



Public Health
England

Protecting and improving the nation's health

Managing COVID-19 in Shropshire schools

(COVID-19 Resource Pack for Schools)

Version 2

Updates:

- Updates reflect 10 day isolation period for symptomatic people and shielding pausing from 01-08-20
- Updates have been indicated by e.g. *(Update for V2)* or *(New insertion for V2)* alongside the relevant section
- Insertion of Section 6: Geographical community COVID-19 outbreak
- Insertion of Section 7: Additional steps to be taken by schools in case of partial or full closure

25 August 2020



Contents

Section 1: Introduction

- Context and background
- Contacts

Section 2: COVID-19 Key Messages

- Isolating and staying home
- COVID-19 FAQs

Section 3: Management of a suspected case

- What to do if a child or staff member is unable to attend school because they have COVID-19 symptoms
- What to do if someone falls ill while at school
- Communication
- Cleaning
- Waste
- Actions following Covid-19 test results

Section 4: Management of a confirmed case

- What to do if there is a confirmed case at the school
- Communication

Section 5: Arrangements for management of an possible outbreak

- Definition of an outbreak
- Actions to be taken by the school
- What the health protection team will do
- Communication

Section 6: Geographical community COVID-19 outbreak

- Understanding a geographical outbreak
- Possible outcomes
- Communication

Section 7: Additional steps to be taken by schools in case of partial or full closure

Section 8: Frequently Asked Questions

Section 9: National Guidance Documents

Appendix 1: Template for absence monitoring

Appendix 2: Template to record illness at the school

Resources: Posters and antibody testing information

Section 1 – Introduction

Dear Headteacher

A new term begins, and we know coronavirus still poses a threat to us all. We thank you for the ongoing hard work which has been taking place to help keep your school and community safe.

This COVID-19 resource pack has been updated to include latest Government guidance, and contains a variety of information including; what to do and what will happen in the event of a suspected/confirmed case or outbreak situation, Frequently Asked Questions, Key Messages and links to useful resources which will support health protection messages within your school. We hope you find it helpful.

We are here to help, so please do contact the Public Health Team by e-mail:

Shropshirepublichealth@shropshire.gov.uk or Telephone 01743 251234 (9am-5pm 7 days a week) with any related enquiries.

Karen Bradshaw
Interim Chief Executive, Shropshire Council

Rachel Robinson
Director of Public Health, Shropshire Council

Context and background

This document sets out the actions that schools and others should take where members of the school community have coronavirus (COVID-19) symptoms.

This document is informed by Government guidance including:

[DfE Guidance for full opening: schools](#)

[COVID-19: cleaning of non-healthcare settings outside the home](#)

This document should be read in conjunction with the Shropshire Outbreak Plan and its associated appendices. These can be found at

https://www.shropshire.gov.uk/local_outbreak_plan.

Contacts

General enquiries regarding Covid-19 cases should directed to:

e-mail: Shropshirepublichealth@shropshire.gov.uk
Telephone 01743 251234 (9am-5pm 7 days a week)

To notify suspected outbreaks Public Health England West Midlands Health Protection Team (please also contact the Shropshire Team above)

Telephone: 0344 225 3560 (opt 0, 2) Monday – Friday 0900 – 1700
Or online at <https://surveys.phe.org.uk/TakeSurvey.aspx?SurveyID=n4KL97m2I>

Out of Hours 01384 679031
Public Health England first on call via the Contact People
Or online at <https://surveys.phe.org.uk/TakeSurvey.aspx?SurveyID=n4KL97m2I>

Section 2 – Covid 19 Key messages

Isolating and staying home

Any member of the school community (pupils, staff and other adults) should stay at home not come into school if they:

- Have coronavirus (COVID-19) symptoms or if someone in their household has symptoms
- Have tested positive for coronavirus (COVID-19) in the last 10 days.
- Are in a household (or support bubble) with individuals who have been tested positive for coronavirus (COVID-19) in the last 14 days.
- Have been contacted through the NHS Test and Trace programme and been advised to stay at home.

The system of controls: protective measures *(New insertion for V2)*

This is the set of actions schools must take. They are grouped into 'prevention' and 'response to any infection' and are outlined in more detail in the [Actions for schools during the coronavirus pandemic guidance](#).

Prevention:

- 1) minimise contact with individuals who are unwell by ensuring that those who have coronavirus (COVID-19) symptoms, or who have someone in their household who does, do not attend school
- 2) clean hands thoroughly more often than usual
- 3) ensure good respiratory hygiene by promoting the 'catch it, bin it, kill it' approach
- 4) introduce enhanced cleaning, including cleaning frequently touched surfaces often, using standard products such as detergents and bleach
- 5) minimise contact between individuals and maintain social distancing wherever possible
- 6) where necessary, wear appropriate personal protective equipment (PPE)

Numbers 1 to 4 must be in place in all schools, all the time.

Number 5 must be properly considered and schools must put in place measures that suit their particular circumstances.

Number 6 applies in specific circumstances.

Response to any infection:

- 7) engage with the NHS Test and Trace process
- 8) manage confirmed cases of coronavirus (COVID-19) amongst the school community
- 9) contain any outbreak by following local health protection team advice

Numbers 7 to 9 must be followed in every case where they are relevant.

COVID-19 FAQs

What are the symptoms?

The main symptoms of COVID-19 are:

- **high temperature** – this means you feel hot to touch on your chest or back (you do not need to measure your temperature)

- **new, continuous cough** – this means coughing a lot for more than an hour, or 3 or more coughing episodes in 24 hours (if you usually have a cough, it may be worse than usual)
- **loss or change to your sense of smell or taste** – this means you've noticed you cannot smell or taste anything, or things smell or taste different to normal

Most people with coronavirus have at least one of these symptoms.

What is the mode of transmission? *(Update for V2)*

Transmission of coronavirus (COVID-19) mainly occurs through respiratory droplets generated during breathing, talking, coughing and sneezing. These droplets can directly infect the respiratory tracts of other people if there is close contact. They also infect others indirectly. This happens when the droplets get onto and contaminate surfaces, which are then touched and introduced into the mouth or eyes of an uninfected person. Another route of transmission is through aerosols (extremely small droplets), but this is only relevant to medical procedures for a very small number of children in education and social care settings.

What is the incubation period?

The incubation period (i.e. time between exposure to the virus and developing symptoms) is between 1 and 14 days (median 5 days).

When is a person infectious? *(Update for V2)*

A person is thought to be infectious 48 hours before symptoms appear, and up to **ten** days after they start displaying symptoms.

Are children at risk of infection?

Children of all ages can catch the infection but children make up a very small proportion of COVID-19 cases with about 1% of confirmed cases in England aged under 19 years. Children also have a much lower risk of developing symptoms or severe disease.

Can children pass on the infection?

There is some uncertainty about how much asymptomatic or mildly symptomatic children can transmit the disease but the evidence so far from a number of studies suggests children are less likely to pass it on and do not appear to play a major role in transmission. Most children with COVID-19 have caught the infection from adults and not the reverse. This is unlike 'flu.

Why is PPE not recommended for teachers and children? *(Update from guidance for V2)*

Actions for schools during the coronavirus outbreak guidance states:

The majority of staff in education settings will not require PPE beyond what they would normally need for their work. PPE is only needed in a very small number of cases, including:

- where an individual child or young person becomes ill with coronavirus (COVID-19) symptoms while at schools, and only then if a distance of 2 metres cannot be maintained
- where a child or young person already has routine intimate care needs that involves the use of PPE, in which case the same PPE should continue to be used

Read the guidance on [safe working in education, childcare and children's social care](#) for more information about preventing and controlling infection, including when, how PPE should be used, what type of PPE to use, and how to source it.

Face coverings

[Implementing protective measures in education and childcare settings](#) Government guidance states that wearing a face covering or face mask in schools or other education settings is not recommended.

Taking temperatures (*Update from guidance for V2*)

Public Health England is clear that routinely taking the temperature of pupils is not recommended as this is an unreliable method for identifying coronavirus (COVID-19).

Section 3 – Management of a suspected case

What to do if a child or staff member is unable to attend school because they have COVID-19 symptoms

Anyone who develops symptoms of COVID-19, or whose household member develops symptoms, should immediately self-isolate. They should not attend school and should follow the steps below.

- Parent/Carer or staff member should notify the school of their absence by phone
- School should record and keep minimum dataset (see suggested template in Appendix 1): Reason for absence, date of onset of symptoms, symptoms, class etc.
- Direct to [Stay at home](#) guidance for isolation advice for child/staff member and their households. The person with symptoms should isolate for 10 days starting from the first day of their symptoms and the rest of their household for 14 days.
- Advise the person reporting the absence to arrange for testing as soon as possible.
 - **Staff:** Self-referral via national portal at <https://www.gov.uk/get-coronavirus-test> Telephone 119 if internet access is available.
 - **Pupil (Child/young person):** Parent/carer applies on their behalf (permission is needed from the young person who is 13 or over) via national portal at <https://www.gov.uk/get-coronavirus-test> Telephone 119 if internet access is available)

These testing routes also apply to any staff member/ parent or household member who develops symptoms.

There is no further action required by the school at this time, and no need to notify the Local Authority or Health Protection Team. The school can contact the Public Health Team to ask for further advice if needed on: 01743 251234 9am-5pm 7 days a week.

What to do if someone falls ill while at school (*Update from guidance for V2*)

If anyone becomes unwell with a new continuous cough, a high temperature or a loss of or change in their normal sense of taste or smell they must be sent home as soon as possible

- If a child is awaiting collection, they should be moved, if possible, to a room where they can be isolated behind a closed door, depending on the age and needs of the child and with appropriate adult supervision if required. Ideally, a window should be opened for ventilation. If it is not possible to isolate them, move them to an area which is at least 2 metres away from other people.
- If they need to go to the bathroom while waiting to be collected, they should use a separate bathroom if possible. The bathroom must be cleaned and disinfected using standard cleaning products before being used by anyone else.
- PPE must be worn by staff caring for the child while they await collection if a distance of 2 metres cannot be maintained (such as for a very young child or a child with complex needs). More information on PPE use can be found in the [safe working in education, childcare and children's social care settings, including the use of personal protective equipment \(PPE\)](#) guidance.

The PPE that should be used in the following situations when caring for someone with symptoms of coronavirus (COVID-19) is:

- a face mask should be worn if a distance of 2 metres cannot be maintained
 - if contact is necessary, then gloves, an apron and a face mask should be worn
 - eye protection if a risk assessment determines that there is a risk of fluids entering the eye, for example, from coughing, spitting or vomiting
- As is usual practice, in an emergency, call 999 if someone is seriously ill or injured or their life is at risk. Anyone with coronavirus (COVID-19) symptoms should not visit the GP, pharmacy, urgent care centre or a hospital.
 - Any members of staff who have helped someone with symptoms and any pupils who have been in close contact with them do not need to go home to self-isolate unless they develop symptoms themselves (in which case, they should arrange a test) or if the symptomatic person subsequently tests positive (see below) or they have been requested to do so by NHS Test and Trace.
 - Everyone must wash their hands thoroughly for 20 seconds with soap and running water or use hand sanitiser after any contact with someone who is unwell. The area around the person with symptoms must be cleaned with normal household bleach after they have left to reduce the risk of passing the infection on to other people. See the [COVID-19: cleaning of non-healthcare settings guidance](#).
 - Direct parent/carer/staff member to '[stay at home: guidance for households with possible or confirmed coronavirus \(COVID-19\) infection](#)'. The person with symptoms should self-isolate for at least **10** days. Other members of their household (including any siblings) should self-isolate for 14 days from when the symptomatic person first had symptoms.
 - The school should inform the individual and their parent/guardian(for children and young people) that they must book a COVID-19 test immediately by phoning 119 or through the online portal (<https://www.gov.uk/get-coronavirus-test>), and that the individual must notify the school of the outcome of the tests immediately.

- The school should record and keep the details of the incident in case it is needed for future case or outbreak management (see suggested template Appendix 2)

N.B. Further details about the availability of postal testing kits in the school setting are being awaited, and will be communicated as soon as possible.

Communication (*New insertion V2*)

There is no necessity to communicate the suspected case with other parents at this point. If schools need guidance regarding communication then they should contact Shropshirepublichealth@shropshire.gov.uk or Telephone 01743 251234 (9am-5pm 7 days a week)

There is no need to notify the Local Authority or the Health Protection Team of the incident.

(*New insertion V2*)

Following on from the actions above:

- Where one person is showing symptoms, no immediate actions need to be taken to send home any other members of the school community at this stage. Immediate actions are required if the individual tests positive for COVID-19.
- Any members of staff who have helped someone with symptoms (whilst wearing PPE or have managed to maintain 2m social distancing whilst providing care) and any pupils who have been in close contact with them do not need to go home to self-isolate:
 - Unless they develop symptoms themselves (in which case, they should arrange a test)
 - **OR** if the symptomatic person subsequently tests positive (see below),
 - **OR** they have been requested to do so by NHS Test and Trace
OR if they weren't wearing PPE or manage to maintain 2m distancing whilst providing care

Cleaning and disinfection (*Updated guidance V2*)

Public Health England has published revised [guidance for cleaning non-healthcare settings](#) to advise on general cleaning required in addition to the existing advice on cleaning those settings when there is a suspected case.

Public areas where a symptomatic person has passed through and spent minimal time but which are not visibly contaminated with body fluids, such as corridors, can be cleaned thoroughly as normal.

All surfaces that the symptomatic person has come into contact with should be cleaned and disinfected, including all potentially contaminated and frequently touched areas such as bathrooms, door handles, telephones, grab rails in corridors and stairwells
 Use disposable cloths or paper roll and disposable mop heads, to clean all hard surfaces, floors, chairs, door handles and sanitary fittings – think one site, one wipe, in one direction.

Use one of the options below:

- a combined detergent disinfectant solution at a dilution of 1,000 parts per million available chlorine (ppm av.cl.)

or

- a household detergent followed by disinfection (1000 ppm av.cl.). Follow manufacturer's instructions for dilution, application and contact times for all detergents and disinfectants

or

- if an alternative disinfectant is used within the organisation ensure that it is effective against enveloped viruses

Avoid mixing cleaning products together as this can create toxic fumes. Avoid creating splashes and spray when cleaning.

Any cloths and mop heads used must be disposed of and should be put into waste bags as outlined below.

When items cannot be cleaned using detergents or laundered, for example, upholstered furniture and mattresses, steam cleaning should be used.

Waste (Updated guidance V2)

Personal waste from individuals with symptoms of COVID-19 and waste from cleaning of areas where they have been (including PPE, disposable cloths and used tissues):

1. Should be put in a plastic rubbish bag and tied when full
2. The plastic bag should then be placed in a second bin bag and tied
3. This should be put in a suitable and secure place and marked for storage until the individual's test results are known

This waste should be stored safely and kept away from children. It should not be placed in communal waste areas until negative test results are known, or the waste has been stored for at least 72 hours.

If the individual tests negative, this can be disposed of immediately with the normal waste. If COVID-19 is confirmed this waste should be stored for at least 72 hours before disposal with normal waste.

If during an emergency you need to remove the waste before 72 hours, it must be treated as Category B infectious waste. You must:

- keep it separate from your other waste
- arrange for collection by a specialist contractor as hazardous waste

There will be a charge for this service.

Other household waste can be disposed of as normal.

Actions following Covid-19 test results (New insertion V2)

If the COVID-19 test result is positive then school leaders should follow Section 4

If the COVID-19 test result is negative the individual concerned is allowed to return to school if they are well, including not having a temperature for 48 hours AND all in their household who have COVID-19 symptoms have also tested negative. (This is important as there remains some risk of false negatives). Their household can also stop isolating if those criteria are met. The only exception to this is if the individual tests negative and they are a contact of a confirmed case, in which case they need to continue to self-isolate for the full 14 days, as they are a contact of a confirmed case.

Management of suspected cases of COVID-19 (Insertion New flowchart V2)
 Anyone who attends the setting and has symptoms of coronavirus

Parent/carer or staff member notifies school of absence by telephone

School should record and keep minimum dataset. Reason for absence, date of onset of symptoms, symptoms, class etc. See suggested template in Appendix 1 of Schools Resource Pack.

Direct to stay at home guidance for isolation advice for child/staff member and their households. The person with symptoms should isolate for 10 days starting from the first day of their symptoms and the rest of their household for 14 days.

Advise the person reporting the absence to arrange for testing as soon as possible. (No later than 5 days)

Staff

Child

Self-referral via national portal at <https://www.gov.uk/get-coronavirus-test> Tel: 119 if no internet access

Parent/carer applies on their behalf (permission is needed from the young person who is 13 or over) via <https://www.gov.uk/get-coronavirus-test> Tel 119 if no internet access

Child or staff member becomes ill at school

Must be sent home as soon as possible

If a child is awaiting collection, they should be moved, if possible, to a room where they can be isolated behind a closed door, depending on the age and needs of the child and with appropriate adult supervision if required. Please read full guidance in the Schools Resource Pack.

Advise parent/carer or staff member to follow stay at home guidance, and apply for testing.

Schools should record and keep the details of the incident in case it is needed for future case or outbreak management (see suggested template Appendix 2)

No need to notify the Local Authority or the Health Protection Team of the incident

Symptoms - **high temperature** – feel hot to touch on chest or back (you do not need to measure your temperature) new, **continuous cough** – coughing a lot for more than an hour, or 3 or more coughing episodes in 24 hours (if you usually have a cough, it may be worse than usual) **loss or change to your sense of smell or taste** – noticed you cannot smell or taste anything, or things smell or taste different to normal. Most people with coronavirus have at least one of these symptoms.

Section 4: Management of a confirmed case

What to do if there is a confirmed case at the school

If a child/staff member who attends/works at a school tests positive for COVID-19, they will be informed by NHS Test and Trace.

Notification of the positive test will be sent to Public Health England, and the Local Authority's Public Health Team or the West Midlands Public Health England Health Protection Team will contact the school to discuss next steps.

In the meantime, please notify Shropshire Council Public Health Team of any staff or child who has been in the educational setting and tested positive for COVID-19. Email Shropshirepublichealth@shropshire.gov.uk or by telephone 01743 251234 9am-5pm 7 days a week

The headteacher or appropriate member of the leadership team at the school will be asked to work with the contact tracer to identify direct and close contacts of the case during the 48 hours prior to the child or staff member falling ill. This is likely to be the classmates and teacher of that class. The social distancing measures put in place by educational settings outside the classroom should reduce the number of other direct/close contacts.

- **Direct close contact** without PPE:
 - being coughed on, or
 - having a face-to-face conversation within 1 metre, or
 - having unprotected skin-to-skin physical contact, or
 - travel in a small vehicle with the case, or
 - any contact within 1 metre for 1 minute or longer without face-to-face contact
- **Proximity contact** without PPE:
 - Extended close contact (between 1 and 2 metres for more than 15 minutes) with a case

All direct and close contacts will be excluded from school and advised to self-isolate for 14 days starting from the day they were last in contact with the case. For example, if the case tests positive on Thursday and was last in school on the previous Monday the first day of the 14 day period is on the Monday. Household members of contacts do not need to self-isolate unless the contact develops symptoms. Please see the isolation poster in the resource section at the end of this document for a visual explanation.

The contact tracer will provide a standard letter to the school containing the advice for contacts and their families; the school will be asked to send the letter to the identified contacts.

Contacts will not be tested unless they develop symptoms (contract tracer may provide advice on this). If a contact should develop symptoms they should apply for a test by:

- **Staff:** Self-referral via national portal at <https://www.gov.uk/get-coronavirus-test>. Telephone 119 if internet access is available.

- **Pupil (Child/young person)** Parent/carer applies on their behalf (permission is needed from the young person who is 13 or over) via national portal at <https://www.gov.uk/get-coronavirus-test>. Telephone 119 if internet access is available.

These testing routes also apply to any staff member/ parent or household member who develops symptoms.

Communication

Schools should communicate with parents/carers and staff (e.g. by letter). Do not share the names or details of people with coronavirus (COVID-19) unless it is essential to protect others. If schools need guidance regarding communication then they should contact Shropshirepublichealth@shropshire.gov.uk or Telephone 01743 251234 (9am-5pm 7 days a week)

The school should record and keep the details of the incident in case it is needed for future case or outbreak management (see suggested template Appendix 2)

Management of confirmed COVID-19 cases in Schools and Education settings (Insertion – new flowchart for V3)

Child/staff member who attends/who works at the school tests positive for COVID-19

Person is informed by **NHS Test and Trace**
Notification of positive test sent to Public Health England

Local Authority's Public Health Team or the West Midlands Public Health England Health Protection Team contacts the school to discuss next steps

In the meantime, setting should notify Shropshire Council Public Health Team of any staff or child who has been in the school and tested positive for COVID-19. Email Shropshirepublichealth@shropshire.gov.uk or by telephone 01743 251234 9am-5pm 7 days a week

School Lead or appropriate member of the leadership team at the school will work with the contact tracer to identify direct and close contacts of the case during the 48 hours prior to the child or staff member falling ill. Please refer to section 4 in the Resource pack for schools for further detail.

All direct and close contacts will be excluded from the setting and advised to self-isolate for 14 days starting from the day they were last in contact with the case.

Contact tracer will provide a standard letter to the school containing the advice for contacts and their families; school will be asked to send the letter to the identified contacts.

Contacts will not be tested unless they develop symptoms (contract tracer may provide advice on this). If a contact should develop symptoms they should apply for a test by:

Staff

Self-referral via national portal at <https://www.gov.uk/get-coronavirus-test> Tel: 119 if no internet access

Child

Parent/carer applies on their behalf (permission is needed from the young person who is 13 or over) at <https://www.gov.uk/get-coronavirus-test> Tel: 119 if no internet access

Management of a confirmed outbreak

If there are more confirmed cases linked to the school the local Health Protection Team will investigate and will advise the school on any other actions that may be required.

If a setting has two or more confirmed cases, or there is a high reported absence which is suspected to be COVID-19 related, the Health Protection Team in Public Health England and Shropshire Council Public Health Team should be notified promptly:

Health Protection Team in Public Health England using the online reporting system available here:

<https://surveys.phe.org.uk/TakeSurvey.aspx?SurveyID=n4KL97m2I> and by telephone to 0344 225 3560 (option 0, then option 2) *Out of hours:* 01384 679031 Or online at <https://surveys.phe.org.uk/TakeSurvey.aspx?SurveyID=n4KL97m2I>

At the same time notify Shropshire Council Public Health Team via email Shropshirepublichealth@shropshire.gov.uk or by telephone 01743 251234 9am-5pm 7 days a week

Section 5: Arrangements for management of a possible outbreak

Definition of an outbreak

This scenario is defined there are two (or more) people with either COVID-19 symptoms and/or who are confirmed COVID-19 cases, and who have both been in the school (on the school site) within the last 14 days. These two people could be a combination of children and/or school staff. These two people could be part of the same group (bubbles) or separate groups (bubbles) across the school. This scenario is defined as an “outbreak”.

If there are more confirmed cases linked to the school the local Health Protection Team will investigate and will advise the school on any other actions that may be required.

Action to be taken by the school

If a school has two or more confirmed cases, or there is a high reported absence which is suspected to be COVID-19 related, the Health Protection Team in Public Health England and Shropshire Council Public Health Team should be notified promptly.

To notify suspected outbreaks Public Health England West Midlands Health Protection Team

Monday – Friday (0900 – 1700)

0344 225 3560 (opt 0, 2)

Or online at

<https://surveys.phe.org.uk/TakeSurvey.aspx?SurveyID=n4KL97m2I>

Out of Hours PHE Contact:

Public Health England first on call via the Contact People

01384 679031

Or online at

<https://surveys.phe.org.uk/TakeSurvey.aspx?SurveyID=n4KL97m2I>

Schools must also notify the Shropshire Council Public Health Team via email Shropshirepublichealth@shropshire.gov.uk or by telephone 01743 251234 9am-5pm 7 days a week

However, it is probable that some outbreaks will be identified by either the the Health Protection Team in Public Health England or Shropshire Council Public Health Team and the school/education setting will then be contacted by one of these teams.

What the Health Protection Team will do (*Insertion V2*)

- Work with the school and gather information from the school to inform a risk assessment. This may involve asking the school to complete a data return and include: the set-up of the school, total number of staff and students confirmed or symptomatic, vulnerability of student population, potential number of contacts and current social distancing and infection, prevention and control (IPC) measures.
- Discuss how the school are implementing social distancing and infection, prevention and control (IPC) measures, and provide advice as required (relevant guidance is [here](#) and [here](#)).
- Undertake a risk assessment to consider the severity and spread of outbreak, current control measures and the wider context (including communications from the school, anxiety level amongst students, staff and families, media interest etc.).
- Inform the local authority by e-mail and jointly consider the need for an Incident Management Team (IMT).
- Help (this may be the IMT) the school to identify contacts who need to isolate (any symptomatic contacts will be advised to access testing). In some cases, they may recommend that a larger number of other pupils self-isolate at home as a precautionary measure – sometimes a small number, but perhaps the whole site or year group.
- Provide schools with letters to be sent to contacts and non-contacts.
- Notify the Local Authority of any COVID-19 outbreaks in school.
- May advise widespread swabbing of staff and the student population, particularly in the early stages of Test and Trace. (However, it is important to note that primarily this would be to add to the overall understanding of COVID-19 transmission rather than to inform the management of individual outbreaks. Further actions may, however, be taken on the results).
- In consultation with the local Director of Public Health, where an outbreak in a school is confirmed, a mobile testing unit may be dispatched to test others who may have been in contact with the person who has tested positive. Testing will first focus on the person's class, followed by their year group, then the whole school if necessary, in line with routine public health outbreak control practice.

Communication (Update for V2)

It is important that Schools and Educational, and Early Years and Childcare representatives of these settings take advice before communicating with parents/staff or media during an outbreak. Any communications relating to an outbreak will be managed through liaison between PHE, the Local Authority and the Sustainability and Transformation Partnership (STP).

Schools must not publish any communication about a potential outbreak without prior consultation with the Shropshire Public Health team Shropshirepublichealth@shropshire.gov.uk or by telephone 01743 251234

Section 6: Geographical community COVID-19 outbreak (*New section V2*)

Understanding a geographical outbreak

The scenario would be where there are a high and increasing number of cases (i.e. the growth rate is increasing) within a defined geographical context and there are cases across more than one school. Note that thresholds for action will be defined through detailed public health risk assessment, as in any outbreak, and work with the national Joint Biosecurity Centre, who will be supporting local authorities to identify hotspots and monitor the impact of local interventions.

The incident management team (IMT) chaired by PHE, would require the support of local infection control and microbiology leads, school leaders, business leaders, local authority directors, working with the Joint Biosecurity Centre nationally and would follow routine outbreak management steps:

- Understand the data regarding hotspot areas and trends – analysis by time, place, person.
- Implement immediate control measures – e.g. community engagement regarding social distancing, supporting handwashing and cleaning measures, isolation of symptomatic individuals and their contacts.
- Monitor impact of control measures and evaluate hypotheses for spread.

Should routine control measures not be effective, the IMT would review the need for one or more closures (these decisions would be taken on a case by case basis with each school that has an outbreak. More widespread closure (which would be an intervention of last resort) may be necessary ultimately to contain spread.

Potential outcomes

Following the actions set out above, there could be the following outcomes (likely in combination with wider outcome for the local area)

- The LA to direct all maintained schools in the geographical community to close, based on Public Health guidance.
- The LA to advise all non-maintained schools to close in the geographical community to close, based on Public Health advice (should schools opt not to close – further enforcement action will be taken).
- School(s) could remain open if the thresholds for action were not considered, by Public Health, to be met.

Note: “closure” could mean a full school closure or a closure as for the first national lockdown (March 2020), where vulnerable children and children of key workers still had the opportunity to attend schools.

Communication

It is important that Schools and Educational, and Early Years and Childcare representatives of these settings take advice before communicating with parents/staff or media during an outbreak. Any communications relating to an outbreak will be managed through liaison between PHE, the Local Authority and the Sustainability and Transformation Partnership (STP).

Schools must not publish any communication about a potential outbreak without prior consultation with the Shropshire Public Health team Shropshirepublichealth@shropshire.gov.uk or by telephone 01743 251234

Section 7: Additional steps to be taken by schools in case of partial or full closure (New section V2)

Section 5 of '[Guidance for full opening: schools](#)' identifies the need for a contingency plan for temporary closures. This may involve a return to remaining open only for vulnerable children and the children of critical workers, and providing remote education for all other pupils.

The document states '*Where a class, group or small number of pupils need to self-isolate, or there is a local lockdown requiring pupils to remain at home, we expect schools to have the capacity to offer immediate remote education. Schools are expected to consider how to continue to improve the quality of their existing offer and have a strong contingency plan in place for remote education provision by the **end of September**. This planning will be particularly important to support a scenario in which the logistical challenges of remote provision are greatest, for example where large numbers of pupils are required to remain at home.*'

In developing the contingency plans, DfE expects schools to:

- use a curriculum sequence that allows access to high-quality online and offline resources and teaching videos, and that is linked to the school's curriculum expectations
- give access to high quality remote education resources
- select the online tools that will be consistently used across the school in order to allow interaction, assessment and feedback, and make sure staff are trained in their use
- provide printed resources, such as textbooks and workbooks, for pupils who do not have suitable online access
- recognise that younger pupils and some pupils with SEND may not be able to access remote education without adult support, and so schools should work with families to deliver a broad and ambitious curriculum.

When teaching pupils remotely, DfE expects schools to:

- set assignments so that pupils have meaningful and ambitious work each day in a number of different subjects
- teach a planned and well-sequenced curriculum so that knowledge and skills are built incrementally, with a good level of clarity about what is intended to be taught and practised in each subject
- provide frequent, clear explanations of new content, delivered by a teacher in the school or through high quality curriculum resources and/or videos
- gauge how well pupils are progressing through the curriculum, using questions and other suitable tasks and set a clear expectation on how regularly teachers will check work

- enable teachers to adjust the pace or difficulty of what is being taught in response to questions or assessments, including, where necessary, revising material or simplifying explanations to ensure pupils' understanding
- plan a programme that is of equivalent length to the core teaching pupils would receive in school, ideally including daily contact with teachers

Section 8: Frequently Asked Questions

Cases and contacts

Should a child/staff member come to school if a member of their household is unwell?

No. If a member of the child's household is unwell with COVID-19 symptoms then the child/staff member should isolate for 14 days starting from the day the household member(s) became ill. If the child subsequently develops symptoms then they should isolate for **10** days from the date they developed symptoms. See [Stay-at-home-guidance](#). The household member(s) should be tested within 5 days of symptom onset. If all symptomatic household members test negative, the child/staff member can return to work.

If I am notified by a parent that their child is ill do I need to exclude the other children in their class?

No, classmates and staff can attend school as normal. The child who is ill should stay at home ([Stay-at-home-guidance](#)) and be advised to get tested. If the child has any siblings who attend the school they should also be self-isolating at home for 14 days. If the child tests positive for COVID-19, direct and proximity contacts should be excluded for 14 days. The school will be contacted by contact tracers to support with contact identification and provision of advice.

If I am notified by a parent that their child has had a positive test do I need to exclude the other children in their class or notify anybody?

The school will be notified if a child has had a positive test, and will be contacted by contact tracers to support with contact identification and provision of advice. In the meantime ensure that the child is following the stay at home guidance, and please notify Shropshire Council Public Health Team. Email Shropshirepublichealth@shropshire.gov.uk or by telephone 01743 251234 9am-5pm 7 days a week

NHS Test and Trace process (*addition V2*)

Schools must ensure they understand the NHS Test and Trace process and how to contact their local [Public Health England health protection team](#). Schools must ensure that staff members and parents/carers understand that they will need to be ready and willing to:

- [book a test](#) if they or their child are displaying symptoms. Staff and pupils must not come into the school if they have symptoms, and must be sent home to self-isolate if they develop them in school. All children can be tested, including children under 5, but children aged 11 and under will need to be helped by their parents/carers if using a home testing kit
- provide details of anyone they or their child have been in close contact with if they were to test positive for coronavirus (COVID-19) or if asked by NHS Test and Trace
- [self-isolate](#) if they have been in close contact with someone who tests positive for coronavirus (COVID-19), or if anyone in their household develops symptoms of coronavirus (COVID-19)

Anyone who displays symptoms of coronavirus (COVID-19) can and should get a test. Tests can be booked online through the NHS [testing and tracing for coronavirus website](#), or ordered by telephone via NHS 119 for those without access to the internet. Essential workers, which includes anyone involved in education or childcare, have priority access to testing.

Who is considered a contact in a school setting?

A person who wore appropriate PPE or maintained appropriate social distancing (over 2 meters) would not be classed as a contact.

A contact is defined as a person who has had contact (see below) at any time from 48 hours before onset of symptoms (or test if asymptomatic) to **10** days after onset of symptoms (or test):

- a person who has had face-to-face contact (within one metre) with someone who has tested positive for coronavirus (COVID-19), including:
 - being coughed on, or
 - having a face-to-face conversation within one metre or
 - having skin-to-skin physical contact, or
 - any contact within one metre for one minute or longer without face-to-face contact
- a person who has been within 2 metres of someone who has tested positive for coronavirus (COVID-19) for more than 15 minutes
- a person who has travelled in a small vehicle *with* someone who has tested positive for coronavirus (COVID-19) or in a large vehicle *near* someone who has tested positive for coronavirus (COVID-19)
- people who spend significant time in the same household as a person who has tested positive for coronavirus (COVID-19)

Which contacts need to self-isolate?

Where the child, young person or staff member *tests positive* and they had attended the school in the 48 hours prior to developing symptoms, direct and proximity contacts will be identified and advised regarding self-isolation by a contact tracer.

Please note: The other household members of that wider class or group do not need to self-isolate unless the child, young person or staff member they live with in that group subsequently develops symptoms.

Can the siblings of a child who has been excluded because they are a contact of a case attend school?

Yes, other household members of the contact do not need to self-isolate unless the child, young person or staff member they live with in that group subsequently develops symptoms

A child/parent reports to us that they have had contact with someone with symptoms – what should we do? (update V2)

There is no action required of the school. A child/parent who has been in touch with someone who is unwell does not need to self isolate, unless the person is diagnosed as COVID positive. Anyone who has had close contact, as defined above, ('Who is considered a contact in a school setting?') with a positive case of COVID-19 must self isolate for 14 days and not be in the school.

No-one with symptoms should be attending school and anyone who develops symptoms while at school should be isolated and sent home as soon as possible.

Schools should regularly remind parents of the government guidance on staying at home and the importance of a household self-isolating if anyone in the household develops symptoms.

If a child has COVID-19 symptoms, gets tested and tests negative, can they return to school even if they still have symptoms?

If the child is NOT a known contact of a confirmed case the child can return to school if the result is negative, provided they feel well and they have not had a fever for 48 hours.

If the child is a contact of a confirmed case they must stay off school for the 14 day isolation period, even if they test negative. This is because they can develop the infection at any point upto day 14 (the incubation period for COVID-19), so if a child tests negative on day 3 they may still go on to develop the infection.

If a child who was a contact of a confirmed case tests negative, can they return to school?

No, the child should complete 14 days of isolation.

If I get confirmed cases does the school need to close?

The school does not need to close on public health grounds. Schools will generally only need to close if they have staff shortages due to illness or being identified as contacts. It is expected that only the class of a confirmed case will need to be excluded. If there are a number of confirmed cases across different classes and year groups at the same time then the school may be advised to close by the Health Protection Team in consultation with other partners.

Testing

Staff: Self-referral via national portal at <https://www.gov.uk/get-coronavirus-test> Tel:119 if no internet access

All pupils reporting absence: Parent/carer applies on their behalf (permission is needed from the young person who is 13 or over) by visiting <https://www.gov.uk/get-coronavirus-test> or by contacting 119 via telephone if they do not have internet access

These testing routes also apply to any staff member/ parent or household member who develops symptoms.

Can education staff be tested if they do not have symptoms? (New insertion V2)

Yes. This is called an antibody test. Please see the resource section in this pack for further information.

Will we be notified of any cases in the community?

Schools will only be notified of a case in the community if it has a direct close contact with those in the school. The contact will be made via Public Health England. Confidentiality of cases and data sharing will be in line with Public Health England protocols.

High risk groups (Whole section updated V2)

Clinically vulnerable staff

Clinically vulnerable staff can return to school in September. While in school they should follow the sector-specific measures in this document to minimise the risks of transmission.

This includes taking particular care to observe good hand and respiratory hygiene, minimising contact and maintaining social distancing in line with the provisions set out in section 5 of the 'Prevention' section of this guidance. This provides that ideally, adults should maintain 2 metre distance from others, and where this is not possible avoid close face to face contact and minimise time spent within 1 metre of others. While the risk of transmission between young children and adults is likely to be low, adults should continue to take care to socially distance from other adults including older children/adolescents.

People who live with those who are clinically extremely vulnerable or clinically vulnerable can attend the workplace.

Pregnant members of staff

Pregnant women are in the 'clinically vulnerable' category, and are generally advised to follow the above advice, which applies to all staff in schools. Employers should conduct a risk assessment for pregnant women in line with the Management of Health and Safety at Work Regulations 1999 (MHSW).

The Royal College of Obstetrics and Gynaecology (RCOG) has published [occupational health advice for employers and pregnant women](#). This document includes advice for women from 28 weeks gestation or with underlying health conditions who may be at greater risk. We advise employers and pregnant women to follow this advice and to continue to monitor for future updates to it.

Clinically extremely vulnerable staff

Rates of community transmission of coronavirus (COVID-19) are now reduced to levels below those seen when shielding was introduced. Shielding measures will therefore be paused from the 1 August 2020, with the exception of areas where local lockdown means that shielding will continue. Therefore, we advise that those who are clinically extremely vulnerable can return to school in September 2020 provided their school has implemented the system of controls outlined in this document, in line with the school's own workplace risk assessment. In all respects, the clinically extremely vulnerable should now follow the same guidance as the clinically vulnerable population, taking particular care to practise frequent, thorough hand washing, and cleaning of frequently touched areas in their home and/or workspace.

People who live with those who are clinically extremely vulnerable or clinically vulnerable can attend the workplace.

Staff who may otherwise be at increased risk from coronavirus (COVID-19)

Some people with particular characteristics may be at comparatively increased risk from coronavirus (COVID-19), as set out in the [COVID-19: review of disparities in risks and outcomes report](#), which looked at different factors including age and sex, where people live, deprivation, ethnicity, people's occupation and care home residence. These staff can return to school in September as long as the system of controls set out in this guidance are in place. The reasons for the disparities are complex and there is ongoing research to understand and translate these findings for individuals in the future.

People who live with those who have comparatively increased risk from coronavirus (COVID-19) can attend the workplace.

If transmission of COVID-19 increases

There may be advice to shield again if the situation changes and there is an increase in the transmission of COVID-19 in the community.

In the event of a local lockdown, see [the following information](#) and visit your [local authority's website](#) for further guidance.

If you're clinically extremely vulnerable, you are advised not to enter any area where shielding advice is in place.

Annual flu programme

When eligible we encourage all adults and children to have a flu vaccine. As part of the 2020 to 2021 flu vaccination programme, all other members of households of those who are identified as clinically extremely vulnerable at the time of the flu programme delivery are eligible for free flu vaccinations.

Most people who are clinically extremely vulnerable will already be eligible for a free flu vaccination.

Read [further information about the annual flu programme](#).

Should children or staff who were shielding (classed as due to pre-existing medical conditions) attend school?

[Shielding advice](#) for all adults and children was paused on August 1st. This means that even the small number of pupils who will remain on the shielded patient list can also return to school, as can those who have family members who are shielding. Read the [current advice on shielding](#)

Clinically extremely vulnerable children should attend education settings in line with the wider [guidance on reopening of schools](#) and [guidance for full opening: special schools and other specialist settings](#)

Some pupils no longer required to shield but who generally remain under the care of a specialist health professional may need to discuss their care with their health professional before returning to school (usually at their next planned clinical appointment). You can find more advice from the Royal College of Paediatrics and Child Health at [COVID-19 - 'shielding' guidance for children and young people](#)

Where a pupil is unable to attend school because they are complying with clinical and/or public health advice, we expect schools to be able to immediately offer them access to remote education. Schools should monitor engagement with this activity (as set out in the section below).

Where children are not able to attend school as parents are following clinical and/or public health advice, absence will not be penalised.

Staff (Updated section V2)

We have had a child confirmed as a case and had contact with other staff, including catering staff at lunch, do they need to be excluded?

It depends on the level of contact. staff would need to be excluded only if they had face to face contact with a case for any length of time, including being coughed on or talked to. This includes exposure within 1 metre for 1 minute or longer OR the staff member had extended close contact (within 2 metres for more than 15 minutes) with the case.

Can the school still have supply teachers come in if there has been multiple cases?

Local risk assessment should be undertaken and staff excluded if in direct contact with a symptomatic case according to the national guidance.

If a supply teacher has not been identified as a close contact in any of their workplaces then exclusion will not be necessary and they should be able to work.

(Insertion V2) Implementation of the system of controls: protective measures in the 'key messages' section of this document will also aid a preventative approach.

Can non-teaching staff, for example cleaners and caterers, work for 2 or more schools?

Local risk assessment should be undertaken and staff excluded if in direct contact with a symptomatic case according to the national guidance.

If a staff member has not been identified as a close contact in any of their workplaces then exclusion will not be necessary.

Why are staff and children not advised to wear PPE?

Most staff in education, childcare and children's social care settings will not require PPE beyond what they would normally need for their work, even if they are not always able to maintain a distance of 2 metres from others.

PPE is only needed in a very small number of cases if:

- an individual child, young person or other learner becomes ill with coronavirus (COVID-19) symptoms and only then if a distance of 2 metres cannot be maintained
- a child, young person or learner already has routine intimate care needs that involve the use of PPE, in which case the same PPE should continue to be used

Effective protection and control includes:

1. Minimising contact with individuals who are unwell by ensuring that those who have coronavirus (COVID-19) symptoms, or who have someone in their household who does, do not attend childcare settings, schools or colleges
2. Cleaning hands more often than usual - wash hands thoroughly for 20 seconds with running water and soap and dry them thoroughly or use alcohol hand rub or sanitiser ensuring that all parts of the hands are covered
3. Ensuring good respiratory hygiene by promoting the 'catch it, bin it, kill it' approach
4. Introduce enhanced cleaning, including cleaning frequently touched surfaces often using standard products, such as detergents and bleach
5. Minimise contact between individuals and maintain distancing wherever possible - as much as possible, alter the environment of your setting (such as classroom layout) and your timetables (such as staggered break time) to minimise contact and mixing
6. Where necessary, wear PPE – see above
7. Engage with the NHS test and trace process and respond rapidly to confirmed cases

School Visitors and Contractors (*Addition V2*)

Schools should consider how to manage other visitors to the site, such as contractors, and ensure that the risks associated with managing contractors, visitors, catering staff and deliveries, as well as cleaning staff on site who may be working throughout the school and across different groups, are addressed. This will require close cooperation between both schools and the other relevant employers.

Schools should have discussions with key contractors about the school's control measures and ways of working as part of planning for the autumn term. Schools should ensure site guidance on physical distancing and hygiene is explained to visitors on or before arrival. Where visits can happen outside of school hours, they should. A record should be kept of all visitors.

Cleaning (*Updated section V2*)

What additional cleaning is necessary following a symptomatic or confirmed case?

Please refer to section 3 of this document, and Government revised [guidance for cleaning non-healthcare settings](#) to advise on general cleaning required in addition to the existing advice on cleaning those settings when there is a suspected case.

Section 9: National Guidance Documents

(Updated links added V2)

This local guidance document has been based on national PHE, NHS and government guidance. Hyperlinks to key national guidance are displayed here for reference (click the links)

Social distancing for different groups

- [Stay at home: guidance for households with possible coronavirus \(COVID-19\) infection](#)
- [Staying alert and safe \(social distancing\)](#)
- [Guidance on shielding and protecting people who are clinically extremely vulnerable from COVID-19](#)

Guidance for contacts

- [Guidance for contacts of people with confirmed coronavirus \(COVID-19\) infection who do not live with the person](#)

Specific guidance for educational settings

- [Guidance for schools and other educational settings](#)
- [What parents and carers need to know about early years providers, schools and colleges in the autumn term](#)
- [COVID-19: implementing protective measures in education and childcare settings](#)
- [Safe working in education, childcare and childrens social care settings including the use of PPE](#)
- [Guidance on isolation for residential educational settings](#)
- [Protective measures for out of school settings during covid-19](#)

Testing

- [NHS: Testing for coronavirus](#)

Infection prevention and control

- [Safe working in education, childcare and childrens social care settings including the use of PPE](#)
- Video clip: <https://www.nhs.uk/live-well/healthy-body/best-way-to-wash-your-hands/>
- Poster: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/886217/Best_practice_hand_wash.pdf

- Catch it. Bin it. Kill it. Poster

- **Additional posters and translated posters**

A range of additional posters and posters in Polish, Romanian, Bulgarian, Simplified Chinese, Punjabi, Portuguese, Lithuanian, Czech and Arabic can be found on the following page:

<https://www.shropshire.gov.uk/coronavirus/resources-and-grant-funding-opportunities-for-local-communities/posters-for-use-in-local-communities/>

- **Coronavirus Resource Centre posters available here.**

APPENDIX 1 – Template to record school absences

In the event of a COVID-19 outbreak, the table will ensure that important information is recorded in one place and is easily accessible

Date	Name	Class	Reason for absence*	Date of onset of symptoms	Symptoms**	Has the child/staff been assessed by GP, NHS 111 etc? Y/N/NK	Has the child/staff been tested? Y/N/NK	Is the child/staff reporting a positive test result? Y/N/NK	Is the child/staff in hospital? Y/N/NK

Reason for absence*: Ill, Household member ill, Contact of a confirmed/suspected case, Shielding, Other e.g. dental appointments

Symptoms * T = Temp (≥ 37.8 C), C = Cough, D = Diarrhoea, V = Vomiting, ST = Sore Throat, H = Headache, N = Nausea, LST = Loss of smell/taste, Other

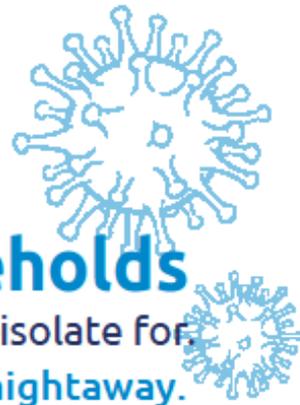
APPENDIX 2 – Template to record illness at school *Updated V2*

In the event of a COVID-19 outbreak, the table will ensure that important information is recorded in one place and is easily accessible

Date	Name	Class	Date/Time of onset of symptoms and location e.g. canteen	Symptoms*	Time between detection of symptoms and isolation at school	Did staff member wear PPE?** Y/N

Symptoms * T = Temp (≥ 37.8 C), C = Cough, D = Diarrhoea, V = Vomiting, ST = Sore Throat, H = Headache, N = Nausea, LST = Loss of smell/taste, Other

**** Only required if social distancing could not be observed**



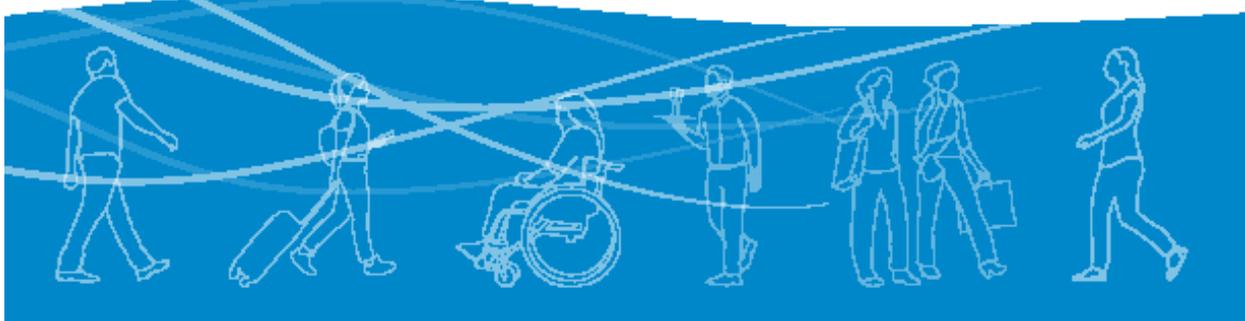
Self-isolation for households

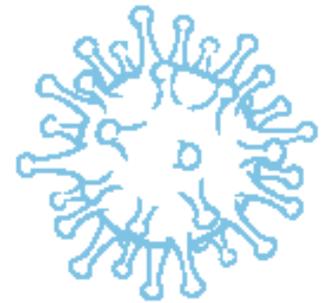
The guide below explains how long to self-isolate for. If you have **symptoms**, apply for a **test straightaway**. Call 119 for free or go to www.nhs.uk/coronavirus



Day	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23			
Kim	✘ Symptoms begin. Must self-isolate for 10 days and not leave her home . If well, Kim can go out on day 11										✔															
Jac	Begins 14 day Self-isolation		✘ Symptoms begin on day 4 of self-isolation. Must self-isolate for 10 more days and not leave her home . If well, Jac can go out on day 14										✔													
Mo	Begins 14 day Self-isolation										✘ Symptoms begin on day 12 of self-isolation. Must now self-isolate for 10 more days and not leave his home . If well, Mo can go out on day 22										✔					
Jen	Begins 14 days self-isolation. If well, Jen can go out on day 15													✔												

Everyone finds self-isolation a struggle, but it is essential to help protect your families, friends and community from coronavirus, and slow the spread.





Know the symptoms.



Stay at home and get a test if you have:



High temperature



New Continuous cough



A change or loss of taste

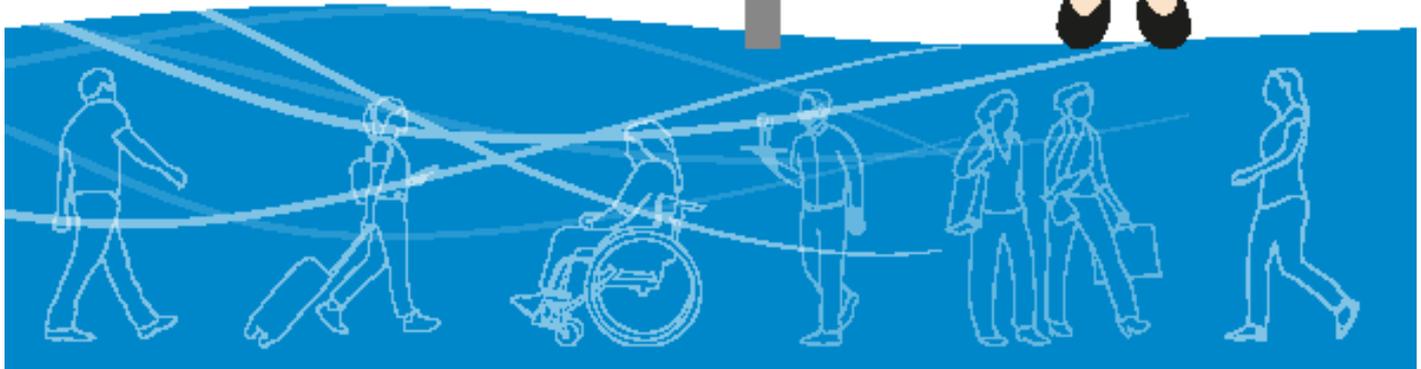


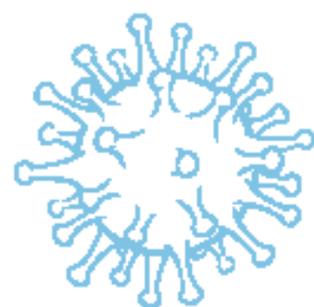
A change or loss of smell



For more information
www.nhs.uk/coronavirus

Adapted with kind permission from the Welsh Government and Public Health Wales.





What is contact tracing?

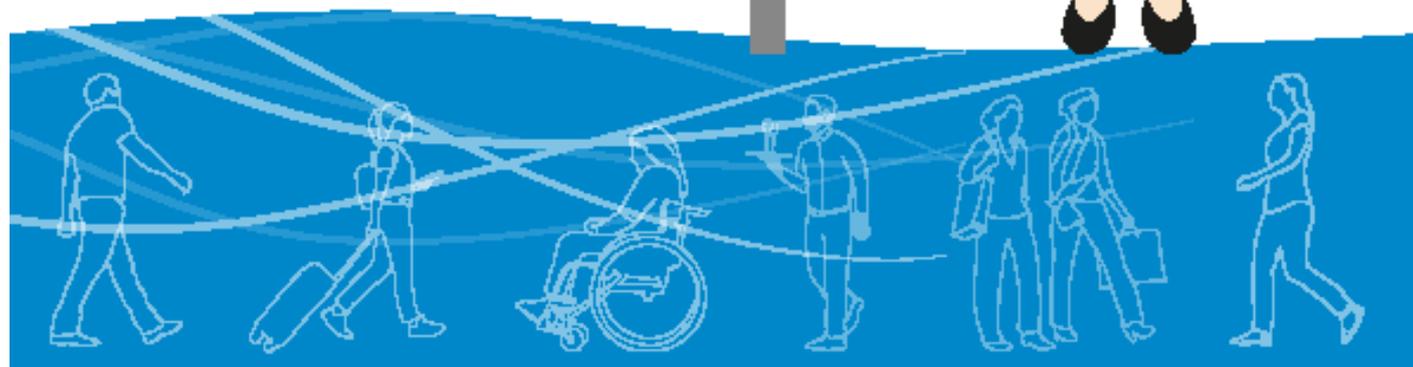


- Contact tracing helps protect our communities, our friends and our family.
- It helps us understand how the virus is passed from person to person.
- Contact tracing is not about enforcement or surveillance.
- You will **never** be reported to police or immigration services.
- Together we can contain the spread of coronavirus.



For more information
www.nhs.uk/coronavirus

Adapted with kind permission from the
Welsh Government and Public Health Wales.



Additional posters and translated posters

A range of additional posters and posters in Polish, Romanian, Bulgarian, Simplified Chinese, Punjabi, Portuguese, Lithuanian, Czech and Arabic can be found on the following page:

<https://www.shropshire.gov.uk/coronavirus/resources-and-grant-funding-opportunities-for-local-communities/posters-for-use-in-local-communities/>

Information sheet: Antibody testing

Antibody testing is now being rolled out to all staff working for Shropshire Council. This means those that want to can now choose to have a blood test that will show whether or not they have previously had the COVID-19 infection.

If you get a positive antibody test result, it means you have had the virus and had an immune response. **However, there is no evidence yet to say that if you have already had the virus you are immune. You still need to follow** the same **social distancing advice** as everyone else.

This includes:

- Staying 2 metres away from other people
- Washing your hands often
- Wearing a face covering in places where it is required or it's hard to stay away from other people

Please see the infographic at the end of this document, which describes the difference between the two types of tests, what the results mean, and when and how to access them.

National guidelines are being followed and testing is voluntary - you do not have to take part if you don't want to, and will not be expected to disclose your result to anyone, including your line manager or the SLT. If you would like to have the antibody test, please book an appointment as soon as possible whilst there is capacity within the system.

To book:

- Contact the booking line on 01743 497015.
- The line is open for individual bookings between 9am and 4pm, Monday to Friday. If it is busy you will be asked to call back.
- When booking, you will need to give your place of work, registered GP, contact telephone number and the email address you would like your result to be sent to.
- Tests are available, Monday to Friday, 9am to 4pm, at either The Princess Royal Hospital (Mallings Buildings) or The Royal Shrewsbury Hospital (Elizabeth House).
- As the antibody test is carried out by taking a blood sample, you will be required to sign a consent form. This will be given to you when you arrive for your test.
- If you have not received your results within 72 hours of your test, please contact the booking line so we can help you.

FAQ's

What is an antibody test?

An antibody test checks for antibodies in your blood. Your body makes antibodies when you get an infection. They help fight the infection.

If you have coronavirus antibodies in your blood, it's likely you've had the virus before. It's not known if having antibodies stops you getting the virus again.

How does an antibody test work?

A trained person will take a sample of your blood and it will be tested to look for one or both kinds of antibodies to SARS-CoV-2, the virus that causes COVID-19. These are:

- IgM antibodies, which happen early in an infection
- IgG antibodies, which are more likely to show up later

Most people have IgG antibodies about 14 days after their symptoms start. They usually stay in your blood long after the infection goes away, but we don't know how long that is for the new coronavirus.

Why do we need antibody testing?

The antibody testing programme will provide information on the prevalence of COVID-19 in different regions of the country and help better understand how the disease spreads. You could have had COVID-19 and not know it. Not everyone who gets it has symptoms.

Our understanding of the virus will grow as new scientific evidence and studies emerge. COVID-19 is a new disease, and our understanding of the body's immune response to it is limited. We do not know, for example; how long an antibody response lasts, whether the antibodies produced are effective in neutralising the virus, or whether having antibodies means a person cannot transmit the virus to others.

In time, as the science develops and our understanding of the disease increases, we will have answers to these questions.

Am I expected to take the test, and will my manager need to be informed of the result?

No, the test is entirely voluntary – you do not have to take part if you don't want to and the result belongs to you. You are not expected to share your result with anyone. Your result will be made anonymous, so that there is no link between your test and personal information like your name. Results gathered from across the country will help inform scientists about the spread of the disease.

What does it mean if you get a positive antibody test result?

If you get a positive antibody test result, it means you have had the virus and had an immune response. **However, there is no evidence yet to say that if you have already had the virus you are immune.**

You still need to follow the same **social distancing advice** as everyone else. This includes:

- Staying 2 metres away from other people
- Washing your hands often
- Wearing a face covering in places where it is required or it's hard to stay away from other people
- Wearing the right PPE at the right time when at work: **PPE guide for community health and social care settings**

What is the difference between a coronavirus test and antibody test?

The PCR / Swab test looks for signs of active virus. It's simpler and faster than an antibody test. But it only tells you if you have the virus in your body at the moment when you are tested.

The Antibody test is to see if you have been previously infected with the virus and have an immune response.

YOUR GUIDE TO COVID TESTING



AN OVERVIEW



THE PCR/SWAB TEST

Tests for the presence of virus in your body. You may be asked to do this test to confirm if you **currently** have COVID-19

To maximise accuracy of the test, you should ideally be tested within **1-3 days and up to a maximum of 5 days** after you have symptoms

Tests will be carried out using:

Nose swabs



Throat swabs



POSITIVE

Confirms you currently have the virus and must **self-isolate** or seek medical assistance if unwell

Does not tell you

How ill you might become or when you got the virus



NEGATIVE

If you are still experiencing symptoms you may be asked to be re-tested 2-3 days later and continue to be isolated.

If it has been more than 28 days since your symptoms started, you might consider having an antibody test.

PROCESS

We are following the national criteria to help identify staff or household members eligible for testing as follows:

- 1) The staff member has Covid-19 symptoms **OR**
- 2) The staff member is self-isolating due to an adult or child household member(s) having symptoms. In this instance it is the household member(s) displaying the most acute symptoms of Covid-19 who should be tested, rather than the staff member themselves.

CONTACT

Staff can register for a test through the Self-Referral and Employer Portals on [gov.uk](https://www.gov.uk)



THE ANTIBODY TEST

Test to see if you have been **previously** infected with the virus and have an immune response

This test works best at least **28 days** following your first symptoms

Tests will be carried out using:

A blood sample



POSITIVE

You have had the virus and had an immune response

Does not tell you

If you are protected from becoming ill again if exposed to COVID-19, or how long protection may last for or if you can infect others

You must still follow social distancing advice



NEGATIVE

It is likely you have not had COVID-19.

However, there is still a chance that you have had COVID-19, but the test has not detected an antibody response.

PROCESS

We are following the national guidelines.

All staff **who want to be tested will be tested**.

We are rolling antibody testing out in a phased way.

Each week we contact a different group to open up the antibody testing to more people.

CONTACT

If you wish to have an antibody test you should inform your line manager so that they can let you know when the offer becomes available to your employer.

