

## National Health Protection Cell

### Keep Wales Learning

# Guidance to support contact tracing in education and childcare settings

## 1 Introduction

This guidance note should be read in conjunction with the relevant guidance developed for childcare, schools, further and higher education settings.

It is intended to help clarify the important role that settings can play in supporting contact tracers to undertake their role in determining the contacts of a positive case. The overall aim is to safely minimise the number of contacts resulting from a positive case so that we can maximise the amount of time that children and young people can access childcare and education settings.

It will not be a one size fits all approach and settings will need to determine how they can most effectively implement this guidance to reflect their local context and circumstances. Throughout this guidance elements will have greater relevance in different types of settings e.g. schools and universities etc and will need to be considered in each context.

The focus is on settings providing information to support the Test Trace Protect (TTP) teams to decide who needs to self-isolate. There is no expectation that staff in any of these settings can provide absolute confirmation about which children and young people may have had contact with a positive case. However, it is important that steps are taken to be able to reduce contacts in the ways described below.

The TTP teams are organised on a regional basis as a partnership between Health Boards and Local Authorities. Discussions between TTP and education and childcare settings will normally be led by the regional teams. These include representation from Local Authorities among others. Currently, these regional teams are working seven days a week from 8am – 8pm, it is possible that they may need to make contact with settings during these hours.

## 2 Background

A considerable amount of work has been undertaken by schools and other educational and childcare settings, Local Authorities and regional Test Trace, Protect (TTP) Teams supported by Public Health Wales and Welsh Government to enable children and young people to return to education and childcare.

Work has taken place to ensure settings are as COVID Secure as possible to help reduce the likelihood of transmission of the virus. The return to school and childcare has provided an opportunity to test these measures in practice and as might be expected opportunities are being identified to clarify, strengthen and improve guidance and measures in these settings.

Drawing on the experience of those working with education and childcare settings such as the TTP Teams and the Health Protection Teams and reflecting on feedback from key stakeholders, this guidance seeks to clarify the measures that settings can take to help reduce the number of children, learners and staff members who need to self-isolate following a positive case to a minimum. There is a shared goal to support as many children and learners as possible to remain in childcare, school, further or higher education and to keep people safe.

## 3 Keeping People Safe

There are two basic approaches to reducing the spread of infection in a population.

- **Prevention:** measures to stop transmission if a case attends the setting - this includes social distancing, reducing unnecessary mixing, hand and respiratory hygiene
- **Early Intervention:** measures to stop secondary transmission if contacts go on to develop the illness – including isolation and testing of people with symptoms, identification and isolation of close contacts.

Prevention should be the primary aim of all control measures. Experience to date suggests that prevention measures have been well understood and widely implemented across educational settings. However, we believe that we can do more to support early intervention and maximise the number of children, learners and staff who can safely continue in a setting.

### 3.1 Roles and Responsibilities

Children, learners and families; education and childcare leaders and staff; regional TTP Teams and public health professionals all have a role to play in supporting prompt action in response to a positive case.

*Children, learners, families and staff* have a responsibility to self-isolate if they or someone they share a house with develop any symptoms of COVID-19 (high temperature, new continuous cough, loss of sense of taste or smell). Those with symptoms should get a test. If they cannot be tested or they test positive symptomatic individuals need to self-isolate for a minimum of 10 days from the start of symptoms and members of their household for 14 days.

*Childcare, School, Further and Higher Education Leaders* have three key responsibilities.

- Their primary responsibility is to organise the day to day delivery of learning in a way that limits the amount of contact between staff; staff and children/learners and between children/learners (Prevention).
- The second key responsibility is to ensure they have information available which will support the TTP Teams to decide who is a close contact and therefore needs to self-isolate. As part of this there is an expectation that childcare, school, further and higher education leaders will communicate with parents/carers and learners if there is a requirement for large groups of children/learners to self-isolate as a result of a case in a setting. It is not the responsibility of childcare, school, further and higher education leaders to make decisions about whether individuals need to isolate.

- The final responsibility is to ensure their organisation has the processes and policies in place to ensure those who are required to self-isolate do so (including recording symptoms as part of sickness absences, and ensuring those required to self-isolate do not come back before the appropriate time without confirmation that self-isolation is no longer necessary).

It is recognised that childcare, school, further and higher education leaders may become aware of cases associated with their organisation before contact tracing is formally undertaken, and that initial precautionary action may be required.

The *TTP Teams* are responsible for contacting each positive case and collecting information about their close contacts both within and outside the education or childcare setting. This will include contacting workplaces, households and other settings where that individual has spent time. The TTP team will gather information about where that individual has spent time and who with. It is their role to identify which individuals meet the definition of a close contact and therefore need to self-isolate. They will work with the setting to agree on communication with those who are required to self-isolate and those who may return to the setting.

*Public Health Wales* is responsible for providing guidance to support the TTP teams and providing specialist advice to those teams to help resolve more complex queries.

## 4 Childcare, School, Further and Higher Education Organisation to Prevent Transmission and Support Early Intervention

Operational Guidance for childcare, schools, further and higher education has been produced by Welsh Government is being regularly updated.

### 4.1 Social Distancing (Prevention)

Social distancing is one of the key measures for prevention of transmission. Social distancing means keeping 2m apart from another person and reducing the number of people individuals have any contact with.

#### 4.1.1 Early Years, childcare and primary schools

In **early years and childcare** settings and in **primary schools** there is no requirement for **children** to socially distance. This is because the current evidence suggests that transmission within these groups is lower and the risk from the infection is also low. However, this does not mean that children under 11 are no longer subject to other restrictions on minimising contacts. Settings should however do all that they can to reduce mixing between classes or groups (section 4.2).

In **early years and childcare** settings and in **primary schools** social distancing must be observed between **staff** at all times.

In **early years and childcare** settings and in **primary schools** it is recognised that social distancing between staff and children may be more difficult, particularly in the foundation phase or childcare. To reduce the risk individual groups should have a designated teacher or teaching assistant or staff member. Members of staff should maintain a 2m distance from children wherever possible.

These measures if followed will mean that no other members of staff should need to self-isolate because of a positive test in another member of staff.

#### 4.1.2 Secondary Education and Beyond

The current scientific evidence suggests that there is a growing risk of transmission between individuals after primary school age towards adulthood. However, there is good evidence that the risk from the infection is low in these age groups.

In **secondary schools, further and higher education** social distancing should be practiced between **learners** wherever possible. The older the learners the greater the importance.

In **secondary schools, further and higher education** social distancing should always be practiced between **all staff**. If there are circumstances where this is not possible they need to be clearly identified as part of the risk assessment process together with: the reasons why; the mitigating measures that are being put in place; and, their intended impact.

In **secondary schools, further and higher education** social distancing should always be the aim between **staff and learners**. In exceptional circumstances where this is not possible e.g. when working with learners with additional learning needs, additional control measures should be taken, which are set out in the

<https://gov.wales/guidance-supporting-vulnerable-and-disadvantaged-learners>.

These measures will ensure that if a learner has a positive test we can reduce the number of other learners who need to self-isolate as a close contact.

These measures if followed will ensure that no other members of staff will need to self-isolate because of a positive test in another member of staff.

## 4.2 Reducing Mixing (Prevention & Reducing impact of early intervention)

In addition to keeping 2m metres away from another person, where possible, we can reduce the risk of transmission and the need to isolate as a close contact by reducing the number of individuals we have contact with, and therefore the chances of coming into contact with an infectious case. Reducing mixing will also limit the number of people who need to self-isolate in the event of a positive case.

In an educational or childcare setting this can be achieved by a range of measures such as the use of 'contact groups' or 'bubbles'. These should apply to all settings and all age groups.

#### 4.2.1 Contact Groups (level 1)

Contact groups can be effective in reducing the number of contacts and reduce mixing. In many settings these have been adopted in consistent groups in childcare settings, year groups in school or study groups or residential groups in further and higher education.

Contact groups are effective at reducing the likelihood of different learners meeting. They can be used to:

- Designate areas of the building for their exclusive use e.g. teaching rooms, toilets, outdoor areas for break, entrances to buildings
- Designate specialist areas for use at certain times by that group e.g. specialist teaching areas such as laboratories or technology rooms, dining halls
- Stagger arrival and departure times or break times
- Designate staff to work only with those groups

#### 4.2.2 Contact Groups (level 2)

If further attempts are not made to reduce mixing and a positive case is identified in the setting it can mean that the TTP team will need to ask a very large number of children or learners to self-isolate. **For this reason we would recommend a second level of grouping, particularly where the level 1 group is large e.g. a whole year group.**

In **childcare** settings, group numbers under level 1 may already be relatively small. However, for settings with larger group numbers or for out of school settings, this would be grouping children of the same age or from the same school.

In primary and secondary **schools** this is often a class or form group, particularly for learners up to and including year 8. Contact groups might also be identified for specific purposes such as those who travel on dedicated school transport. In **childcare and early years settings** this is likely to be based on age groups.

In order to minimise group size it may be acceptable for learners to be part of more than one contact group at this level (e.g. part of a transport group, and a class group). For older pupils studying defined subjects this can result in them being part of several groups however attempts should be made to limit mixing as much as possible. Where individuals from several groups do come together measures should be taken to reduce mixing between members of different groups.

In **further or higher education** this should be study groups and residential groups.

These groups should be encouraged not to mix with other groups as far as possible, for example by being given designated areas in the dining hall, common room areas, shared facilities in residential accommodation.

In schools, wherever possible supervision around shared areas such as school toilets and dining areas during break times can help promote social distancing and minimise mixing. Hand washing and hand sanitisers are particularly important in these areas.

In further and higher education it is important to encourage learners not to mix with others outside of their study group while in the setting, unless they socially distance. In addition, in university settings, students are not able to gather socially indoors with any individual outside their household or residential contact group. Universities must have measures in place to ensure students and staff comply with these measures.

It is recognised that learners may be part of more than one group for example, childcare and school or school and school transport, but this can still help the TTP teams to reduce the number of learners that need to self-isolate.

### 4.2.3 Contact Groups – Level 3

The TTP Teams have a strict definition of a close contact.

People will be considered as contacts if they have been in close contact with the individual who tested positive up to two days before they first displayed symptoms and for ten days after and:

- They have been within 1 metre of someone who has tested positive and has been coughed on, had a face-to-face conversation, had skin-to-skin physical contact, or been in other forms of contact within 1 metre for 1 minute or longer

OR

- They have been within 2 metres of someone who has tested positive for more than 15 minutes

OR

- They have travelled in a small vehicle with someone who has tested positive

OR

- Is someone in their household (people they live with) or who they share facilities with such as a bathroom or kitchen.

People working in professional roles who have correctly used personal protective equipment (PPE) or work behind an appropriate screen or partition (for example a Perspex screen) are not included within this. Face coverings are not classed as PPE and therefore wearing a face covering does not affect whether you are a close contact.

Individual assessment at this level will only be possible in older learners, further education or higher education settings (where learners are older and more able to reliably report who they have had contact with). However, assessment can inform decisions where multiple contact groups have come together.

In education and childcare settings this will mean that where carefully planned we can reduce the number of people who will be considered a close contact.

- **Movement around buildings.** The use of one way systems, encouraging flow e.g. discouraging chatting in a school when moving between rooms, will mean that individuals will not be in close contact and therefore will not need to isolate.
- **Designated seats.** Allocating each learner a designated seat in a classroom or seminar room will enable easy identification of those who are within 2 metres.
- **Working Groups.** Where it is appropriate and necessary for group work to take place, wherever possible standard groups should be used for each subject, this could be changed each term or semester to provide variety after a break.
- **Dedicated transport.** The same group of learners should use transport each day. Consideration should be given to allocating learners designated seats and grouping them by form group/setting on the vehicle to reduce mixing.
- Clear designation of shared facilities in traditional halls, facilities will be allocated to specific “contact” groups in order, in effect, to replicate the kind of “household” that exists in “flat” style accommodation. It should also be clearly communicated that facilities are

for the exclusive use of those allocated to them and that no other student should be using those facilities. Clear signage should make students aware of this.

All of these measures will mean that it may be possible to reduce the numbers required to isolate, rather than isolate the whole Level 1 group.

These assessments can only be made in collaboration between TTP teams and childcare settings, schools, further and higher education settings, but the ultimate decision of who is a contact and who needs to self-isolate, rests with the TTP teams.

## 5 Record Keeping

The contact tracing process will be easier for childcare and education settings and the TTP team if good records are kept and are readily accessible.

This will include:

- Which children and learners are in larger contact groups at level 1
- Which children and learners are in a form or study groups or residential groups at level 2
- Who sits where in each area in a classroom or on transport. This process could be aided by the taking of a time and date stamped photograph at the start of each session or when the transport arrives at the setting before the learners leave. Ideally this should be on a device provided by the setting and destroyed after two weeks.
- Asking students to use the NHS Covid App.
- Ensuring contact tracing details are recorded in other areas of the university such as cafes, student unions and sport facilities.

### 5.1 Information for TTP

Following confirmation of a positive case who has been in the setting during the infectious period, the TTP team will make contact. Please be aware that their first line of enquiry following a positive test result will be to talk to the case and/or parents /carers. It may take a little time for them to gather the appropriate information and escalate to the regional team for follow up with the setting. Childcare, school, further and higher education leaders may become aware of the positive case before the contact tracing process kicks in for example, via a parent /carer of a child who has tested positive.

In these circumstances you will find it helpful to have a clear plan for the initial response. For childcare settings, this is likely to include identifying the contact group of the positive case. Settings can also advise parents /carers that a positive case is suspected in their child's group and that further advice from TTP will follow on who should self-isolate.

For schools, further and higher education this is likely to be known as Stage 1, it may include initial self-isolation of the Level 1 contact group for a short period, this is most likely following a positive test for a child or learner. A positive test for a staff member should not result in the need for large numbers of staff and learners to self-isolate in secondary schools, further education or higher education. Planning for how this will be undertaken and establishing simple communication mechanisms e.g. via parent mail, social media, or staff communications may help reduce the workload.

After taking initial action you will need to gather information to share with the TTP team. This should include:

- The contact groups that the learner belongs to and their contact information
- Details of the measures that the setting has taken to limit mixing between contact groups and within larger (level 1) groups e.g. level 2 measures. This includes staff, children and learners.
- Where more detailed information is available around desk/seat allocation etc. (level 3 measures) this should also be available
- Information on cleaning regimes; support for handwashing; PPE where appropriate
- Information on additional measures or special circumstances e.g. learners with additional learning needs.

The TTP team will work with the setting on stage 2 to confirm the close contacts and inform any learners that can return to school /further or higher education after the stage 1 self isolation.

## 6 Support

All settings should have an agreed plan for responding to a case within their establishment.

This plan should detail the initial actions and assessments required along with communications to those affected. In terms of putting in place local arrangements, when developing this plan discussions may also need to take place with others. For example, schools will need to discuss with their local authority the arrangements to be put in place outside of school hours.

If additional support is required, schools and childcare settings should contact their local education authority in the first instance. Regional TTP Teams should ensure that Further Education and University settings know who to contact for advice.