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Policies and Procedures

COVID-19

Version and Date		Action/Notes
V1	March 2020	For lockdown and Key worker children and vulnerable children
V2	May 2020	For school reopening June 2020
V3	August 2020	For school reopening September
Review Date		Review frequency: Update with latest UK government advice and in any case Jan 2021

Information about COVID-19

A coronavirus is a type of virus. As a group, coronaviruses are common across the world. COVID-19 is caused by SARS-CoV-2, a new strain of coronavirus that emerged in China in 2019.

The incubation period of COVID-19 is normally between 2 and 14 days. This means that if a person remains well 14 days after contact with someone with confirmed coronavirus, it is unlikely that they have been infected.

The most common symptoms of COVID-19 infection are:

- Cough
- Difficulty in breathing
- Fever
- Loss of taste/smell

Other non-specific symptoms might include shortness of breath, fatigue, loss of appetite, myalgia (sore muscles), sore throat, headache, nasal congestion, diarrhoea, nausea and vomiting.

Most people with COVID-19 have a mild illness, but about 15% experience more severe illness requiring hospital treatment. Older people, those with weakened immune systems, and those with long-term conditions like diabetes, cancer and chronic lung disease are more at risk of severe illness. Severe illness is very rare in children.

If you are worried about your symptoms or those of a child or colleague, please call NHS 111. Do not go directly to your GP or other healthcare environment

See further information on the Public Health England Blog and the NHS UK website.

How COVID-19 is spread

From what we know about other coronaviruses, the spread of COVID-19 is most likely to happen when there is close contact (within 2 metres) with an infected person. It is likely that the risk increases the longer someone has close contact with an infected person.

Droplets produced when an infected person coughs or sneezes (termed respiratory secretions) containing the virus are likely to be the most important means of transmission.

There are 2 routes by which people could become infected:

- Droplets may be directly transferred into the mouths or noses of people who are nearby (within 2 metres) or could be inhaled into the lungs
- it is also possible that someone may become infected by touching a surface or object that has been contaminated with respiratory secretions and then touching their own mouth, nose, or eyes (such as touching a door knob or shaking hands then touching their own face).

Preventing the spread of infection

There is currently no vaccine to prevent COVID-19. The best way to prevent infection is to avoid being exposed to the virus.

There are general principles to help prevent the spread of respiratory viruses, including:

Minimising the risk of contact with infected cases:

- people who feel unwell should stay at home and should not attend work or any education or childcare setting
- avoid close contact with people who are unwell
- maintaining physical distancing
- minimising contact between groups or 'bubbles'

Minimising the risk of virus transmission

- washing hands often with soap and water, or ≥60% alcohol sanitiser if handwashing facilities are not available. This is particularly important after taking public transport or touching frequently touched 'public' surfaces.
- pupils, students, staff and visitors should wash their hands:
 - before leaving home
 - on arrival at school
 - after using the toilet
 - after staff breaks
 - after coming in from the garden
 - after coming in from break times
 - after participating in group physical activities such as PE lessons
 - before food preparation
 - before eating any food, including snacks
 - before leaving school
- covering your cough or sneeze with a tissue, then throwing the tissue in a bin - "" (see also <https://www.england.nhs.uk/south/wp-content/uploads/sites/6/2017/09/catch-bin-kill.pdf>)
- avoid touching eyes, nose, and mouth with unwashed hands
- Schools have been advised PPE is not routinely required. Europa School UK will use PPE for intimate bodily contact such as in First aid, and for supervision staff at meal times.
- Users of face covering will be reminded to wash/sanitise hands before putting on a mask and removing the mask. Users of reusable masks are asked to bring in a plastic zip-lock bag with their name on for safe storage. Special bins will be available for disposal on one time use masks. (see guidance video on use of face mask https://www.youtube.com/watch?v=9Tv2BVN_WTk)
- clean and disinfect frequently touched objects and surfaces – this will be done at lunchtime and after school

Cleaning Routines:

Daily cleaning routines will largely remain the same as from the opening of the school in June, and high standards of good hygiene are currently in place. However, in areas where there are hard surfaces that are infrequently cleaned or not cleaned to a high enough standard the following will be put in place:

- All frequently used hard surfaces will be cleaned with a hard surface cleaning and sanitising solution each day. This includes all door handles, number pads on doors, door release buttons, light switches, keyboards/mouse, telephones and money safe.
- There will be an additional clean of all hard surfaces at lunchtimes.
- All bins will be emptied daily.
- All toilet areas will be cleaned continuously during the school day and after school

Hand Washing Routines:

To ensure the staff, children, parents and visitors are washing their hands in line with the current guidelines the following will be put in place:

- Parents will be reminded to reinforce good hand hygiene with their children
- On arrival at school, all adults will wash their hands
- Staff should wash their own hands before supporting a child to wash theirs.
- During the day children and staff will wash their hands after going to the toilet, before meals or snacks, and when arriving back from recreation/exercise.
- Staff will use the Hand Washing Song for KS1 students to encourage the children to wash their hands with soap and water, and for at least twenty seconds.
- Children's will be guided to the visuals on the wall to aid good handwashing skills
- Staff must wash their hands before preparing or serving food or wearing gloves.
- Staff will reinforce hand hygiene before and after putting on masks where these are required.

Hygiene Guidance

- Posters/messages on handwashing should be displayed in every classroom, lobby and toilet area
- Staff will continue to focus on hygiene education with all children
- extra washbasins had been added around the school as well as sanitiser stations and hygiene packs in each classroom.

Guidance on dealing with suspected or confirmed cases of COVID-19 at School

The school is following national guidance from PHE, and regional Guidance for Childcare and Educational Settings in the Management of COVID-19 issued by PHE South East Health Protection Team V2.0.

<http://schools.oxfordshire.gov.uk/cms/sites/schools/files/folders/folders/documents/schoolsnews/2020/TV%20schools%20flowchart%20V2.0.pdf>

How to isolate an adult who develops symptoms of possible COVID at school

- If they become unwell in the workplace the adult should be removed to an area which is at least 2 metres away from other people.
- The adult who is unwell should be asked to wear (and if necessary, provided with) a face covering/mask.
- They should avoid touching people, surfaces and objects and be advised to cover their mouth and nose with a disposable tissue when they cough or sneeze and put the tissue in a bag, then throw the tissue in the bin. If they don't have any tissues available, they should cough and sneeze into the crook of their elbow
- If they need to go to the toilet whilst waiting for medical assistance, they will use the adjacent dedicated toilet which will be cleaned immediately after by the site team using full PPE protection.

How to isolate a child who develops symptoms of possible COVID at school

- Make sure that children know to tell a member of staff if they feel unwell.
- Give the child a disposable mask to wear if they are able to tolerate wearing it.
- The child's key person should take them to the ELSA room (the designated isolation area) and remain with them but try to keep 2 metres away. The adult must wear a mask, protective gloves, and disposable apron (available in the ELSA room).
- The windows of the ELSA room should be opened for ventilation.
- The child should be advised to avoid touching people, surfaces and objects; and to cover their mouth and nose with a disposable tissue when they cough or sneeze and put the tissue in the bin. If they cough or sneeze in an area where no bin is available, they should be advised to put the tissue in a bag or pocket for disposing in a bin later. If you don't have any tissues available, they should cough and sneeze into the crook of their elbow. The ELSA room will be thoroughly cleaned once they leave, including disinfection of all hard surfaces.
- The ELSA room has its own toilet and hand washing facilities.
- The child's parents would be called to collect the child immediately. The child should be off the pre-school premises within one hour of becoming unwell
- After the child or staff member has left, the ELSA room must be deep cleaned, including any objects/items touched.

What to do if there is a suspected case of COVID-19 in the school

Ensure child/staff member and their household are isolated at home pending the result of a COVID test. To ask for a COVID test visit nhs.uk/ask-for-a-coronavirus-test If anyone has been in contact with a suspected case in a childcare or educational setting, no restrictions or special control measures are required while laboratory test results for COVID-19 are awaited. There is no need to close the setting or send other children or staff home. Until the outcome of test results is known there is no action that staff members need to take apart from cleaning specific areas and disposing of waste.

Once the results arrive, those who test negative for COVID-19 can return to school once they are well. Those in their household can also stop self-isolating as long as they remain well.

What to do if a case of COVID-19 is confirmed in a child or member of staff

The school must be informed immediately if any child or member of staff has COVID-19.

Ensure child/staff members are isolated at home for 10 days from when symptoms started and comply with NHS Track and Trace. The rest of the household need to be isolated for 14 days.

The School must contact the local Public Health England Health Protection Team to discuss the case, identify people who have been in contact with them and advise on any actions or precautions that should be taken. An assessment of each childcare or education setting will be undertaken by the Health Protection Team with relevant staff. Advice on the management of children and staff will be based on this assessment.

The Health Protection Team will also be in contact with the patient directly to advise on isolation and identifying other contacts and will be in touch with any contacts of the patient to provide them with appropriate advice. Advice on cleaning of communal areas such as playrooms and toilets will be given by the Health Protection Team.

If there is a confirmed case, a risk assessment will be undertaken by school with advice from the local Health Protection Team. In most cases, closure of the education setting will be unnecessary, but this will be a local decision based on various factors such as establishment size and pupil mixing.

What to do if children or staff in the school are contacts of a confirmed case of COVID-19 who was potentially infectious while attending the school

The definition of a contact includes:

- any child or staff member in close face-to-face or touching contact including those undertaking small group work (within 2 metres of the case for more than 15 minutes)
- talking with or being coughed on for any length of time while the individual is symptomatic
- anyone who has cleaned up any bodily fluids of the individual

- close friendship groups
- any child or staff member living in the same household as a confirmed case, or equivalent setting such as boarding school dormitory or other student accommodation

Contacts are not considered cases and if they are well, they are very unlikely to have spread the infection to others, however:

- they will be asked to self-isolate at home for 14 days from the last time they had contact with the confirmed case and follow the home isolation guidance
- they will be actively followed up by the Health Protection Team
- if they develop any symptoms within their 14-day observation period they should call NHS 111 for assessment
- if they become unwell with cough, fever or shortness of breath they will be tested for COVID-19
- if they require emergency medical attention, call 999 and tell the call handler or ambulance control that the person has a history of potential contact with COVID-19
- if they are unwell at any time within their 14-day observation period and they test positive for COVID-19 they will become a confirmed case and will be managed as above from a public health perspective.

Family and friends who have not had close contact (as defined above) with the original confirmed case do not need to take any precautions or make any changes to their own activities such as attending childcare or educational settings or work, unless they become unwell. If they become unwell, they should call NHS 111 and explain their symptoms and discuss any known contact with the case to consider if they need further assessment.

If a confirmed case occurs in the school the local Health Protection Team will work with the senior leadership team to advise the school on further management. Outside those that are defined by the Health Protection Team as close contacts, the rest of the school does not need to take any precautions or make any changes to their own activities attending educational establishments or work as usual, unless they become unwell. If they develop symptoms of possible COVID-19, they will be assessed as a suspected case. This advice applies to staff and children in the rest of the class. The decision as to whether children and staff fall into this contact group or the closer contact group will be made between the Health Protection Team, the pre-school and (if they are old enough) the child. Advice should be given as follows:

- if they become unwell with cough, fever or shortness of breath they will be asked to self-isolate and should seek medical advice from NHS 111
- if they are unwell at any time within the 14 days of contact and they are tested and are positive for COVID-19 they will become a confirmed case and will be treated as such.

Guidance on cleaning the school after a case of COVID-19 (suspected or confirmed)

All surfaces that a suspected or confirmed case of COVID-19 has come into contact with must be cleaned using disposable cloths and household detergents, according to current recommended workplace legislation and practice. This cleaning will be done by the school cleaners/site team.

These include:

- all surfaces and objects which are visibly contaminated with bodily fluids
- all surfaces with which the individual is known to have been in contact (e.g. the individual's desk, chair, or equipment they have used)
all potentially contaminated high-contact areas such as toilets, door handles, telephones

Public areas where a symptomatic individual has passed through and spent minimal time in (such as corridors) but which are not visibly contaminated with bodily fluids do not need to be specially cleaned and disinfected. If a person becomes ill in a shared space, these should be cleaned as detailed above.

Guidance to assist professionals

Guidance for educational settings

<https://www.gov.uk/government/publications/actions-for-schools-during-the-coronavirus-outbreak/guidance-for-full-opening-schools>

Guidance for employers and business

www.acas.org.uk/coronavirus

Well-being and Behaviour expectations

The school has an important role to play in creating and supporting high expectations of behaviour and routines, which will need to be both re-established and re-learned following the reopening of the school and after a period where children have remained within their family groups for a long period of time.

Early intervention to identify and provide effective support will be crucial. The school's role is summarised:

Prevention: creating a safe and calm environment where problems are less likely and pupils can be helped and supported to re-learn routines and behaviour expectations and to recover resilience in managing a return to a class situation. The class teachers will renew the emphasis on good hygiene which was already well established before the lockdown as well as introducing pupils to new routines required for the purpose of responding to COVID-19.

Identification: recognising emerging issues early on and engaging with parents via remote communication on any routines which might need to be re-established at home.

Early support: helping children to adjust to the classroom environment with support from teaching assistants, DSL, SENCO team

Access to wider support: external agencies

Feelings of Loss/Bereavement

Some children may restart school scarred in some way by illness or loss in their close or wider families. Home school communication is vital in these situations to understand the context and to support each child individually. The school bereavement policy contains guidance and many links to support organisations.

Behaviour Policy

The school has a well-established behaviour policy in place which is based on restorative practice alongside sanctions as required.

Any behavioural concerns which are disruptive to the class will be dealt with sensitively in the context of the difficulties which may be experienced in the reintegration to school.

The school's daily notice will give information regarding the senior leader on duty each day so that any backup support can be obtained quickly including withdrawing the pupil from class with supervision.

Individual risk assessments will be written by the Senior Leadership Team with support from class teachers, to plan appropriate behaviour interventions for individual students when necessary.