



Living Safely with Respiratory Infections (Including COVID-19) Operational Policy - April 2022 (whole school including Prep, Pre-Prep and EYFS)

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ISI Reg:	N/A
Other related policies and documents:	Woodbridge School COVID 19 Risk Assessment; WBS Covid-19 Outbreak Management Plan; H & S Policy; Behaviour Policy; Safeguarding Policy.

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1. Overview

On Tuesday 29 March, the Secretary of State for Health and Social Care set out the next steps for living with COVID-19 in England from Friday 1 April. The UK Health Security Agency (UKHSA) has published new guidance on reducing the spread of respiratory infections, including COVID-19, in the workplace. This policy draws on that guidance

2. Face coverings

Face coverings are no longer advised for pupils, staff and visitors in classrooms or communal areas. However, the government suggests that you continue to wear a face covering in crowded and enclosed spaces where you may come into contact with people you do not normally meet. You may also consider wearing a face covering if you are in close proximity to people you know to be at risk of serious illness from COVID-19.

3. Testing for COVID-19

Free COVID-19 testing from the NHS has ended for most people in England. If you still want to get tested and you're not eligible for a free NHS test, you must pay for a COVID-19 test yourself. The School will continue to provide free COVID-19 test kits for any individual whose immune system means they are at higher risk of serious illness from COVID-19.

The School will also keep a supply of COVID-19 tests ready to hand out should we suspect an infection outbreak in the setting.

4. Control Measures

4.1. Hand Hygiene

Hand washing is one of the most important ways of controlling the spread of infections, especially those that cause diarrhoea and/or vomiting and respiratory infections. The School will ensure that staff and students have access to liquid soap and warm water. All staff and pupils should be advised to wash their hands after using the toilet, before eating or handling food, and after playtime.

Alcohol hand gel can be used if appropriate hand washing facilities are not available but should not replace washing hands, particularly if hands are visibly soiled or where there are cases of gastroenteritis in the setting. Alcohol hand gel is not effective against norovirus.

4.2. Respiratory and cough hygiene

Coughs and sneezes spread diseases. Covering the nose and mouth during sneezing and coughing can reduce the spread of infections. Anyone with signs and symptoms of a respiratory infection, regardless of the cause, should follow respiratory hygiene and cough etiquette, specifically:

- Cover nose and mouth with a tissue when coughing and sneezing, dispose of used tissue in a suitable waste bin and perform hand hygiene.
- Cough or sneeze into inner elbow if no tissues are available, rather than into the hand.
- Keep contaminated hands away from the mucus membranes of the eyes and nose.
- Carry out hand hygiene after contact with respiratory secretions and contaminated objects and materials

4.3. Cleaning

The School will continue to maintain appropriate cleaning regimes. In the event of an outbreak of infection, enhanced or more frequent cleaning may be undertaken.

4.4. Ventilation

Ventilation is the process of introducing fresh air into indoor spaces while removing stale air. Letting fresh air into indoor spaces can help remove air that contains virus particles and prevent the spread of COVID-19 and other respiratory infections. The School will keep occupied spaces well ventilated to help reduce the amount of respiratory germs. The need for ventilation will be balanced with the need to maintain a comfortable working environment.

4.5. Follow the latest public health advice

The latest public health advice advises:

- Adults with the symptoms of a respiratory infection, and who have a high temperature or feel unwell, should try to stay at home and avoid contact with other people until they feel well enough to resume normal activities and they no longer have a high temperature.
- Children and young people who are unwell and have a high temperature should stay at home and avoid contact with other people. They can go back to school when they no longer have a high temperature, and they are well enough to attend.
- Adults with a positive COVID-19 test result should try to stay at home and avoid contact with other people for 5 days, which is when they are most infectious.
- It is not recommended that children and young people are tested for COVID-19 unless directed to by a health professional. If a child or young person has a positive COVID-19 test result they should try to stay at home and avoid contact with other people for 3 days after the day they took the test, if they can. After 3 days, if they feel well and

do not have a high temperature, the risk of passing the infection on to others is much lower.

- Children and young people who usually go to school and who live with someone who has a positive COVID-19 test result should continue to attend as normal

5. Those formerly considered to be clinically extremely vulnerable

The success of the coronavirus (COVID-19) vaccination programme has meant that the requirement for shielding and identifying people as clinically extremely vulnerable (CEV) is no longer necessary. However, there remains a smaller number of people whose immune system means they are at higher risk of serious illness from COVID-19, despite vaccination.

Immunosuppression means you have a weakened immune system due to a particular health condition or because you are on medication or treatment that is suppressing your immune system. People who are immunosuppressed, or have specific other medical conditions, may have a reduced ability to fight infections and other diseases, including COVID-19.

Any individual who is at a higher risk of serious illness from COVID-19 should have a risk assessment completed by a suitable person (Line Manager / Head of Department) to ensure that any suitable reasonable adjustments that can be put in place, are done so.

6. Educational Visits

Educational visits should be subject to risk assessments as normal and reflect any public health advice or in-country advice of the international destination. [General guidance on educational visits](#) is available and is supported by specialist advice from the [Outdoor Education Advisory Panel \(OEAP\)](#).

For international educational visits, you should refer to [the Foreign, Commonwealth and Development Office travel advice](#) and the guidance on international travel before booking and travelling to make sure that the school group meet any entry and in country requirements especially in relation to vaccinations. Additional information can be obtained from [TravelHealthPro](#).

You are advised to ensure that all bookings have adequate financial protection in place. You should speak to either your visit provider, commercial insurance company, or the risk protection arrangement (RPA) to assess the protection available. Independent advice on insurance cover and options can be sought from the British Insurance Brokers' Association (BIBA) or Association of British Insurers (ABI)

All trips must be approved as per the school's procedures.

7. Action in the event of an outbreak

If an outbreak is suspected, the School will review and reinforce the baseline infection prevention and control measures already in place as outlined in Section 4. The School may consider seeking specialist advice from our UKHSA Health Protection Team (HPT) if we are concerned and have seen:

- A higher than previously experienced and/or rapidly increasing number of staff or pupil absences due to acute respiratory infection or diarrhoea and vomiting.
- Evidence of severe disease due to an infection, for example if a pupil or staff member is admitted to hospital.
- More than one infection circulating in the same group of students and staff, for example chicken pox and scarlett fever.

The School will also contact our UKHSA HPT as soon as possible to report any outbreak or serious or unusual illness, for example:

- E. coli 0157 or E. coli STEC infection
- Food poisoning
- Hepatitis
- Measles, mumps, rubella (German measles).
- Meningococcal meningitis or septicaemia
- Tuberculosis
- Typhoid
- Whooping cough (pertussis)

Upon contacting the UKHSA HPT, they will conduct a risk assessment of the situation based on the information we provide, and the type of infection. This risk assessment will form the need for any further actions which may include:

- Reinforcement of baseline infection prevention and control measures
- Communication to parents
- Exceptionally, temporary advice to reduce mixing among targeted groups
- Exceptionally, the temporary use of face coverings in communal areas

The UKHSA HPT may consider holding an incident management team (IMT) meeting which would bring together local stakeholders and the appropriate local authority. If, in exceptional circumstances and as a last resort, limiting the number of children attending the setting is considered necessary for public health reasons, this will be discussed at an IMT meeting before being implemented.

7.1. Classification of an outbreak

An outbreak or incident may be defined in epidemiological terms as:

- An incident in which 2 or more people experiencing similar illnesses are linked in time or place
- A greater than expected rate of infection compared with the usual background rate for the place and time where the outbreak has occurred

Note – these definitions should not be taken as a threshold for reporting or action. The School will follow the guidance above for when to seek help or report infections

8. Compliance and Monitoring Arrangements

This policy will be subject to a thorough review process including consideration at the Compliance and Risk Committee on an annual basis. This will ensure that practice across the whole School is in line with this policy, the Complaints procedure and with current guidance and legislation.