



## FAQs for schools for full return on 8 March

### Public Health Advice & Risk Assessment

You will see the most recent updates to our risk assessment on our website (the COVID section is the pop out you see when you visit the school website). Alongside this, here are some frequently asked questions and (hopefully) some answers!

#### **1. What should I do if someone exhibits symptoms of Covid-19?**

There is no change in procedures and you should continue to follow the PHE flow chart.

As soon as anyone shows symptoms of the virus they should be isolated immediately and sent home to self-isolate for 10 days and arrange to have a PCR test to see if they have COVID-19.

If the test result is positive, follow the reporting checklist which also remains unchanged.

#### **2. What happens if an individual has a positive lateral flow test?**

If the test has been taken at school, individuals with a positive LFD result will need to self-isolate immediately in line with the stay-at-home guidance. Current guidance states that the individual will not need to book a confirmatory PCR test while prevalence of the virus is high.

The school should carry out close contact tracing, as with a positive PCR test, and the individual & close contacts should isolate for 10 days from the date of the test.

If the test has been taken at home, school should be informed of the result so that close contacts can be identified. The individual should book a confirmatory PCR test online, then continue to isolate for 10 days (following the first positive result and re-start the 10 days if they develop symptoms). School should be informed of the result of the PCR test.

#### **3. What should I do if I am isolating following a positive LFD test result and I subsequently develop symptoms?**

If you are isolating because of a positive test result but did not have any symptoms, and you develop COVID-19 symptoms within your isolation period, start a new 10 day isolation period by counting 10 full days from the day following your symptom onset.

You can return to your normal routine and stop self-isolating after 10 full days if your symptoms have gone, or if the only symptoms you have are a cough or anosmia, which can last for several weeks. If you still have a high temperature after 10 days or are otherwise unwell, stay at home and seek medical advice.

#### **4. If someone has a positive lateral flow test at home should we wait for a confirmatory PCR test before contact tracing?**

No, the person who has tested positive using the LFD should immediately self-isolate and arrange a confirmatory PCR test. Close contacts should be identified and advised to self-isolate following existing policies.

## **Lateral Flow Testing**

### **5. If a student is struggling with swabbing, can both nostrils or only the throat be sampled?**

Ideally both the throat and nostrils will be sampled. However, where there are physical/medical issues or an individual has a very sensitive gag reflex that prohibits the throat swab from being completed successfully, double nasal swabbing can be undertaken. Under circumstances, where a nasal swab is not feasible (e.g. a student is prone to nasal bleeds), it is acceptable to swab only the back of the throat without nostrils.

It should be noted that there may be a reduction in the sensitivity of the test in these circumstances.

### **6. An individual has recently had Covid. Should they be doing LFD tests?**

Government advice is that LFD testing is paused for 90 days following a positive Covid-19 test. If they develop symptoms of Covid-19, or they are identified as a close contact of a confirmed case, in this period, they should self-isolate according to Government guidance.

Individuals are free to resume the LFD testing, following the 10 day isolation period, before 90 days has elapsed if they wish to and must self-isolate again if they receive a positive result.

### **7. Should we be providing LFD tests for visitors to site?**

The tests kits being provided to schools are for the home testing of staff and secondary age students. If schools are using supply staff that are on the school site on a regular basis throughout the week, then they should be included in the programme of testing.

Other visitors who may be attending once a week or so or on an adhoc basis should not be supplied with test kits and schools' systems of controls should mitigate any risk from these visitors.

### **8. How do individuals dispose of test materials once they have completed a test?**

All the material supplied for the home test kits can go in normal household waste with a bag supplied with each kit for that purpose.

### **9. What about home testing?**

One we have undertaken the three tests in school, testing of students will then be undertaken in the home. Test kits for home will NOT be sent out via school. There are different ways for a household, childcare or support bubble to collect their test to take at home, twice-weekly:

- through your employer, if they offer testing to employees
- by collecting a home test kit from a local test site – anyone aged 18 or over can collect 2 packs of 7 tests
- by ordering a home test kit online – please do not order online if you can access testing through other routes, this frees up home delivery for those who need it most

If you have any queries about the tests, and you live in England, please call 119 (free from mobiles and landlines). Lines are open every day from 7am to 11pm.

## **10. Does a bubble need to close following two void test results?**

In the unlikely event of two void results the close contacts in a school bubble would not need to self-isolate until there was a positive result (either by PCR or LFD).

If an individual gets a void result, this means that the test has not run correctly, and they will need to take another test as soon as possible, ideally on the same day. They should use a new test kit but not reuse anything from the first kit. In the very unlikely event of getting two void test results, they should book a PCR test. They should self-isolate pending the result of the PCR test and inform their school as it may indicate a faulty batch of test kits.

If an individual regularly gets void results it may indicate that there is an issue with their technique. In this case we recommend inviting the individual to carry out a test under supervision in school to check this.

## **School Operation**

### **11. What do we mean by a face covering?**

A face covering is something which safely covers the nose and mouth. You can buy reusable or single-use face coverings. You may also use a scarf, bandana, religious garment or hand-made cloth covering but these must securely fit round the side of the face.

### **12. Why are we using face coverings?**

Face coverings are not classified as PPE (personal protective equipment), which 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. Face coverings are instead largely intended to protect others, not the wearer, against the spread of infection because they cover the nose and mouth, which are the main confirmed sources of transmission of virus that causes coronavirus infection (COVID-19).

### **13. What about transparent coverings and face shields?**

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). Face visors or shields should not be worn as an alternative to face coverings. They may protect against droplet spread in specific circumstances but are unlikely to be effective in preventing aerosol transmission when 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. Those who rely on visual signals for communication, or communicate with or provide support to such individuals, are currently exempt from any requirement to wear face coverings in education settings or in public places.

### **14. How do I care for my face mask/covering?**

It is vital that face coverings are worn correctly and we will provide clear instructions to staff, pupils and students on how to put on, remove, store and dispose of face coverings in all of the circumstances above, to avoid inadvertently increasing the risks of transmission.

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 in the event that their face covering becomes damp during the day.

Staff and students should:

- 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.

#### **15. What if my child loses or damages their face covering?**

We do carry spare face masks and your daughter/son should come straight to reception to ask for another. This should also be the case if the face mask becomes damaged, damp or dirty.

#### **16. When can individuals who are shielding return to school?**

Staff and students who are CEV, and have shielding letters, should continue to stay at home until further notice. It is expected that the position will be reviewed at the end of March.

Clinically extremely vulnerable people are expected to receive a vaccination against COVID-19 before the general population but even if both doses of the vaccine have been received, they should continue to follow the shielding advice, until further notice as the impact of vaccination is assessed among all groups.

#### **17. A parent is shielding and does not want their child to return. Should their child be coming to school?**

The child should be attending school but the LA appreciates the anxiety this may cause the family and we expect schools to view these situations sympathetically. Schools should work with the family to understand their concerns and seek to reassure the family about control measures in place on site. coincide with election dates, if it has already been published.

#### **18. Are we permitted to let our school building to children's groups after school as we would normally e.g. Brownies, drama clubs, karate?**

All wraparound care should resume. This care should only be accessed by parents if it is reasonably necessary to support them to work, seek work, undertake education or training, attend a medical appointment or address a medical need or attend a support group. Schools can also offer it as part of the school's educational activities (including catch-up provision) and to support children to obtain a regulated qualification or meet the entry requirements of an education institution.

Outdoor after school activities are planned to resume on the 29 March followed by all other activities on 12 April.

#### **19. Will all school bus routes run normally?**

All school transport will run normally from 8 March.

**20. Can schools start to run trips again?**

Educational visits are not advised at this time.

**21. Will the peripatetic music service resume on 8 March?**

The music service is planning to resume peripatetic teaching after Easter.

**Please note that the FAQs are accurate at the date of publication and will be updated regularly as further guidance is received from the government and local authority.**