

Operational Guidance on managing positive Covid-19 notifications in the school setting

This document has been produced by the Public Health Agency (PHA) and aims to support schools and pre-schools in preparing and managing their response to cases and clusters of COVID-19 within the school setting. There are several important changes included in this version, which take into account the decisions of the NI Executive which came into effect on 16th August 2021. These changes are largely in relation to the testing and self-isolation actions required of pupils or staff identified as close contacts, which differ by age group and vaccination status. The advice is complex. A flowchart is included to assist. The letters provided to schools to give to parents and staff members have also been amended to set out the new guidance.

Related documents for carrying out the risk assessment with the PHA COVID19 School Team can be found on the COVID-19 page of C2K Exchange.

For ease of use, this document is split into

Section 1- Managing a positive case following a **PCR** test (page 2)

Section 2- Managing more than one positive case following **PCR** tests (page 11)

Section 3 – Managing reported positive results for self-administered **lateral flow tests (LFTs)** (page 12)

Section 4 – Managing reported positive results for self-administered **LAMP tests in Special Schools** (page 14)

Contact Details

When a school receives notification of a confirmed case of COVID-19 (that is, confirmed with a positive PCR test or is a LAMP test) in a pupil or member of staff, You should gather the information on the case and their close contacts as described in the following pages, and contact the PHA COVID19 School Team by either completing the following online form https://hscforms.hscni.net/education-cell-online-form/ or by calling **028 9536 0484**. Someone from the team will call you back to

discuss the risk assessment and answer any questions that arise in relation to this. The PHA phoneline is open during term-time Monday to Friday 8am to 4pm and Saturday to Sunday 10am to 2pm. Outside term-time it is open 9am to 1pm Monday to Friday and 10am to 2pm at weekends and Bank Holidays.

For initial advice and/or preparation for phoning the PHA COVID19 School Team you can also contact the Education Authority emergency helpline for COVID-19 suspected or confirmed cases on **028 9041 8056** or at confirmed.covid19@eani.org.uk. This helpline is open term-time Monday to Friday 8am to 4pm and 10am to 2pm at weekends and Bank Holidays

As agreed by EA, if you are made aware of a confirmed case out of hours you should take the following precautionary actions, having taken account of the guidance in this document:

- Identify the classes and individuals who are likely to have been close contacts.
- Communicate to those classes and individuals not to attend school the next day while you work to clarify next actions.
- When the PHA and EA helplines reopen, make contact with the helpline staff and agree which classes/individuals:
 - o will then transfer to remote learning whilst self-isolating; or
 - o can return for face to face learning the following day.

Section 1. Managing a positive case following a PCR test

The School response to a confirmed case of COVID-19 in a school community will be tailored to the situation and will vary in line with current public health guidance. Information is needed to allow identification of the close contacts, and depending on that risk assessment a small number of pupils and/or staff may need to get a PCR test and/or self-isolate for a period of time. This will vary depending on whether the close contacts are staff or pupils, their age and vaccination status.

You will normally be told about a confirmed case by the parent of the child or by the member of staff concerned. Individuals who test positive for COVID-19 usually

receive this result by text and/or email and receive this as soon as the result is available. Sometimes the PHA Schools Team are notified about a case by contact tracing before the school has been advised. If the case has given permission, the PHA school team will contact the school to make them aware of the case.

When you are informed of the confirmed COVID case, it is helpful if you could gather the following information:

- Name and date of birth
- What date did they first develop symptoms?
- What symptoms did they have?
- What date did they have a test?
- When were they last in school?
- Which class/es are they in?
- What transport do they take to school (e.g. EA bus or shared car/taxi)?
- Are there other household or community contacts who are positive?
- Does the parent or child have any idea where they may have become infected?

The system of reporting positive results to schools works on trust and is usually correct. However very occasionally, if you are unsure about accuracy of a reported test result, you may wish to ask if the parent/staff member would be willing to share a screen shot of the result. If you do this, do not share this information with anyone outside public health.

Having gathered the initial information above, identification of close contacts in the school can begin. You need to consider the **2 full days** prior to the child/member of staff feeling unwell (becoming symptomatic), **counting the first day of symptom onset as day zero**. This is considered to be the infectious period. If the child/member of staff did not have any symptoms when they took the test then you should consider the 2 full days prior to the PCR test being taken (not the date of result). Note that close contact definitions are subject to review by DoH and may change in coming months.

<u>Definitions of Close Contacts in school settings as at August 2021</u>

In the context of a case in a school, a close contact is anyone who has been close to a confirmed case of COVID-19 from 2 full days before the person was symptomatic* to 10 days after the onset of symptoms (i.e. the infectious period) and fulfils any of the following:

- lives in the same household
- has been within one metre and had face-to-face contact (including being coughed on or having a face-to-face conversation)
- skin-to-skin contact
- been within 2 metres of someone for more than 15 minutes (either as a one-off contact, or added up together over one day)
- has travelled in a small vehicle with the case
- travelled in a large vehicle / plane near the case

An interaction through a Perspex (or equivalent) screen with the person who has COVID-19 is not usually considered to be a contact, as long as there has been no other contact such as those in the list above.

*If the person who has tested positive for COVID-19 did not have symptoms, then then infectious period is counted from 2 days before their test was taken to 10 days after their test was taken.

The approach set out in the Department of Education Guidance no longer requires 'pupil bubbles', however schools are encouraged to maintain measures within the school so that the number of close contacts is limited and their identification remains possible. This may include consistent pupil groups, fixed classroom floor plans with named forward facing seating, and social distancing, including in staff rooms and canteens.

Practical aspects of identifying contacts

Confirmed case in a pupil

Pupils

 Consider the close contact definition above. For post primary pupils, this will include pupils who have sat within 2 metres of the positive pupil/staff member in their class/each of their classes. Your floor plans should help you identify these children.

- Consider areas like study halls and libraries too.
- You should also consider any friendship groups outside classes, for example, lunchtime and breaks.
- How they travelled to school and travel in a school vehicle for whatever reason.
- In primary and special schools in most situations the entire class will be identified as close contacts.

Home to School Transport

- If the pupil shared a car or used home to school transport during the infectious period they are likely to have close contacts from that setting.
- It is helpful if the pupil is asked to name those sitting 2 rows in front and behind as best they can.
- Tell PHA as much as you know about the transport. If further investigation or risk assessment of EA transport is required, such as whether the driver may be a close contact, this will be arranged through the EA transport team.

Classroom staff

- It is recommended that teachers and classroom assistants maintain 2m social distance from children. However, it is acknowledged that this is not practical in some situations – particularly primary and special schools, where classroom staff are more likely to be identified as close contacts.
- Consider whether staff would meet the definition above. In post primary schools adult to pupil distancing is more reliable. However, some staff – for example special educational needs assistants - are more likely to have close contact with a positive case.
- Remember to think about staff who have been in the class who are not based there all the time. For example, substitute teachers and visiting health professionals.

Wider school

- If the school has implemented mitigating measures, this should minimise the number of other contacts.
- Consider contacts in other areas office, catering and other staff are not usually close contacts but sometimes for genuine reasons they will have had contact with the child which meets the definition.

Confirmed case in a member of staff

- The same definition should be used to identify staff and students who meet the close contact criteria, should the confirmed case be a member of staff.
- As well as the classroom and pupil facing environment, contact between staff in staff rooms, corridors and on breaks should be explored.

Having collected this information, you should then contact the PHA COVID19 School Team by either completing the following online form https://hscforms.hscni.net/education-cell-online-form/ or by calling 028 9536 0484 during its opening hours. The online form is preferred as it quickly and accurately captures spelling of the school name and the name and date of birth of the case. Someone from the team will call you back to discuss the risk assessment and answer any questions that arise in relation to it.

When the close contacts have been agreed between yourself and the PHA you should enter the close contact information on the SIMS Report and upload to the PHA using the AnyComms+ website. If your school does not have access to the SIMS system please enter the close contact information on the Close Contacts template list for Schools, which is password protected and email it to the dedicated PHA COVID19 School Team email address at: EducationalSupport@hscni.net.

As contact tracing is vitally important to slow the spread of COVID-19, and data sharing for this purpose is in the public interest for public health reasons, schools do

not require the consent of parents or pupils to share a pupil's personal data with the PHA COVID19 School Team for this purpose. You should however still make parents and pupils aware that you are required to share pupils' personal information with the PHA COVID19 School Team for this purpose.

Summary of guidance on the actions needed by staff or pupils identified as close contacts

The PHA Schools Team will provide the school with advice and with letters to send to pupils and staff who are identified as close contacts. PCR testing is generally advised for most close contacts, with the number and timing of tests and need for self-isolation depending on age and vaccination status. The PHA has been asked by DoH to ensure that pupils in P1 to Year 14 are treated the same, even though general population guidance is by age group (0-4, 5-17 & 18 plus). This may result in some queries about 4 year olds in P1 or 18 year olds in Year 14. Schools may choose to accommodate choice as to whether to apply the population guidance or schools guidance in these groups at their discretion. For 18 year old Year 14 pupils who are not yet fully vaccinated they will be advantaged by being permitted to adhere to the schools guidance rather than that for adults.

The detailed guidance in this document is for contacts who are <u>asymptomatic</u>. At any point, if a close contact becomes symptomatic, they should begin to self-isolate and book a PCR test. If positive they should not leave their home for 10 days from when their symptoms started. ALL close contacts are advised to avoid visiting hospitals or care homes in the 10 days following their contact with a confirmed case, and should also minimise contact with people who would be at greater risk if they contracted coronavirus, such as the Clinically Extremely Vulnerable (CEV population).

The guidance below is summarised in the accompanying flowchart

1. Close contacts in P1 to Year 14 pupils (or staff under 18) who have had a positive PCR test in the previous 90 days and have no symptoms

Pupils (or staff under 18) who are close contacts but have already had a positive test result in the previous 90 days and have no new symptoms do not need to arrange a PCR test or self-isolate. This is because it is possible for PCR tests to remain positive for some time after COVID-19 infection due to residual virus fragments (which are not infectious). If well they can remain at school or work, but they should be informed that they were a close contact and they/their parents given the explanatory letter A, which includes advice on not visiting hospitals or care homes over the next 10 days.

2. Close contacts identified in nursery school pupils aged 4 and under who have not had a positive PCR test in the last 90 days and have no symptoms

Parents of the pupils on the contact list should be informed that their child is a close contact of a confirmed case and they should arrange a PCR test as soon as possible. In this age group testing is voluntary and provided the child has no symptoms they do not need to self-isolate and can attend nursery even if they do not take a test. They should be given letter A (nursery).

3. Close contacts who are pupils in any year from P1 to Year 14 who have <u>not</u> had a positive PCR test in the last 90 days and have no symptoms

Parents of all those on the contact list should be informed by the school that their child is a close contact of a confirmed case. The pupil should be advised to **self-isolate until they have taken a PCR test**.

a) If the PCR test is positive they should self-isolate for 10 days from the onset of symptoms or, if they have no symptoms, for 10 days from the date of

- testing. Their household should also self-isolate unless they meet the exemptions set out on NI Direct.
- b) If the test is negative they can return to school with advice to take another test on Day 8. However, if they do go on to develop new symptoms, they should stay at home, self-isolate and book another PCR test.

Their parents should be given letter A.

4. Close contacts who are adult staff members (18 and over) and have <u>no symptoms</u>

Different self-isolation guidance applies depending on vaccination status and whether they have had a positive PCR test in the previous 90 days. These individuals should be given letter B.

If fully vaccinated:

- (i) If fully vaccinated and they have no symptoms, they can continue to come into school. If they have *not* had a positive PCR result in the last 90 days we advise that they book a free PCR test 2 full days after they came into contact with the confirmed case (or as soon as possible if more than 2 days have elapsed) and book another one on Day 8. If either test is positive they should self-isolate for 10 days from the date the test was done.
- (ii) If they have had a positive PCR result in the last 90 days they can come into school and do not need to be retested.

If unvaccinated, partially vaccinated or it is less than 14 days since their 2nd dose:

These staff should **self-isolate and book a PCR test.** However even if that test is negative, they should continue to self-isolate for the full 10 day period since their last contact with the case.

This system works on trust. This advice is based on DoH policy guidance and is not in regulations. The PHA will know of positive PCR tests but not those that are negative. Principals may not know whether pupils have or have not taken the

recommended PCR test, and they may not know the vaccination status of their staff. If there is strong reason to believe that compliance with advice to get tested will not be taken, or staff vaccination status is unknown, then the 10-day self-isolation period should apply.

PHA will issue letters to the school for dissemination to pupil and staff close contacts. This advises that they have been identified as a close contact, the date of the contact and the advice on self-isolation and/or testing as described above.

Although not a requirement, you may also wish to send a separate letter to other parents/carers whose children have not been identified as close contacts and a letter to staff members who have not been identified as close contacts. PHA Schools team can provide you with these letters which provide general advice to staff and families and advise that there has been a positive case, that close contacts have been identified and advised to self-isolate/test, and that everyone else does not need to take action but should be vigilant for any symptoms.

What contacts should do if they develop symptoms

If someone in any of the groups above develops **new symptoms suggestive of coronavirus**, they should stay at home, self-isolate and book a PCR test even if an earlier one was negative. If their test is positive, they will have to self-isolate for the whole 10 days. If negative they & their household can leave self-isolation. Self-isolation guidance for the people who are in the same household with a positive case has changed. Letters from PHA advise the parent or staff member to check on Coronavirus (COVID-19): self-isolating | nidirect for guidance on whether other people in the household also need to self-isolate while they are waiting for their PCR result.

Section 2: Managing more than one positive case of COVID19 – cluster and outbreak investigation and management

If you are informed of an additional new confirmed case in your school you should follow the same steps as outlined in section 1 and inform PHA, even if the close contacts remain the same.

A **cluster** of cases is two or more confirmed cases occurring in a 14 day period within the school setting. An **outbreak** is defined as two or more cases occurring within a 14 day period where transmission between the cases is highly likely, for example if they are close contacts of each other.

For second or subsequent cases in a school it is important to explore potential links between the cases. This is both to make sure that all relevant contacts are identified, and to consider potential sources of infection associated with the school.

If you have been informed of a second or subsequent case, in addition to identifying the close contacts for the 2 days from symptom onset of the first case, you should consider the 7 days from notification of the new case and consider links with other cases in the school, even if at first they do not meet the close contact definition.

Questions to think about

- Was the new case a known close contact of a recent case?
- Are there new contacts?
- Going back 7 days before the new case was notified, are there other cases in the school with which the new case has had a link, for example;
 - Was the case taught by a positive staff member but not identified as a close contact?
 - Are they in the same year group with a common subject as a previous case, but not a known close contact of that case?
 - o Are they linked by an extra-curricular activity?

The PHA will discuss whether wider measures need to take place with you on the phone. If the number of cases of COVID19 in the school continues to escalate, the PHA will work closely with the school to risk assess the situation, determine whether there is evidence of transmission within the school setting and consider whether further mitigation or infection control measures are required.

If the PHA determines that further assessment of a cluster is required we will discuss this with the principal. An initial video conference or phonecall will be held to review cases, undertake a more detailed assessment and consider school cases in the context of wider community transmission.

Depending on the outcome of this more detailed review a decision may be taken to establish a wider Incident Management Team (IMT) to assess the need for further management. IMT membership will generally include individuals from the school, PHA, the Education Authority, CCMS and others, as appropriate. Further measures may include consideration of wider testing of school pupils, school closure, further communication with parents and carers and the media.

Section 3: Managing reports of positive results from lateral flow tests (LFTs)

Lateral Flow Tests are now being used by students in post-primary schools and staff in all school settings. They are intended to be used twice weekly by people who do not have any symptoms of COVID-19 & have not been identified as close contacts of a known case. The tests are self-administered. They are useful to identify people who would otherwise not have known they had COVID-19, avoiding onward transmission, but they can occasionally give false positive results, so any positive LFT cases will need to be confirmed using a PCR test.

A negative LFT in someone who has symptoms does not guarantee that the person does not have COVID-19 and should never be used to decide if someone with symptoms can come into school. People with symptoms should

not use a LFT and instead should self-isolate with their household and book a PCR test.

Staff and pupils doing twice weekly LFTs should **enter every result** onto the reporting website https://www.gov.uk/report-covid19-result

Any pupil or staff member who has a positive LFT **should not come into school**, should **organise a PCR test**, and they and their household (except for fully vaccinated adults) should **self-isolate until the PCR result is obtained**.

Individuals are also **asked to notify their school** of a positive lateral flow test result as soon as possible and the **school should then inform PHA** using the online form, selecting the LFD option. You can also report positive LFD results to PHA by phone is that is more convenient, on **028 9536 0484.** We are aware that people do not always report their results online, hence our request that schools also report positive results directly to PHA.

If the individual does report a positive result online, the PHA Contact Tracing Service will contact them directly to discuss their household and community contacts and provide further information. In the majority of cases school contact tracing and advice for contacts to isolate/get tested will not take place until the LFT result is confirmed by PCR. The individual should be encouraged to have the PCR as soon as possible. The tests are widely available and turnaround times for results are short, so waiting for the PCR should not cause a long delay.

There may be occasions when PHA school team will advise you to start to identify contacts following a positive LFT. This depends on the wider context and risk assessment. Usually this is because there is information about the individual suggesting it is highly likely the PCR will be positive – for example if they are a close contact of a confirmed case.

If the PCR result is positive then the identification of contacts will start as described in Section 1. If the PCR is negative the pupil or staff member can return to school.

PCR tests should be taken as quickly as possible, ideally within 24 hours and always within 48 hours. If an individual has difficulty accessing a PCR test please contact the Education Cell for further advice.

If there is more than one positive LFT in a staff or pupil group this should be discussed with the schools team who will discuss the risk assessment with you.

Section 4: Managing positive results from LAMP tests in Special Schools

Asymptomatic testing using the Saliva LAMP test is offered to pupils and staff in special schools in Northern Ireland. This is offered once weekly for use in those who **do not have symptoms** of COVID-19. Testing kits are sent home, along with instructions on how to carry out the test. Completed tests are returned to the school and then transported to the laboratory in the Queen's University Belfast School of Pharmacy for processing. Pupil and staff member personal details are not shared with the laboratory, with barcodes used instead to track samples and results.

People with symptoms should not use a LAMP test and instead should self-isolate with their household, except for fully vaccinated adults as advised on NI Direct, and book a PCR test.

If someone who is asymptomatic tests positive on LAMP testing, the individual does not need to have a confirmatory PCR test carried out, and the test is treated as a confirmed positive result. Any pupil or staff member who has a positive LAMP test should not come into school and they should self-isolate for 10 full days from the date the test was taken. Household members should also self-isolate, unless exemptions apply, as set out in NI Direct guidance.

The school principal will be notified of the result by the laboratory and Education Authority results system. The Education Cell in the PHA will also be notified. School principals are asked to consider the same questions to identify contacts as are set

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out in Section 1 of this guidance and then contact the PHA Education Cell by email or phone to agree the identified contacts. Advice for contacts to isolate/get tested will follow that set out in Section 2 and letters will be provided for sharing with pupil or staff close contacts.

The Education Cell in the PHA will also inform the NI Contact Tracing Service of the positive LAMP result so that they can contact the parents or adult staff members to discuss their household and community contacts and provide further information.

If there is more than one positive LAMP result in the school, the PHA Education Cell will help support a risk assessment with the school.

The following documents can be accessed on the PHA website:

• SIMS report instructions <u>SIMS.net Creating a report (hscni.net)</u>