the attendance restrictions above.

Free School Meal provision

We will continue to provide free school meals support in the form of meals or lunch parcels/vouchers for pupils who are eligible for benefits related free school meals and who are not attending school because they:

- are self-isolating
- have had symptoms or a positive test result themselves.

Response and stand down action plan

The table below outlines how we will respond to single cases, clusters and outbreaks in our setting, outlining how we will put in place the above outlined measures (see headings above in outbreak plan) related to: reporting cases and responding to cases, reintroduction of consistent groups/zoning, reintroduction of face coverings, other restrictions, attendance restrictions, staffing capacity and free school meals.

It also outlines how we will "stand down" following an outbreak, including undertaking a review of our mitigation measures and of this plan.

Action	Action detail	Lead	Supplies/resources required	Other considerations
Reporting cases and when trigger thresholds have been met	All staff and pupil cases will be reported to the LA via <u>COVID19schools@coventry.gov.uk</u>	Rachel Askew		
Response to positive cases	Close contacts will be identified Information outlining testing/isolation guidance will be sent to any staff or parents of pupils identified as close contacts	Rachel Askew	letters to parents and staff in line with latest DfE and local guidance	
Reintroduction of consistent groups/zoning	Where an outbreak is in one class, that class will be treated as an individual bubble i.e. breaktimes and lunchtimes will be staggered from the rest of the school; lunch in the classrooms; contact with limited and consistent adults; non-participation in assemblies/masses (if applicable) and after-school clubs	Rachel Askew		
	If the outbreak is widespread, pupils will be grouped as follows: Group 1: EYFS Group 2: Y1/Y2			

Action	Action detail	Lead	Supplies/resources required	Other considerations
	Group 3: Y3/Y4			
	Group 4: Y5/Y6			
	Break times will be staggered so that groups do not mix.			
	Pupils will eat lunch in their classrooms and groups will have different time outside.			
	Groups will use separate designated breakout areas within school.			
	Whole school assembly will be delivered remotely.			
	Individual groups will attend mass.			
Reintroduction of testing/Additional PCR testing	All staff and pupils will be advised to take a LFT twice a week, including EYFS	Rachel Askew		
	Close contacts of a positive case will be advised to take LFTs for 7 days			
Contact tracing / isolating	Close contacts will be informed of testing and isolation guidance via a letter	Rachel Askew		
	When managing outbreaks or where we meet the triggers outlined above, siblings of close contacts will be asked to stay at home until they have had a negative PCR test. This is in addition to daily testing.	Admin staff		
Re-introduction of face coverings	Staff will be required to wear face coverings in communal areas such as corridors-and staff room and in reception area.	Louisa Boothby	Face masks	
Other restrictions	Parents may not be invited onto the school site for performances, parents meetings or other events	Rachel Askew		
	Events such as sporting fixtures may not take place			
	Visits to school may be recheduled			

Action	Action detail	Lead	Supplies/resources required	Other considerations
Ensuring staffing capacity	School will make effective use of available adults (HLTAs/grade 4 TAs/SLT) to cover for absent staff to ensure that the school can remain open.	Rachel Askew		
Attendance is temporarily restricted	Parents will be informed that their child will not be able to attend school unless they are vulnerable or the child of a critical worker.	Emma Muntoni		
	Staff will ensure that a programme of remote learning is available on the school website.			
	This will form the basis of remote learning which will be adapted by teachers.			
Free school meals	Parents of pupils eligible for FSM will be issued with vouchers if their child is required to isolate due to symptoms or a positive result, or they are unable to attend school due to attendance restrictions.	Louisa Boothby		Ensure parents can access vouchers and support if necessary
'stand down' following an outbreak	Risk assessment and contingency plan will be reviewed. Parents will be informed of when children can return and of any changes to the risk assessment which affects how the school operates.	Rachel Askew		

Appendix A

ISOLATION PERIODS, DEFINITIONS OF CLOSE CONTACT AND INFECTIOUS PERIOD FOR COVID-19

- Positive person: isolate from day symptoms started/day of test (if no symptoms) and for the next 7 days (minimum). Day 6 and Day 7 negative LFT test (taken 24 hours apart) required for deisolation (must also be well and not have a high temp). Work from home if able and limit contact with vulnerable individuals if deisolate. See exceptions re health and care settings below.
- Identify ALL close contacts in infectious period (see below definitions in table) all to isolate for 10 full days after day of last contact with case, unless exempt (see below in green)
- Exceptions: positive cases and contacts who are residents/patients in care homes/hospitals/anyone discharged who receives care to isolate for 14 days (cases and contacts). Also, positive health/care workers to isolate for 10 days unless business critical
- ***** Exemptions from self-isolation as a close contact (see special rules health and care workers):
 - * Fully vaccinated i.e. more than 14 clear days after day of second dose of UK COVID-19 vaccination
 - Under 18 years and 6 months
 - Part of COVID-19 vaccine clinical trial or medically exempt from vaccination (seek separate advice)
 - Those exempt should undertake daily lateral flow testing for 7 days, limit social contact and wear a face covering. For children under 5, recommend a PCR test and regular LFT testing (if acceptable to parent)
 - Additional requirements for health and care workers: to stay at home until result of PCR test, and do daily lateral flow tests for 10 days and ensure do not have contact with other staff or particularly vulnerable individuals during the 10 day high risk period.

DEFINITIONS				
CLOSE CONTACTS	INFECTIOUS PERIOD			
Direct physical contact (any duration)	If symptomatic: 2 clear days before day on which symptoms start – and			
Face-to-face contact under 1m (any duration)	for 10 days after			
Close contact under 1m for 1 minute or more	No symptome 2 clear days before the day of the test to 10 days often			
1-2m for 15 minutes or more (cumulative over 24 hrs)	No symptoms: 2 clear days before the day of the test – to 10 days after			
Travel in a vehicle				