

EoE PHE-LA Joint MoU for management of confirmed Covid-19 case(s) in educational settings (excluding universities) v5.1

EoE COVID-19 Implementation Group*

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Review date: As needed

A. Overview

1. This Memorandum of Understanding (MoU) has been developed jointly by Public Health England (PHE) East of England Centre and Local Authorities (LAs) (Public Health teams and Children and Young Persons Directorates) to ensure a co-ordinated response for managing single cases and outbreaks of Covid-19 in educational settings.
2. This provides a framework for working across PHE and LA. It is primarily written for these organisations. Separate resources are available for schools and early years settings.
3. This document sets out the respective roles for PHE and LA ('who does what'), and for completeness the roles of educational settings and NHS Test & Trace.
4. This MoU will be kept under review, in line with national guidance. This is an outline document intended to be flexible and adaptable for local operation. It will not be possible to cover all circumstances – and where things are not clear or not working – dialogue between the LA and PHE is encouraged to ensure situations are managed safely and efficiently.
5. The term '**schools**' refers to primary schools and secondary schools (independent, academies, local authority maintained), including special schools and further education colleges. The term '**early years**' refers to nurseries, nursery schools, pre-schools and childminders. The term '**educational settings**' includes both schools and early years settings, this does not include universities. It is also acknowledged that principles contained here would apply to school clubs/holiday clubs.
6. **This MoU covers contact tracing and management of confirmed case(s) of COVID-19 only. Suspected cases of COVID-19 should not be reported by schools to the LA or the HPT.**
7. **The MoU is for management of case(s) and contact tracing in educational settings only. Household contact tracing of confirmed cases is carried out by NHS Test & Trace.**
8. **The overriding principle for outbreak control is to minimise the spread of infection, however, the advice to the educational setting requires a pragmatic approach, which takes into consideration the educational needs of the children and operational issues within the school. Whilst identifying a smaller bubble for self-isolation is preferable, in some situations the head teacher may identify a larger bubble for operational reasons, such as capacity to deliver a full curriculum to the class/year group during the isolation period. LAs should**

therefore consider a detailed risk assessment and discussion with the headteacher to identify the students/children who would be advised to self-isolate following exposure to a case.

B. Rationale for the joint MOU

1. To have a joint collaborative and co-ordinated approach to supporting and giving public health advice to educational settings in the East of England (EoE) in managing COVID-19 cases and outbreaks with the aim of:
 - reducing transmission and limiting spread of the disease
 - enabling children to attend the educational setting and continue their education
 - providing reassurance to staff, children and parents
 - enabling parents to return to work
 - protecting the vulnerable.
2. To streamline the follow up of EoE educational settings by LAs and the PHE Health Protection Team (HPT), making best use of different organisations' assets.
3. If a confirmed case is linked to an educational setting NHS Test & Trace will escalate this to Tier 1. However, educational settings will receive information from parents and staff earlier than the alert to Tier 1 due to the lag in the reporting pathways. Hence it is expected that the alert trigger for contact tracing within educational settings will usually be raised by the head teacher.
4. LAs have established relationships and an understanding of the educational settings in their area. In response to COVID-19, LAs will support educational settings to implement DfE and PHE advice, and when necessary work with other groups or professional organisations.

C. Governance and Key Guiding Principles

1. PHE will fulfil its statutory duty as outlined below by receiving the notification of a case and outbreaks, supporting the risk assessment and providing public health advice to the LA and the educational setting in accordance with the national guidance.
2. PHE has responsibility for protecting the health of the population and providing an integrated approach to protecting public health through close working with the NHS, LAs, emergency services, and government agencies. This includes specialist advice and support related to management of outbreaks and incidents of infectious diseases.
3. As per this joint MOU and in line with the statutory roles outlined below, LAs will conduct a risk assessment and follow up with the educational setting to fulfil their statutory duty for safeguarding and protecting the health of their population.
4. Under the Health and Social Care Act 2012, Directors of Public Health in upper tier and unitary local authorities have a duty to prepare for and lead the local authority (LA) public health response to incidents that present a threat to the public's health.

5. Medical practitioners have a statutory duty to notify suspected and confirmed cases of notifiable diseases to PHE, under the Health Protection (Notification) Regulations 2010 and the Health Protection (Notification) Regulations 2020¹.
6. This collaborative arrangement creates a shared responsibility between the LAs and PHE in dealing with COVID-19 outbreaks in educational settings.
7. In practice the LAs and PHE HPT will work closely together to deliver their respective duties. **The HPT and LA will to collaborate as part of a single public health system** to deliver effective control and management of COVID-19 outbreaks in educational settings.

D. Definitions²

Cluster:

Two or more confirmed cases of COVID-19 among children or staff in an educational setting within 14 days

or

Increase in background rate of absence due to suspected or confirmed cases of COVID-19 (does not include absence rate due to individuals shielding or self-isolating as contacts of cases).

Outbreak

Two or more confirmed cases of COVID-19 among students/children or staff who are direct close contacts, proximity contacts or in the same cohort or 'bubble'* in an educational setting within 14 days.

* a cohort or 'bubble' might be a class, year group or other defined group within the educational setting. This definition aims to distinguish between transmission occurring in the community versus transmission occurring within an educational setting.

Possible or suspected case: staff member or student/child with a new continuous cough and/or high temperature and/or a loss of, or change in, normal sense of taste or smell (anosmia). **Educational settings are not expected to contact PHE or the LA for suspected cases.**

Confirmed case: staff member or student/child with a laboratory test positive for COVID-19/SARS-CoV-2 with or without symptoms.

¹<http://www.legislation.gov.uk/ukxi/2010/659/contents/made>
<http://www.legislation.gov.uk/ukxi/2020/129/contents/made>

² Taken from PHE guidance: Public health management of a COVID-19 outbreak in a school or further education college v0.09; PHE guidance: Public health management of a COVID-19 outbreak in a nursery v0.01; PHE guidance: Public health management of a COVID-19 childminder outbreak v0.01

Contact definitions

A 'contact' is a person who has been close to someone who has tested positive for coronavirus whilst they were infectious (see 'Infectious Period' below). The following criteria should be used when defining a contact of a case:

- i) Direct close contacts:** Direct face to face to face contact with a case for any length of time, including being coughed on or talked to. This will also include exposure within 1 metre for 1 minute or longer, or
- ii) Proximity contacts:** Extended close contact (within 1-2m for more than 15 minutes) with a case, or
- iii) Travelled in a small vehicle with a case or bigger van/transport where social distancing was not maintained**

Infectious Period: from 48 hrs prior to symptom onset to 10 days after, or 48 hrs prior to test if asymptomatic.

E. Roles and Responsibilities:

Local Authority³

1. LA will provide advice and support around operational issues (where appropriate), e.g. relating to staffing and viability of keeping an educational setting open, personal protective equipment (PPE) and implementation of public health guidance.⁴
A flowchart (poster) is included for educational settings.

Appendix 1: What to do if you have a case of COVID-19 in your school

2. LA will receive notification from educational settings for a single confirmed COVID-19 case in a student/child or a staff member, conduct a risk assessment with the school head teacher to identify close contacts who need to self-isolate, see the risk assessment template for LA's,

Appendix 2: Risk assessment checklist template for LAs

Appendix 3: Notes for identifying contacts in school setting

3. Templates forms are included for educational settings to collect systematic detailed information on contacts of the cases in an educational setting to assist the risk assessment

Appendix 4: Contact information collection form for staff

Appendix 5: Contact information collection form for students

4. The LA will give infection control and public health advice to the educational

³ It is recognised that different local authorities may divide roles and responsibilities differently between their different departments, e.g. public health, education directorate and/or children and young people's services.

⁴ It is recognised that staffing ratios and the nature of care provided in early years settings is more likely to challenge the operational viability of these settings, making closure on operational grounds more likely.

setting to minimise the spread of infection

5. Once the close contacts who will be advised to self-isolate are identified LA will provide template letters to the school:

Appendix 6: Letter for parents of close contacts of confirmed COVID-19 case in an educational setting: Advice for student/child to self-isolate for 14 days

Appendix 7: Letter for staff members who are close contacts of confirmed COVID-19 case in an educational setting: Advice to self-isolate for 14 days

Appendix 8: Letter for parents of students/children not identified as a close contact of confirmed case of COVID-19 in an educational setting

Appendix 9: Letter for staff not identified as a close contact of a confirmed case of COVID-19 in an educational setting

6. LA will **email the risk assessment checklist** they complete for the school to the HPT via secure NHS email portal. EoE HPT NHS email -- PHE.EoEHPT@nhs.net
7. LA will advise the school to provide a list of case(s) details (Name, DOB, student or staff; class and year group for students).
8. LA will advise the school to inform them if any further case(s) reported.
9. **If the school reports further cases(s):**
- 1). LA will record the information, using the **risk assessment checklist** and consider if this is a cluster or an outbreak (refer to the definitions in section D above).
- 2). **LA will inform HPT by email (ee.crc@phe.gov.uk), seek advice from HPT, and consider the need for a joint risk assessment and an Incident Management Team (IMT).**
10. LA will maintain a database/log of the school incidents and the advice provided to schools.
11. The **outbreak can be declared over once no new cases (symptomatic or asymptomatic) have occurred in the 28 days** since the appearance of symptoms or a positive test results in an asymptomatic student or staff member linked to the outbreak from the date of swabbing in the most recent case.
12. Any decisions on school closures and re-opening will be taken in line with local outbreaks plans (i.e. 'local lockdown'), local oversight mechanisms and HPT advice.
13. LA should contact PHE if they have concerns about an outbreak in an educational setting. Features that might suggest concern include, but are not limited to:
- there has been a death in the setting (staff or child)
 - there are a large number of clinically vulnerable children
 - there are a high number of cases

- the outbreak has been ongoing despite control measures
- there are concerns on the safe running of the educational setting
- there are other factors that require multi-agency coordination and decision making.

14. There will be two-way communication between the HPT and the LA on a regular basis to keep each other informed of any significant issues relating to educational settings.
15. Routine testing for symptomatic students/children and staff will be arranged by the individuals themselves through the NHS Test & Trace. However, as part of outbreak management, if testing of a large numbers of students and staff is required the LA will be expected to support this.
16. There will be a single line of communication with the schools via the LAs to minimise contact with the educational setting and ensure consistency of advice.

PHE

1. PHE EoE is the lead organisation responsible for this MOU. The health protection advice to the LA's for management of educational setting incidents will be the responsibility of the HPT within PHE in the EoE.
2. If the HPT is notified of confirmed case(s) in an educational setting the HPT will inform the LA in an email to the 'single point of contact' (SPOC), including during weekends, in an email.
3. **Support for Local Authorities**
 - a) The HPT will offer advice on the interpretation or implementation of national guidance by email or telephone as requested.
 - b) The HPT will share relevant national guidance for managing single case and outbreaks, as well as template letters, with the local authority public health teams.
4. The single point of contact for the HPT schools and early years settings related queries will be eoecrc@phe.gov.uk or 0300 303 8537⁵
5. There will be open two-way communication between the HPT and the LA on a regular basis to keep each other informed of any significant issues relating to schools.

17. Roles and Responsibilities: educational settings⁶

- If there is a **single confirmed COVID-19 case** in a student/child or staff the head teacher **should contact the LA or DfE helpline in accordance with local arrangements**. It is acknowledged that some LAs have advised educational settings to contact the LA as a first point of contact for a single case rather than the DfE helpline

⁵ The PHE Coronavirus Response Centre (CRC) runs from 0900-1800 seven days a week; out of hours advice is available for public health emergencies.

⁶ It is recognised that different local authorities may divide roles and responsibilities differently between their different departments, e.g. public health, education directorate and/or children and young people's services.

- **If there are two or more cases within a 14-day period the Head Teacher should inform the LA**
- Educational settings will be responsible for development and implementation of local processes to reduce the risk of Covid-19 transmission, in line with national guidance. <https://www.gov.uk/government/collections/coronavirus-covid-19-guidance-for-schools-and-other-educational-settings>
- Educational settings should direct students/ children or staff who have symptoms to the NHS Test & Trace, who will arrange testing when appropriate and initiate tracing of contacts as appropriate
- Educational settings will help the LA and the HPT to identify contacts of cases in the education setting.
- When an outbreak or confirmed case occurs, the educational setting will be responsible for communicating with parents, students and staff, making use of template letters.⁷
- Educational settings should monitor their absenteeism rate, and if concerned that an increase could be related to COVID-19, should notify LA.

Roles and Responsibilities: NHS Test & Trace

- Testing of symptomatic students/children and staff will be arranged through NHS Test & Trace
- NHS Test & Trace will follow-up any contacts of confirmed cases outside of the school or early years setting (for example, household contacts/other social contacts) and advise on self-isolation.
- NHS Test & Trace will give individual test results to people tested and notify HPT of confirmed cases in educational settings.

⁷ National guidance asks schools to send these out. There are different letters for different scenarios (contacts of case, outbreak in a school, single case in a school. Some local authorities may want to badge these as from the local authority, rather than the school. It is recognised that some childminder settings may be more informal.

Appendix 1 Flow chart (poster) for educational settings



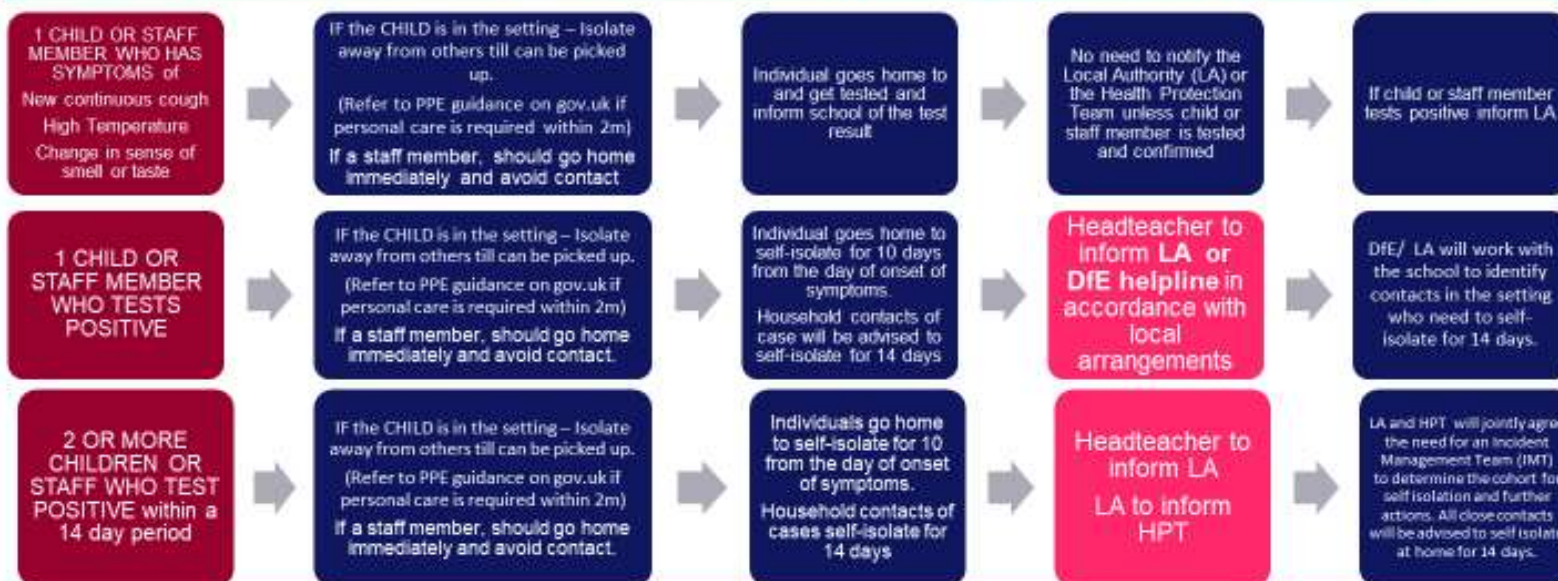
Public Health
England

EoE PHE and Local Authority

What to do if you have a case of COVID-19 in your educational setting

Version 3
22/09/2020

See your School Pack for more information. Guidance is available at: <https://www.gov.uk/coronavirus/education-and-childcare>



Symptoms of COVID-19: recent onset of a new continuous cough or a high temperature or a loss of, or change in, sense of taste or smell (anosmia)
A case is infectious 48 hrs prior to symptom onset to 10 days after, or 48 hrs prior to test if asymptomatic

Appendix 2 Risk Assessment checklist for Local Authorities

Risk Assessment Checklist for Local Authorities	
Serial No.:	Date:
Educational Setting Details	
Educational Setting Name: Additional details, e.g., Primary/Secondary State/Independent/Academy/other: Address: Local Authority:	
Details of the key contact in the educational setting Name: Position: Contact Number: Email:	
For single case	
Case Details: First Name Surname: DOB: Student or Staff: If student: Year	
Is the case symptomatic: Date of onset of symptoms: If asymptomatic, date of confirmed test: Have they attended the educational setting during the infectious period? yes/no (Infectious period: 48 hours prior to symptom onset to 10 days after, or 48 hrs prior to test if asymptomatic)	Yes/No

Risk assessment information to be ascertained from the educational setting (use the Contact Information Forms for Staff and Students/children to facilitate this)	
1. Class, year group details 2. If a member of any other activity groups (e.g. breakfast or after school club, sports or music group/lessons)? If yes 3. If student/child has any special needs or requires 1:1 support	
4. Any siblings/connections in this educational or any other educational? 5. Identify friendship group 6. Anyone in the household confirmed? 7. Attended any social gatherings during infectious period, especially with peers	
8. Mode of travel to the educational setting? 9. Contact details during journey to and from school	
10. Lunch time details (close contacts during lunch time)	
11. Any other relevant information	
General COVID secure arrangements in the educational setting	
Bubble sizes – are the bubbles organised by class/year groups? Segregation of bubbles? Do bubbles mix at any time? Infection control – hand sanitisers, cleaning of surfaces (desks) and other equipment One-way system in corridors? Separate entry and exit door?	

<p>Infection control</p> <p>Provision of hand sanitisers?</p> <p>Cleaning of desks and other equipment?</p> <p>Any social/public events hosted for the for the educational setting community?</p> <p>Other relevant details</p>	
<p>Additional information to inform advice</p>	
<p>What is the size of the bubble this pupil is in?</p> <p>Total number of pupils now self-isolating from this bubble?</p> <p>% of pupils off site from this bubble?</p> <p>Number of teachers on roll teaching this bubble?</p> <p>Number of teachers self-isolating that teach this bubble?</p> <p>% of all teaching staff self-isolating</p> <p>Can you deliver a full curriculum to pupils still at school?</p> <p>Year 7</p> <p>Year 8</p> <p>Year 9</p> <p>Year 10</p> <p>Year 11</p> <p>Year 12</p> <p>Year 13</p> <p>Number of support staff on roll?</p> <p>Number of support staff self-isolating?</p> <p>Are there enough staff to safely open the school?</p> <p>Will pupils be significantly disadvantaged if remote teaching is introduced for this bubble?</p> <p>Is the workload for staff teaching this bubble (teaching on site and remotely) within acceptable limits?</p>	

<p>If remote teaching is undertaken, is support in place for disadvantaged pupils?</p> <p>If remote teaching is undertaken, is support in place for pupils who may fail to engage?</p>	
Decision	
Number of students identified for self-isolation	
Number of staff identified for self-isolation	
Template letters provided-	
<p>Letter for parents of close contacts of confirmed COVID-19 case in an educational setting: Advice for child to self-Isolate for 14 days.</p> <p>Letter for staff members who are close contacts of confirmed COVID-19 case in an educational setting: Advice to self-Isolate for 14 days</p> <p>Letter to parents of children not identified as a close contact of confirmed case of COVID-19 in an educational setting</p> <p>Letter to staff not identified as a close contact of a confirmed case of COVID-19 in an educational setting</p>	<p>Yes/No</p> <p>Yes/No</p> <p>Yes/No</p> <p>Yes/No</p>
Infection control advice/support provided	Yes/No
Details	
Complete this section if two or more confirmed cases, clusters/outbreaks ted	
<p>Details of the Current Outbreak:</p> <ul style="list-style-type: none"> • Number of cases • Date of onset in first case • Date of onset in most recent case • Any case required admission to hospital 	
Other relevant information, including	

actions taken					
Line list of cases (to be maintained by school)					
Case Forename Surname	DOB	Staff /student	Year Group	Symptomatic: Yes/No	Comments
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
List actions taken to manage the outbreak					

Appendix 3 Notes for identifying contacts in an educational setting

IMPORTANT

- We know that students have already missed a lot of teaching time this year and understand that it is important to find the balance between identifying everyone who may be at a genuine risk of developing infection while not asking people to self-isolate unnecessarily.
- The time when people who have tested positive for COVID-19 are infectious to others is from 48 hours before their onset of symptoms to 10 days afterwards (or from 48 hours prior to the date of their test to 10 days afterwards if they have had no symptoms)
- Only people who came into contact with them during this time need to be advised to self-isolate.

EYFS and Key Stage 1 (Foundation to Year 2)

- Usually children who had shared a classroom with the case during their infectious period would be considered contacts in these age groups on the basis that social distancing is assumed not possible. Identify everyone in the class as contacts and advise self-isolation.
- Check friendship groups. Identify contacts as children who are known to have had definite face to face contact with them during their infectious period
- Are there any staff members who report that they have had close contact with the case during the infectious period? (Use the standard contact definitions for this)

Key Stage 2 (Year 3 -6)

- If children mix a lot within the classroom then the whole class would usually be defined as contacts.
- If there is a seating plan for all lessons and it is felt that social distancing has been observed in the classroom then look at seating plans instead. Identify contacts as children who sat within 2 metres of the case during their infectious period in school only.
- Check friendship groups. Identify contacts as children who are known to have had definite face to face contact with them during their infectious period
- Are there any staff members who report that they have had close contact with the case during the infectious period? Use the standard contact definitions for this and only ask staff to self-isolate if they have had definite contact with the case.
- Are there any other people who they have had definite face to face contact with at break times or in an other group activities such as sport or music lessons? This should be specific identifiable individuals (rather than whole groups where contact cannot be ruled out)

Key Stage 3 , 4 and 5 (Year 7 - 13)

- **The default should NOT be to self-isolate the whole class or bubble in a secondary setting**
- Look at the student timetable to identify classes during the infectious period
- Look at seating plans. Identify contacts as children who sat within 2 metres of the case during their infectious period in school
- Check friendship groups. Identify contacts as children who are known to have had definite face to face contact with them during their infectious period
- Are there any staff members who report that they have had close contact with the case during the infectious period? Use the standard contact definitions for this and only ask staff to self-isolate if they have had definite contact with the case
- Are there any other people who they have had definite face to face contact with at break times or in an other group activities such as sport or music lessons? This should be specific identifiable individuals (rather than whole groups where contact cannot be ruled out)

Appendix 4: Contact information collection form for STAFF

**Contact information collection form
for STAFF**

**To be completed by the staff
member for the risk assessment to
identify close contacts
This information will be used by the
school only**

Name	Date of birth	Relative from the same household in school	Contact details – telephone / home address

Symptoms	COVID Test	Have you been in the school during the infectious period?
Have you had any symptoms of COVID-19 (recent onset of new continuous cough or high temperature or a loss of, or change in, normal sense of taste or smell? anosmia)	When did you have the COVID test?	Infectious Period is 48 hrs prior to symptom onset to 10 days after, or 48 hrs prior to test if asymptomatic
Yes/No	Date:	Yes/No
If yes, when did the symptoms first start:		If yes- please note the dates you have been at school

**You only need to complete the remaining form if you have been in the school during the infectious period
(Infectious Period is 48 hrs prior to symptom onset to 10 days after, or 48 hrs prior to test if asymptomatic)**

Travel to school			
How have you travelled to the school when you have been at the school during the infectious period? Please list below-	Mode of travel Car, bus, cycle	If travelled by car, did you share car or bus with any other staff member or student at the school?	
Date		Yes/No If yes, Name of the staff/student:	
Date		Yes/No If yes, Name of the staff/student:	
Date		Yes/No If yes, Name of the staff/student:	
Date		Yes/No If yes, Name of the staff/student:	
Did you have any contact with anyone from the school less than 2 meters apart during your journey to school?	Yes/No If yes, please list below, with dates: Date: Name: Date: Name:		

Where did you go before 9.10 am. Please note the date and complete this for each date you have been in the school during the infectious period			
Risk view on the contact between the infected individual and others	Yes	Unsure	No
Direct close contact face to face contact with an infected individual for any length of time, within 1 metre			
Proximity contacts extended close contact (within 1 to 2 metres for more than 15 minutes) with an infected individual			
What time did you enter the school site?			
Who did you enter the school site with?			

What areas of the school did you go to and which members of staff / students did you have contact with (less than 2m)	<u>Areas of the school</u>	<u>Contact with staff less, distance and length of time</u>

Contacts during the school day. Please note the date and complete this for each date you have been in the school during the infectious period				
Risk view on the contact between the infected individual and others		Yes	Unsure	No
Direct close contact face to face contact with an infected individual for any length of time, within 1 metre				
Proximity contacts extended close contact (within 1 to 2 metres for more than 15 minutes) with an infected individual				
9.10 – 10.10	Where were you at these times?			
11.10 – 11.30				
11.30 – 12.30				
12.30 -1.30	Which members of staff have you had contract with (less than 2m) and how long?			
1.30 – 2.30				
	Which students have you been in contact with (less than 2m) and how long? (supporting in lessons / 1 to 1 work etc			

2.30 – 3.30	Have you been in contact with any non – school employees (less than 2 m and how long)?	
3.30 – 4.30		

Appendix 5: Contact information collection form for STUDENTS

Contact Information Collection Form for STUDENTS
To be completed by the student for the risk assessment to identify close contacts Key Stage 3 & 4
This information will be used by the school only

Student Name	Date of birth	Siblings in school (list names and year)	Contact details – telephone / home address

Symptoms	COVID Test	Have you been in the school during the infectious period?
Have you had any symptoms of COVID-19 (recent onset of new continuous cough or high temperature or a loss of, or change in, normal sense of taste or smell? anosmia)	When did you have the COVID test?	Infectious Period is 48 hrs prior to symptom onset to 10 days after, or 48 hrs prior to test if asymptomatic
Yes/No	Date:	Yes/No
If yes, when did the symptoms first start:		If yes- please note the dates you have been at school

You only need to complete the remaining form if you have been in the school during the infectious period
(Infectious Period is 48 hrs prior to symptom onset to 10 days after, or 48 hrs prior to test if asymptomatic)

How have you travelled to the school when you have been at the school during the infectious period? Car, cycle, bus, walked? Please list below-

Date			
Date			
Date			
If travelled by car, list the names of students you have travelled with below			
If you have travelled by school coach, please complete below			
1. sit next to you on either side? 2. one row in front of you? 3. one row behind you? 4. across from you?	Student name 1		Student name 4
	Student name 2		Student name 5
	Student name 3		Student name 6
If you travel on a public bus which bus route number do you travel?			
If you walked to school who did you walk with (less than 2 meters apart)	Student name 1		Student name 3
	Student name 2		Student name 4
How long did it take for you to walk to school?			
Did you cycle to school? Yes /no If yes, who did you cycle in with	Student name 1		Student name 3
	Student name 2		Student name 4
On the way to school did you stop anywhere for food, go into another person's house? List below			

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What did you do before registration and during registration				
What time did you enter the school site?				
Who did you enter the school site with?				
Did you go straight to your 'zone'?				
In your zone who were you talking to (less than two meters apart)	Student name 1		Student name 3	
	Student name 2		Student name 4	
When lining up to go to your classroom who was in front of you and who was behind you?	Student name 1		n/a	n/a
	Student name 2		n/a	n/a

Lessons – look at the student time-table, class seating plans to identify rooms and teachers					
Period 1	➤ Who was in front and behind you when lining up outside?	Student name 1		Student name 4	
	➤ Where you in your normal seating plan?	Student name 2		Student name 5	
	➤ Who sat next to you, who sat in front of you and who sat behind you?	Student name 3		Student name 6	
Period 2	➤ Who was in front and behind you when lining up outside?	Student name 1		Student name 4	
	➤ Where you in your normal seating plan?	Student name 2		Student name 5	
	➤ Who sat next to you, who sat in front of you and who sat behind you?	Student name 3		Student name 6	
Period 3	➤ Who was in front and behind you	Student name 1		Student name 4	

	when lining up outside? ➤ Where you in your normal seating plan? ➤ Who sat next to you, who sat in front of you and who sat behind you?				
		Student name 2		Student name 5	
		Student name 3		Student name 6	
Period 4	➤ Who was in front and behind you when lining up outside? ➤ Where you in your normal seating plan? ➤ Who sat next to you, who sat in front of you and who sat behind you?	Student name 1		Student name 4	
		Student name 2		Student name 5	
		Student name 3		Student name 6	
Period 5	➤ Who was in front and behind you when lining up outside? ➤ Where you in your normal seating plan? ➤ Who sat next to you, who sat in front of you and who sat behind you?	Student name 1		Student name 4	
		Student name 2		Student name 5	
		Student name 3		Student name 6	

T&L during the lessons		
Period 1	➤ Was the teacher in the front section of the class room throughout the lesson?	
Period 2	➤ Did you move out of your seat and work with other students?	
Period 3	➤ Did the teacher or TA work closely with you if you needed support (less	

Period 4	than a meter)	
Period 5	➤ Did you work with a different 'group of students' outside your form bubble (PE /DT)	

Break time – 15 minutes				
Did you go into the Café/Canteen?				
Who did you have any physical contact with anyone during break time and what did you do?	Student name 1		Student name 3	
	Student name 2		Student name 4	
Did you 'hang around with' during break time?				

Lunchtime time				
Did you go into the Café?				
Where did you go at lunchtime?				
Who did you have any physical contact with anyone during break time and what did you do?	Student name 1		Student name 3	
	Student name 2		Student name 4	
Did you 'hang around with' during break time?				

End of the school day					
Risk view on the contact between the infected individual and others			Yes	Unsure	No
Who did you leave school with at the end of the school day or sit next to on the bus?	Student name 1		Student name 1		
	Student name 2		Student name 2		

Appendix 6

Letter for parents of close contacts of a confirmed COVID-19 case in an educational setting: Advice for student/child to self-isolate for 14 days

Dear Parent,

We have been notified of a confirmed case of COVID-19 within the school.

Your child has been identified as a close contact of the confirmed case. In line with the national guidance your child is advised to self-isolate for 14 days since the last contact with the confirmed case. The date of last contact with a confirmed case is day zero. The 14 day self-isolation period will end on **<insert date>**.

If your child is well at the end of the 14 day period they will be able to return to school on **<insert date>**. Other members of your household can continue normal activities provided your child does not develop symptoms within the 14 day self-isolation period.

Please see the link to the PHE Staying at Home Guidance:

<https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance/stay-at-home-guidance-for-households-with-possible-coronavirus-covid-19-infection>

What to do if your child develops symptoms of COVID 19

If your child develops symptoms arrange for a COVID test. This can be done via <https://www.nhs.uk/ask-for-a-coronavirus-test-or-by-calling-119>.

If their test is negative they must still continue to self-isolate for the 14 day period, regardless of the negative test result.

If their test is positive they will need to self-isolate for **10 days** from the date when their symptoms start. All your household members must self-isolate for 14 days.

The date of symptom onset is day zero.

<https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance/stay-at-home-guidance-for-households-with-possible-coronavirus-covid-19-infection>.

General COVID information

Symptoms

The most common symptoms of coronavirus (COVID-19) are recent onset of:

- recent onset of new continuous cough or
- high temperature or
- a loss of, or change in, normal sense of taste or smell (anosmia).

For most people, coronavirus (COVID-19) will be a mild illness. If you are concerned about your child's health or the health of anyone else in your house please seek advice from your GP or NHS 111 by phoning 111.

There are things you can do to reduce the risk of getting COVID-19:

- wash your hands with soap and water often – do this for at least 20 seconds
- use hand sanitiser gel if soap and water are not available
- wash your hands as soon as you get home
- cover your mouth and nose with a tissue or your sleeve (not your hands) when you cough or sneeze
- put used tissues in the bin immediately and wash your hands afterwards

Further Information

Further information is available at <https://www.nhs.uk/conditions/coronavirus-covid-19/>

Yours sincerely

Head Teacher

<insert name of sender>

Appendix 7

Letter for staff members who are close contacts of confirmed COVID-19 case in an educational setting: Advice to self-isolate for 14 days

Dear Staff Member,

We have been notified of a confirmed case of COVID-19 within the school.

You have been identified as a close contact of the confirmed case. In line with the national guidance you are advised to self-isolate for 14 days since the last contact with the confirmed case. The date of last contact with a confirmed case is day zero. The 14 day self-isolation period will end on **<insert date>**.

If you remain well at the end of the 14 day period you will be able to return to school on **<insert date>**. Other members of your household can continue normal activities provided you do not develop symptoms within the 14 day self-isolation period.

Please see the link to the PHE Staying at Home Guidance:

<https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance/stay-at-home-guidance-for-households-with-possible-coronavirus-covid-19-infection>

What to do if you develop symptoms of COVID 19

If you develop symptoms arrange for a COVID test. This can be done via <https://www.nhs.uk/ask-for-a-coronavirus-test> or by calling 119.

If your test is negative you must still continue to self-isolate for the 14 day period, regardless of the negative test result.

If your test is positive they will need to self-isolate for **10 days** from the date when your symptoms start. All your household members must self-isolate for 14 days.

The date of symptom onset is day zero.

<https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance/stay-at-home-guidance-for-households-with-possible-coronavirus-covid-19-infection>.

General COVID information

Symptoms

The most common symptoms of coronavirus (COVID-19) are recent onset of:

- recent onset of new continuous cough or
- high temperature or
- a loss of, or change in, normal sense of taste or smell (anosmia).

For most people, coronavirus (COVID-19) will be a mild illness. If you are concerned about your health or the health of anyone else in your house please seek advice from your GP or NHS 111 by phoning 111.

There are things you can do to reduce the risk of getting COVID-19:

- wash your hands with soap and water often – do this for at least 20 seconds
- use hand sanitiser gel if soap and water are not available
- wash your hands as soon as you get home
- cover your mouth and nose with a tissue or your sleeve (not your hands) when you cough or sneeze
- put used tissues in the bin immediately and wash your hands afterwards

Further Information

Further information is available at <https://www.nhs.uk/conditions/coronavirus-covid-19/>

Yours sincerely

Head Teacher

Appendix 8

Letter for parents of students/children not identified as a close contact of confirmed case of COVID-19 in an educational setting

Dear Parent,

We have been informed of a confirmed case of COVID-19 within the school.

This letter is to inform you of the current situation and provide general advice for you.

Those children and staff members who have been in direct prolonged contact with the confirmed case will have received an individual letter advising them to self-isolate in line with the national guidance.

If you have not received a letter identifying your child as a close contact your child is not advised to self-isolate on account of the case in the school. This letter is for your information only.

Although your child has not been identified as a close contact I would like to take this opportunity to provide you with general information on COVID-19.

General COVID information

What to do if your child develops symptoms of COVID 19

If your child develops symptoms of COVID-19 they should remain at home. Arrange for a COVID test via <https://www.nhs.uk/ask-for-a-coronavirus-test> or by calling NHS 119 and inform the head teacher.

If their test is negative and they can return to school when they are well.

If their test is positive they will need to self-isolate for **10 days** from the date when your symptoms start. All your household members must self-isolate for 14 days.

The date of symptom onset is day zero.

<https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance/stay-at-home-guidance-for-households-with-possible-coronavirus-covid-19-infection>.

Symptoms

The symptoms of coronavirus (COVID-19) are:

- recent onset of new continuous cough or
- high temperature or
- a loss of, or change in, normal sense of taste or smell (anosmia).

For most people, coronavirus (COVID-19) will be a mild illness. If you are concerned about your health or the health of anyone else in your house please seek advice from your GP or NHS 111 by phoning 111.

There are things you can do to reduce the risk of getting COVID-19:

- wash your hands with soap and water often – do this for at least 20 seconds
- use hand sanitiser gel if soap and water are not available
- wash your hands as soon as you get home
- cover your mouth and nose with a tissue or your sleeve (not your hands) when you cough or sneeze
- put used tissues in the bin immediately and wash your hands afterwards

Further Information

Further information is available at <https://www.nhs.uk/conditions/coronavirus-covid-19/>

Yours sincerely,

Head Teacher

Appendix 9

Letter for staff not identified as a close contact of a confirmed case of COVID-19 in an educational setting

Dear Staff Member,

We have been informed of a confirmed case of COVID-19 within the school.

This letter is to inform you of the current situation and provide general advice for you.

Those children and members of staff who have been in direct prolonged contact with the confirmed case will have received an individual letter advising them to self-isolate in line with the national guidance.

If you have not received a letter identifying you as a close contact you are not advised to self-isolate on account of the case in the school. This letter is for your information only.

Although you have not been identified as a close contact I would like to take this opportunity to provide you with general information on COVID-19

General COVID information

What to do if you develop symptoms of COVID 19

If you develop symptoms of COVID-19, remain at home and arrange for a COVID test via <https://www.nhs.uk/ask-for-a-coronavirus-test> or by calling NHS 119 and inform the head teacher.

If your test is negative and you can return to school when you feel well.

If your test is positive you will need to self-isolate for **10 days** from the date when your symptoms start. All your household members must self-isolate for 14 days. The date of symptom onset is day zero.

<https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance/stay-at-home-guidance-for-households-with-possible-coronavirus-covid-19-infection>.

Symptoms

The symptoms of coronavirus (COVID-19) are:

- recent onset of new continuous cough or
- high temperature or
- a loss of, or change in, normal sense of taste or smell (anosmia).

For most people, coronavirus (COVID-19) will be a mild illness. If you are concerned about your health or the health of anyone else in your house please seek advice from your GP or NHS 111 by phoning 111.

There are things you can do to reduce the risk of getting COVID-19:

- wash your hands with soap and water often – do this for at least 20 seconds
- use hand sanitiser gel if soap and water are not available
- wash your hands as soon as you get home
- cover your mouth and nose with a tissue or your sleeve (not your hands) when you cough or sneeze
- put used tissues in the bin immediately and wash your hands afterwards

Further Information

Further information is available at <https://www.nhs.uk/conditions/coronavirus-covid-19/>

Yours sincerely,

Head Teacher

Version Control

Version & Date	Amendments	*Authors/ EoE Covid-19 Schools and Early Years MOU Development Group
V1.0, 26/05/20	Initial Draft	Oliver Mytton
V1.1, 27/05/20	First revision	Oliver Mytton, Ciceley Scarborough, Vicky Head, Lucy Hubber, Padmanabhan Badrinath, Richard Merrick, Feema Francis and Danny Showell
V1.2 29/5/20	Revised title	Oliver Mytton
V1.4 1/6/20	Second revision	Oliver Mytton, Padmanabhan Badrinath, Richard Merrick, Danny Showell, Seb Walsh, Jonathan Lewis, Carolyn Watts, Sarah Barnes and Feema Francis
V2 01/06/20	Third revision – restricting to bring roles and responsibilities together; clarified case definitions	Oliver Mytton, Deepti Kumar, Amelia Cummins, Smita Kapadia
V2.1 3/6/20	Revised flow chart. Clarified roles of LA from education perspective	Oliver Mytton, Lucy Hubber and Caroline Dawes
V2.2 4/6/20	Updated contact definition, clarified role of PHE and schools with respect to identification of contacts in the school setting; revised flow chart added	Oliver Mytton
V3	Extension to include early years settings. Greater clarity around when the local authority will lead on the public health management of situations – and that this will be with support/guidance from PHE	Oliver Mytton, Bev Griggs, Deepti Kumar, Sarah Barnes, Sue Matthews, Seb Walsh and Alexis DidierSerre
V3.1	Clarify that further education colleges included within the term ‘schools’. Streamline terminology to use two terms schools and early years settings. Statement on the different parts of PHE (HPT, East of England, national team) added.	Oliver Mytton, Sarah Barnes and Sue Matthews
V4	Suggested amendments accepted and document tidied up. This version now includes comments from LAs and input from HPT.HPT to note Section E point 2f and 2gThis version to be submitted for approval by PHE EOE IMT	Deepti Kumar
V4.1 10/08/20	Amended to include the change in self isolation advice from 7 to 10 days	Deepti Kumar

V5 16/09/20	<p>Revised to reflect the following-</p> <p>Single cases to be followed by LA</p> <p>Flowchart for schools changed to reflect this</p> <p>Risk assessment template for LA</p> <p>Contact information collection form for contacts in schools – for staff</p> <p>Contact information collection form for contacts in schools – for students</p> <p>Four template letters for students and staff – identified as contacts and not identified as contacts</p>	<p>Deepti Kumar</p> <p>Contributions from:</p> <p>Geraint Edwards, Headteacher, The Priory School, Hertfordshire</p> <p>Tania Rawle, Head of School Standards and Accountability, Children's Services, Hertfordshire County Council</p> <p>Principles discussed with Smita Kapadia, Amelia Cummins, Hamid Maghoub, Victor Aiyden</p>
V5.1 23/09/20	<p>Title changed from PHE-LA Joint MoU for COVID case(s) in schools and early years to educational settings (excluding universities)</p> <p>'School/early years' setting replaced with 'educational settings' for consistency throughout the document</p> <p>DfE Helpline included, schools advised to contact DfE/LA in accordance with local arrangements to seek advice for a single case in a school</p> <p>Risk assessment checklist updated to include additional information to help with the advice/decision</p>	<p>Feedback from LAs-</p> <p>Lucy Hubber and Ciceley Scarborough, Luton</p> <p>Sue Matthews and Louise Savoury, Hertfordshire</p> <p>Raj Lakshman, Cambridgeshire and Peterborough</p> <p>Headteacher, Westcliffe High for Girls, Essex</p> <p>MoU ratified by the EoE Covid IMT</p> <p>Input from Dorothy Gregson</p> <p>Amy White, Bedford</p> <p>Barbara Rooney, Central Bedfordshire</p> <p>Emma Dean, Cambridgeshire</p> <p>Erin Brennan-Douglas, Southend</p> <p>Sharon Jarrett, Suffolk</p> <p>Sue Matthews, Hertfordshire</p> <p>Elozona Umeh, Thurrock</p> <p>Derryth Wright, Norfolk</p>

