

COVID 19 and other infectious diseases – Implementing protective measures

See also health and hygiene policy

Guidance

UK Health Security Agency Health Protection in Education and Childcare Settings (1st April 2022)

DfE emergency planning and response -1st April 2022

Guidance for people with symptoms of a respiratory infection including COVID-19, or a positive test result for COVID-19 - 1st April 2022

Living safely with respiratory infections including COVID-19 - 1st April 2022

Ventilation of indoor spaces to stop the spread of coronavirus. Updated 15th September 2021

COVID-19:guidance for people whose immune system means they are at higher risk. Updated 25th February 2022

On Tuesday 29 March, the Secretary of State for Health and Social Care, Sajid Javid, set out the [next steps for living with COVID-19](#) in England from Friday 1 April. Free COVID-19 tests will continue to be available for specific groups, including eligible patients and NHS staff, once the universal testing offer ends on Friday 1 April.

Updated guidance 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, college or childcare 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. For children and young people aged 18 and under, the advice will be 3 days

The population now has much stronger protection against COVID-19 than at any other point in the pandemic. This means we can begin to manage the virus like other respiratory infections, thanks to the success of the vaccination programme and access to antivirals, alongside natural immunity and increased scientific and public understanding about how to manage risk. COVID-19 continues to be a virus that we learn to live with and the imperative to reduce disruption to children's education remains. Our priority is to deliver face-to-face, high quality education and childcare to all children.

In our preschool environment we will prevent the spread of coronavirus and other infectious diseases recognising that this involves dealing with direct transmission (for instance, when in close contact with those sneezing and coughing) and indirect transmission (via touching contaminated surfaces). A range of approaches and actions will be employed to do this. This is a hierarchy of controls that, when implemented will create an inherently safer system, where the risk of transmission of infection is substantially reduced. These controls include:

1. Ensuring good hygiene for everyone. Staff and children will regularly wash their hands especially after using the toilet and before eating.
2. Maintaining appropriate cleaning regimes, using standard products such as detergents. Surfaces and touch points will be cleaned twice a day.
3. Keeping occupied spaces well ventilated. Windows will be open and outdoor play encouraged.
4. Following public health advice on self-isolation and managing confirmed cases of COVID-19 and other infectious diseases.

Self Isolating

It is still the guidance that children, staff and other adults should not come into the setting if they have a high temperature and feel unwell. Adults with a positive COVID-19 test result should stay at home for five days and children for three days.

If anyone in the setting develops a high temperature, they will be sent home and they should follow public health advice.

If a child is awaiting collection, appropriate PPE will be used if close contact is necessary. If safe to do so, a window will be opened for fresh air ventilation if possible. Any rooms they use will be cleaned after they have left.

Asymptomatic testing

Staff will no longer need to test twice weekly at home with rapid lateral flow device (LFD) test kits, 3 to 4 days apart.

Clinically Extremely Vulnerable

Staff and children can continue to attend unless advised otherwise by their clinician. Public health advice is that such individuals should get vaccinated and should follow public health advice in relation to mask wearing.

Personal Protective Equipment (PPE)

There is no longer a requirement for face coverings in crowded areas or for visitors.

Staff will not require PPE above what would normally be needed e.g. nappy changing. PPE will only be needed in a very small number of cases including:

- children whose care routinely already involves the use of PPE due to their intimate care needs should continue to receive their care in the same way
- if a child becomes unwell with a high temperature while in their setting and needs direct personal care until they can return home. A fluid-resistant surgical face mask should be worn by the supervising adult if a distance of 2 metres cannot be maintained. If contact with the child or young person is necessary, then disposable gloves, a disposable apron and

a fluid-resistant surgical face mask should be worn by the supervising adult. If a risk assessment determines that there is a risk of splashing to the eyes, for example from coughing, spitting, or vomiting, then eye protection should also be worn

Local Outbreak Management Plan Closure due to illness or other extreme event

If we suspect an outbreak we will review and reinforce the baseline infection prevention and control measures which include:

- ensuring that all staff and children who are unwell do not attend the setting.
- ensuring all eligible groups are enabled and supported to take up the offer of [national immunisation](#) programmes including coronavirus (COVID-19) and flu
- ensuring occupied spaces are well ventilated and let fresh air in
- reinforcing good hygiene practices such as frequent cleaning and handwashing.
- Send out communications to raise awareness among parents and carers of the outbreak or incident and to reinforce key messages, including the use of clear hand and respiratory hygiene measures within the setting such as [E-Bug](#)

We will contact [UKHSA HPT](#) if there is:

- a higher than previously experienced and/or rapidly increasing number of staff or child absences due to acute respiratory infection or diarrhoea and vomiting
- evidence of severe disease due to respiratory infection, for example if a child 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 scarlet fever

Education and childcare settings are also asked to contact their 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 (rubella is also called *German measles*)
- meningococcal meningitis or septicaemia
- scarlet fever (if an outbreak or co-circulating chicken pox)
- tuberculosis (TB)
- typhoid
- whooping cough (also called pertussis)

Contact details of UKHSA South West Health Protection Team:

swhpt@phe.gov.uk

0300 303 8162 option 1 then option 2

Our outbreak management plan outlines how we will operate if there is an outbreak in our setting or local area. The aim is to minimise disruption for the shortest time possible. We will communicate changes to parents as soon as possible via email and Tapestry.

As soon as we become aware of an outbreak in the setting we will work with our local health protection team and follow their advice as necessary.

We will utilise bank staff where possible if we are short staffed or if some staff are required to shield due to a change in national government guidelines. If we cannot operate a full session we will reduce the number of children attending by offering places as follows:

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- children of critical workers, and vulnerable children
- then 3- and 4-year-olds, in particular those who will be transitioning to Reception
- followed by younger age groups

We will be staying in touch with parents and home learning will be accessed through Tapestry.

We will work with our local authority to monitor the welfare of vulnerable children and those with safeguarding plans.

We will stop extracurricular activities, parent meetings, open days and trips.

We will review messy play activities and reintroduce an enhanced cleaning schedule including quarantining and sterilising equipment daily.

The use of face coverings in crowded areas will be reviewed.

All non-essential visits will be suspended but essential visitors will need to wear face coverings.

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