



COVID-19 Outbreak Management Plan

St Mary's Covid 19 Outbreak management plan

Outbreak Plan Management Version No: 1

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Review Date: Ongoing

Plan Owner: Mrs Charlotte Miller

Related Resources

- St. Mary's Henley COVID 19 Risk Assessment:
- COVID-19 operational guidance explains the continuing actions school leaders should take to reduce the risk of transmission of coronavirus (COVID-19) in their school
<https://www.gov.uk/government/publications/actions-for-schools-during-the-coronavirus-outbreak/schools-covid-19-operational-guidance>
- The DfE contingency framework describes the principles of managing local outbreaks of COVID-19 (including responding to variants of concern) in education and childcare settings
<https://www.gov.uk/government/publications/coronavirus-covid-19-local-restrictions-in-education-and-childcare-settings/contingency-framework-education-and-childcare-settings>
- <https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance>
- <https://www.gov.uk/government/publications/guidance-for-contacts-of-people-with-possible-or-confirmed-coronavirus-covid-19-infection-who-do-not-live-with-the-person/guidance-for-contacts-of-people-with-possible-or-confirmed-coronavirus-covid-19-infection-who-do-not-live-with-the-person>
- The national technical definitions for clusters and outbreaks can be found here:
<https://www.gov.uk/government/publications/covid-19-epidemiological-definitions-of-outbreaks-and-clusters>
- The definition of infectious periods and of close contact can be found here
<https://www.gov.uk/government/publications/guidance-for-contacts-of-people-with-possible-or-confirmed-coronavirus-covid-19-infection-who-do-not-live-with-the-person/guidance-for-contacts-of-people-with-possible-or-confirmed-coronavirus-covid-19-infection-who-do-not-live-with-the-person>

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Introduction

This plan outlines how we will manage single cases and clusters of COVID-19, as well as how we would operate if we are required to reintroduce measures/mitigations in our setting or area to prevent transmission of COVID-19 in the context of an outbreak. This includes how we would ensure every pupil receives the quantity and quality of education and care to which they are normally entitled. Outbreak prevention is partly within scope of this plan but should be mostly covered by the schools' COVID-19 Risk Assessment.

A local outbreak is defined as two or more linked cases within a 14-day period:

<https://www.gov.uk/government/publications/covid-19-epidemiological-definitions-of-outbreaks-and-clusters>

Outbreaks can differ significantly with regard to scale and significance from two linked cases in a class, to multiple cases across multiple year groups, to outbreaks linked with new variants of concern. Whilst the measures used to manage outbreaks will be the same, the number of measures and extent of measures taken, alongside the degree to which they become necessary requirements will vary.

Triggers for outbreak management plan

School raises concern about 2+ linked cases

5+ pupil cases within a year group within 5 days

10+ pupil cases across a school across a number of year groups within 5 days

5+ staffing cases, or fewer if impacting on the capacity of the school to operate

In the case of a local outbreak, we will work with the Local Authority, Public Health and regional Health Protection Teams (HPTs). Below sets out all the possible measures/mitigations that will be considered in the case of a local outbreak. The actual measures implemented will be determined jointly and based on the specific situation. They will also balance carefully the impact on the delivery of education with the need to minimise transmission.

Any measures will only ever be considered for the shortest time possible, to allow the outbreak to be managed and minimise transmission of COVID-19. In all cases measures/mitigations will only be implemented to prevent larger scale school closure.

Governance Arrangements

Key Contact Details

Agency/Individual(s)	Contact details
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Local Authority	education-corona@warwickshire.gov.uk (Mon – Fri) dphadmin@warwickshire.gov.uk (Sat – Sun)
Public Health England (PHE) Health Protection Teams (NB PHE will become part of UK Health Security Agency (UKHSA) in October 2021).	wm.2019cov@phe.gov.uk Tel: 0344 225 3560 Option 0 Option 2
Setting Response Lead/Decision maker	Mrs. C.Miller (HT): cmiller@smh.magnificat.org.uk Mrs. A.Wilson (AHT): awilson@smh.magnificat.org.uk <i>(In the absence of the HT)</i>
Committees/Trusts supporting the response	Mrs A WILSON (AHT): awilson@smh.magnificat.org.uk Mr J.Burke (CoG): jburke@smh.magnificat.org.uk Mr. T. Leverage (CSEL): tlevverage@magnificat.org.uk
Outbreak response team (internal and for attending external Incident Management Team meetings (IMTs)	Mrs. C.Miller (HT): cmiller@smh.magnificat.org.uk Mrs. A.Wilson (AHT): awilson@smh.magnificat.org.uk <i>(In the absence of the HT)</i>

Key Stakeholders

Stakeholders	Role(s) in Outbreak Management
Staff (including employees and volunteers)	<ul style="list-style-type: none"> All staff to be informed – continue with regular LFT testing All volunteers, external providers to be informed if they have been in the setting and/or been a close contact of infected person(s).
Pupils	<ul style="list-style-type: none"> Only pupils that have been in close contact of infected person(s) to recommend to get a PCR test. All pupils to be reminded of mitigation requirements.
Parents/carers	<ul style="list-style-type: none"> Parents/carers of pupils who are close contact of infected person(s), will be informed via a set letter, recommending that their child gets a PCR test. All parents/carers informed that there is a case(s) of COVID 19 in the setting and to be vigilant for any symptoms and advise regular LFT tests.
Visitors	All visitors to be informed if they have been in the setting and/or been a close contact of infected person(s), within the timeframe.

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Contractors and delivery personnel	To be informed if they have been in the setting and/or been a close contact of infected person(s), within the timeframe.
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Communications

Communications activities will be coordinated by the setting with support from LA local outbreak control team and regional Health Protection Teams in close liaison with the setting outbreak management coordination team.

Key Stakeholder	What they need to know	Communication media
Staff (including employees and volunteers)	<ul style="list-style-type: none"> • Staff will be informed of the positive case(s) within the school setting. • All staff will be encouraged to continue with 2xweekly LFT tests. • Only staff who is likely to have come into contact with the infected person(s) will be informed to get a PCR test. 	<ul style="list-style-type: none"> • Office manager will coordinate general communication to all staff – via email. • SLT will contact individually staff who are close contacts of infected person(s) – via letter, email, telephone conversation.
Children	<ul style="list-style-type: none"> • If in school, pupils who are close contacts of infected person(s) will be spoken to by their class teacher about what will be the next steps. Infected people will not be named. • If pupils, are at home, their parents will inform them. 	Verbally by their class teacher and/or parent/carer.
Parents/carers	All parents/carers will be informed if there is a positive COVID 19 case in school.	School office, via set letter.
Visitors	All visitors will be informed if there is a positive COVID 19 case in school; if deemed appropriate.	School office, via email.
Contractors and delivery personnel	All contractors/delivery personnel will be informed if	School office, via email.

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	there is a positive COVID 19 case in school; if deemed appropriate.	
Local Outbreak Teams (LA and regional Health Protection Teams)	The settings, plan of action and kept up to date with changes – if the school has met the threshold triggers set out in the plan.	HT – via email/telephone
GPs/allied health practitioners providing services to people within the setting	The settings, plan of action and kept up to date with changes – if the school has met the threshold triggers set out in the plan.	HT – via email/telephone

Preventing transmission within the setting

Our refreshed risk assessments include how vaccination and good hand hygiene will be promoted among staff, and pupils and parents, how cleaning and good ventilation will be maintained, and how the school will operate from a distancing perspective.

Information about drop-in clinics across Coventry and Warwickshire and all vaccinations sites that you can book into can found in the links below:

<https://www.happyhealthylives.uk/coronavirus/covid-19-vaccination/vaccination-drop-in-clinics/>

<https://www.happyhealthylives.uk/coronavirus/covid-19-vaccination/vaccination-sites/>

Children and staff who are unwell will be advised that they should not attend school/setting. Any child or staff member with one or more of the COVID-19 symptoms (new continuous cough, high temperature, loss/change in taste/smell), irrespective of how mild, will be asked to isolate with their household and book a PCR test: <https://www.gov.uk/get-coronavirus-test>

We are aware of the range of less common symptoms of COVID-19: headache, sore throat, fatigue, muscle aches, blocked/runny nose, diarrhoea and vomiting, and will take this into consideration in an outbreak scenario, and when we are seeing a larger number of COVID-19 cases.

We will ensure that we remain informed about the latest travel and quarantine advice:

<https://www.gov.uk/government/publications/actions-for-schools-during-the-coronavirus-outbreak/schools-covid-19-operational-guidance#travel>

Our updated risk assessment can be found here (embed):

Reporting cases and when trigger thresholds have been met

We will continue to report all positive cases to the local authority alongside alerting the local authority when any of the triggers outlined in the above guidance have been met

Response to positive cases

Full class groups (note that interrogation of seating plans will not be required), and lunch time, break time and afterschool contacts (including on transport) will be asked to have a PCR test, alongside twice weekly LFT testing for all contacts. Staff contacts who have not had both vaccinations more than 14 clear days before the day of contact with the positive case will also be identified, as they will need to isolate for 10 clear days following the day of last contact with the case. If additional cases are identified in the same class/group, it may be recommended that additional communications are sent to parents/staff to recommend one further PCR test 4-7 days after notification, alongside continuing LFT testing. Further actions may also be recommended by the LA.

Reintroduction of consistent groups 'bubbles'

It may become necessary to reintroduce 'bubbles' for a temporary period, to reduce mixing between groups.

Reintroduction of face coverings

Consideration will be given to whether face coverings should temporarily be worn in communal areas or classrooms (by pupils in -secondary settings only, but by staff and visitors in all school settings (unless exempt)).

The use of face coverings may have a particular impact on those who rely on visual signals for communication. Those who communicate with or provide support to those who do, are exempt from any recommendation to wear face coverings in education and childcare settings.

No pupil or student will be denied education on the grounds of whether they are, or are not, wearing a face covering.

Reasonable adjustments will be made for disabled pupils to support them to access education successfully. Where appropriate, you should discuss with pupils and parents the types of reasonable adjustments that are being considered to support an individual.

Reintroduction of testing/Additional PCR testing

We will also continue with our local recommendation that all pupils in early years and primary settings take twice weekly asymptomatic testing.

Where these measures are necessary, it will be important to work jointly with the LA and Public Health to identify any support required (e.g. supply of additional tests). Where onsite testing is reintroduced, we will look to do this in a way that does not negatively impact on the education for pupils.

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There may also be occasions where a mobile symptomatic testing unit/service is made available on the school site and pupils are invited to take a PCR test, or additional PCR tests may be organised through other means.

Contact tracing / isolating

From the 16th August people who are double vaccinated (second dose more than 14 clear days prior to day of last contact with case), and children and young people under the age of 18 years and 6 months are no longer required to isolate where they are a close contact of a positive case. We may reintroduce isolation of pupils who have been a close contact of a direct case for a limited time period. Please also see section re: response to positive case

Other restrictions

We may need to limit activities that require bringing parents and carers onto site (other than for drop off and pick up) e.g. open days, performances, open evenings. We may also reintroduce staggered start and finish times (if not already in operation) to minimise the number of people on the school site at the start and finish of the day.

We will also review any activities bringing pupils together in addition to the normal school day, or that required transportation for larger numbers of pupils (e.g. school trips / holidays - including residential educational visits). This could also include any activities bringing together pupils from a number of schools (e.g. transition/taster days).

Clinically Extremely Vulnerable

Shielding is currently paused. In the event of a major outbreak or variant of concern that poses a significant risk to individuals on the shielded patient list (SPL), ministers can agree to reintroduce shielding. Shielding would be considered in addition to other measures to address the residual risk to people on the SPL, once the wider interventions are taken into account. Shielding can only be reintroduced by national government.

In the event of a reintroduction of shielding we would need to review staffing capacity to ensure we could continue to operate staffing in a safe manner. Any attendance reductions as a result of this would be in line with the principles below.

Current guidance on clinically extremely vulnerable individuals can be found in the link below:

<https://www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19#school-college-and-other-educational-settings>

Attendance Restrictions

As a last resort, we may need to introduce attendance restrictions. We will provide high-quality remote education for all pupils not able to attend.

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Where attendance restrictions are necessary there will be an order of priority applied in terms of which pupils would continue to attend on-site provision. The only deviation to this will be where they are required to isolate (either as a result of testing positive or as a result of a local reintroduction of close contact isolation – see above).

First priority for onsite attendance will always be given to vulnerable children and young people and children of critical workers.

In primary schools second priority will be given to pupils in key stage 1, and other pupils who were due to take external exams this academic year.

In Out-of-school settings/wraparound childcare where attendance restrictions are in place, vulnerable children and young people will continue to be allowed to attend. For all other children, face-to-face provision will be provided for a limited set of essential purposes, such as going to or seeking work, attendance at a medical appointment, or to undertake education and training.

Where attendance restrictions are needed, we will be vigilant and responsive to all safeguarding threats with the aim of keeping vulnerable children and young people safe, particularly as more children and young people will be learning remotely.

If we have to temporarily stop onsite provision on public health advice, we will discuss any alternative arrangements necessary for vulnerable children and young people with the local authority. Where vulnerable children and young people are absent or do not take up a place offered to them, we will:

- follow up with the parent or carer, working with the local authority and social worker (where applicable), to explore the reason for absence and discuss their concerns
- encourage the child or young person to attend educational provision, working with the local authority and social worker (where applicable), particularly where the social worker and the Virtual School Head (where applicable) agrees that the child or young person's attendance would be appropriate
- focus the discussions on the welfare of the child or young person and ensuring that the child or young person is able to access appropriate education and support while they are at home
- have in place procedures to maintain contact, ensure they are able to access remote education support, as required, and regularly check if they are doing so

Staffing Capacity

Where staffing capacity (following use of available supply teaching capacity) is impacting on our ability to open fully we will follow the principles outlined in the attendance restrictions above.

Free School Meal provision

We will continue to provide free school meals support in the form of vouchers for pupils who are eligible for benefits related free school meals and who are not attending school because they:

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- are self-isolating
- have had symptoms or a positive test result themselves

Response and stand down action plan

The table below outlines how we will respond to single cases, clusters and outbreaks in our setting, outlining how we will put in place the above outlined measures related to: reporting cases and responding to cases, reintroduction of consistent groups 'bubbles', reintroduction of face coverings, other restrictions, attendance restrictions, staffing capacity and free school meals.

Action points 2-8 will revert to normal operating procedures once the school has no positive COVID 19 cases. The school will ensure that action point 1 is ongoing; consistently being monitored, reviewed and evaluated.

	Action	Action detail	Lead	Dates	Supplies/resources required	Other considerations
1	Preventing transmission within the setting	<ul style="list-style-type: none"> • Ensure good hygiene for everyone, using signage and providing hand sanitiser or hot water and soap for regular use • Maintain appropriate cleaning regimes, ensuring regular touch points are included within your regime • Keep occupied spaces well ventilated, do not prop open fire doors or use desk, portable or floor standing fans. • Follow public health advice on testing, self- 	HT Site Manager	<i>Ongoing</i>	Hand sanitizer Cleaning products Tissues Refreshed signage	During Autumn and Winter that all areas are well ventilated during the school day. Additional warm layers may need to be bought into school.

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	Action	Action detail	Lead	Dates	Supplies/resources required	Other considerations
		isolation and managing confirmed cases of COVID-19.				
2	Reporting cases and responding to cases	<p>We will also continue with our local recommendation that all pupils in early years and primary settings take twice weekly asymptomatic testing.</p> <p>Parents/carers should make the school aware of and log all pupils in the school who have tested positive for COVID-19 including dates for onset of symptoms (if relevant) and test dates, as well as any known links and exposures inside or outside of school.</p> <p>The school will continue to notify the Schools Education Corona inbox of positive cases in school.</p> <p>If the school meets the LA triggers, an initial discussion will be had with the school, and if necessary, an</p>	HT	<i>When necessary</i>		In absence of the HT designated AHT will assume the lead role.

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	Action	Action detail	Lead	Dates	Supplies/resources required	Other considerations
		<p>Incident Management Team (IMT) meeting will be arranged within 24 hours to include colleagues from the school, Local Authority, Public Health and regional HPTs (as appropriate). In these meetings the positive cases will be reviewed, existing mitigations/ measures will be understood, and the general attendance and wellness of staff/pupils attending school will be discussed.</p> <p>When an individual develops COVID-19 symptoms or has a positive test pupils, staff and other adults should follow public health advice on <u>when to self-isolate and what to do</u>. They should not come into Educational Settings if they have symptoms, have had a positive test result or other reasons requiring them to stay at home due to the risk of them</p>				

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	Action	Action detail	Lead	Dates	Supplies/resources required	Other considerations
		<p>passing on COVID-19.</p> <p>If anyone develops <u>COVID-19 symptoms</u>, they will be sent home and public health advice. If a pupil is awaiting collection, they will be left in the music room on their own if possible and safe to do so. A window should be opened for fresh air ventilation if possible.</p> <p>Appropriate PPE will be used if close contact is necessary. Any rooms they use should be cleaned after they have left. Staff and pupils with a positive LFT test result should self-isolate in line with the <u>stay at home guidance for households with possible or confirmed coronavirus (COVID-19) infection</u>. They will also need to <u>get a free PCR test to check if they have COVID-19</u>. Whilst awaiting the PCR result, the individual should continue to self-isolate.</p>				

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	Action	Action detail	Lead	Dates	Supplies/resources required	Other considerations
		If the PCR test is taken within 2 days of the positive lateral flow test, and is negative, it overrides the self-test LFD test and the pupil can return to school, as long as the individual doesn't have COVID-19 symptoms.				
3	Reintroduction of consistent groups 'bubbles'	<p>If a positive case(s) is present in the school; the school will revert back to:</p> <ul style="list-style-type: none"> • Staggered end of day times • Play and lunchtimes will be staggered • Extra-curricular clubs will be restricted. • Parents/visitors will not be permitted on the school site. • Wrap-around care will operate in bubbles 	HT	<i>When necessary</i>	None	Impact on working parents
4	Reintroduction of face coverings	Face coverings will temporarily be worn in communal areas	HT	<i>When necessary</i>	Some face coverings to be stocked for	

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	Action	Action detail	Lead	Dates	Supplies/resources required	Other considerations
		and/or classrooms, at pick up and drop off (by staff/visitors/parents unless exempt) coverings. Face coverings should fit securely around the face to cover the nose and mouth and be made with a breathable material capable of filtering airborne particles.			staff/visitors who have forgotten their personal face covering.	
5	Other restrictions	<p>All clinically extremely vulnerable (CEV) children should attend school unless they are one of the very small number of children under paediatric or other specialist care who have been advised by their clinician or other specialist not to attend. Further information is available in the guidance on <u>supporting pupils at Educational Setting with medical conditions</u>.</p> <p>We may need to limit activities that require bringing parents/carers onto site (other than for drop off and pick up)</p>	HT	<i>When necessary</i>		

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	Action	Action detail	Lead	Dates	Supplies/resources required	Other considerations
		<p>e.g. open days, performances, parents evenings.</p> <p>We may also reintroduce staggered start and finish times, to minimise the number of people on the school site at the start and finish of the day.</p> <p>We will also review any activities bringing pupils together in addition to the normal school day, or that required transportation for larger numbers of pupils (e.g. school trips/including residential educational visits).</p>				
6	Attendance restrictions	<p>As a last resort, we may need to introduce attendance restrictions. We will provide high-quality remote education for all pupils not able to attend.</p> <p>Where attendance restrictions are necessary there will be an order of priority applied in</p>	HT	<i>When necessary</i>		

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	Action	Action detail	Lead	Dates	Supplies/resources required	Other considerations
		<p>terms of which pupils would continue to attend on-site provision. The only deviation to this will be where they are required to isolate (either as a result of testing positive or as a result of a local reintroduction of close contact isolation – see above).</p> <ul style="list-style-type: none"> • First priority for onsite attendance will always be given to vulnerable children and young people and children of critical workers. • Second priority will be given to pupils in key stage 1, and Year 6. • In wraparound childcare, vulnerable children and young people will continue to be allowed to attend. For all other children, face-to-face 				

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	Action	Action detail	Lead	Dates	Supplies/resources required	Other considerations
		<p>provision will be provided for a limited set of essential purposes, such as going to or seeking work, attendance at a medical appointment, or to undertake education and training.</p> <p>If we have to temporarily stop onsite provision on public health advice, we will discuss any alternative arrangements necessary for vulnerable children with the local authority. Where vulnerable children are absent or do not take up a place offered to them, we will:</p> <ul style="list-style-type: none"> • follow up with the parent or carer, working with the local authority and social worker (where applicable), to explore the reason for 				

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	Action	Action detail	Lead	Dates	Supplies/resources required	Other considerations
		<p>absence and discuss their concerns</p> <ul style="list-style-type: none"> • encourage the child or young person to attend educational provision, working with the local authority and social worker (where applicable), particularly where the social worker and the Virtual School Head (where applicable) agrees that the child or young person's attendance would be appropriate • focus the discussions on the welfare of the child or young person and ensuring that the child or young person is able to access appropriate education and support 				

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	Action	Action detail	Lead	Dates	Supplies/resources required	Other considerations
		<p>while they are at home</p> <ul style="list-style-type: none"> • have in place procedures to maintain contact, ensure they are able to access remote education support, as required, and regularly check if they are doing so 				
7	Staffing capacity	Where staffing capacity (following use of available supply teaching capacity) is impacting on our ability to open fully we will follow the principles outlined in the attendance restrictions above.	HT	<i>When necessary</i>	Teaching supply agency numbers and fees	<p>Budgetary restrictions</p> <p>If SLT/DSL's are not on site – safeguarding implications.</p>
8	Free school meals	<p>We will continue to provide free school meals support in the form of vouchers for pupils who are eligible for benefits related free school meals and who are not attending school because they:</p> <ul style="list-style-type: none"> • are self-isolating 	Office Manager MAC finance	<i>When necessary</i>	Access to voucher scheme	

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Action	Action detail	Lead	Dates	Supplies/resources required	Other considerations
	<ul style="list-style-type: none"> have had symptoms or a positive test result themselves 				

Appendix A

ISOLATION PERIODS, DEFINITIONS OF CLOSE CONTACT AND INFECTIOUS PERIOD FOR COVID-19

- ❖ Positive person: isolate from **day symptoms started/day of test (if no symptoms) and for the next 10 full days AND until well and fever free for 48 hours**
- ❖ Identify **ALL** close contacts in infectious period (see below definitions) – all to isolate for **10 full days after day of last contact with case, unless exempt (see below)**
- ❖ **Exception: positive cases and contacts** who are residents/patients in care homes/hospitals/anyone discharged who receives care - to isolate for **14 days (cases and contacts)**
- ❖ **Exemptions from self-isolation as a close contact (except health and care workers):**
 - ❖ Fully vaccinated - *i.e.* more than 14 clear days after day of second dose of UK COVID-19 vaccination
 - ❖ Under 18 years and 6 months
 - ❖ Part of COVID-19 vaccine clinical trial or medically exempt from vaccination (seek separate advice)
 - ❖ Those exempt should undertake a PCR test, regular twice weekly lateral flow testing, limit social contact and wear a face covering
 - ❖ **Note the above exemption rules are not the same for health and care workers (separate guidance has been issued)**
- ❖ Follow "[Guidance for contacts of people with confirmed COVID-19](#)" guidance

DEFINITIONS

CLOSE CONTACTS	INFECTIOUS PERIOD
Direct physical contact (any duration)	If symptomatic: 2 clear days before day on which symptoms start – and for 10 days after
Face-to-face contact under 1m (any duration)	
Close contact under 1m for 1 minute or more	No symptoms: 2 clear days before the day of the test – to 10 days after
1-2m for 15 minutes or more (cumulative over 24 hrs)	
Travel in a vehicle	