

INFECTION CONTROL GUIDANCE

This Infection Control Guidance is applicable school wide, including EYFS (Early Years Foundation Stage).

James Allen's Girls' School has a role to play in supporting the prevention and control of the transmission of infectious diseases. The objective of this guidance is to inform parents, pupils, and teachers about the school's approach to infection control, in order to minimise the spread of infection. There are many infectious diseases, and this guidance will not cover specifics. When a pupil or member of staff presents in school, or school are informed of a pupil or family member with an infectious disease, the most up to date guidance from UK Health Security Agency (UKHSA) will be reviewed by the School Nurses and families advised accordingly.

Advice from the UK Health Security Agency UKHSA is regularly updated, and this will be the primary source of guidance on infectious diseases for the school, along with the relevant Department for Education Advice and Guidance.

Guidance from the School Doctor may also be sought.

Arrangements at the School

- Staff will be provided with a copy of this guidance and updated with any new national infection control
 guidance which will impact on the School, as necessary
- School will be mindful of the needs of pupils and staff vulnerable to infection and the support required to minimise the risks of their contracting infection
- Encourage and support personal hygiene of pupils, staff, and visitors by providing hand washing facilities/routines and hand sanitisers around the School
- Staff will incorporate the teaching of hand hygiene routines into the curriculum and daily school activities
- Ensuring procedures are in place to safely manage the handling of spills of blood and other body fluids. See First Aid Policy.
- Maintaining dignity and confidentiality whilst ensuring the protection of all pupils, staff, and visitors.
- Cleaning in school <u>COVID-19: cleaning of non-healthcare settings</u>

Parents

It is the responsibility of the parents/guardian of a child to ensure that:

- The School is fully advised about the child's health needs on admission to the School and the School is updated with any changes throughout their school career
- The School is advised about any new cases of infection as they occur in the child's school career
- The school is advised of transmissible infections within the family/close friendship groups
- Parent/s will not send a child into school who is unwell
- Parent/s collect or arrange collection of any unwell children as soon as possible; it is not appropriate for pupils aged 15 years or younger to travel unaccompanied without written permission from parents
- Parents will not send their child back to school after a period of illness with:
- A raised temperature
- Within 48 hours of the last episode of vomiting or diarrhoea, unless the vomiting has been deemed to be related to anxiety, and does not indicate the risk of transmission.
- Until cleared by their own GP after suffering from an infectious disease, as noted on the UKHSA website

SCHOOL STAFF

- Staff are asked to inform the School Nurses of any health issues which may lead to them, as individuals, to be more vulnerable to infection
- Staff will be asked to report any concerns regarding the health of individual pupils to the School Nurses

SCHOOL NURSES

- Will seek expert advice, as necessary, from UKHSA, 111, the individual pupil's medical consultants and the School Doctor
- Will maintain a register of pupils and staff vulnerable to infection throughout the school
- Will, wherever possible, support individual pupils, and staff with vulnerabilities with schooling/working from home or attending school as appropriate, taking expert advice and guidance as necessary
- Assist in the risk assessment of school gatherings, outings, and school trips with reference to vulnerable pupils but an awareness of the potential health implications for all pupils, staff, and visitors
- Follow up on staff concerns regarding the health of individual pupils
- Request and record current immunisation records of pupils, alerting parents where possible to gaps within their child's schedule
- Facilitate and promote the NHS immunisation programme in school, to include but not be limited to the flu vaccine, Covid vaccine and teenage boosters (DTP, Men ACWY, HPV)
- Facilitate and promote the annual flu vaccination for staff in school

NOTIFIABLE DISEASE

Medical Practitioners have a statutory duty to notify the local Health Protection Team (Public Health London) of suspected cases of certain infectious diseases. If the School is made aware of multiple cases of any of these diseases the school nurses will inform PHL. Notifiable diseases include but are not limited to:

- Covid-19
- Acute hepatitis/encephalitis/infectious diarrhoea
- Legionnaires' Disease
- Measles, Mumps
- Rubella
- Meningococcal Septicaemia
- Scarlet Fever / Strep A infection
- Tuberculosis
- Whooping Cough

DEFINITIONS

How infections spread

Infections are spread in many ways but the most important of these are through:

Respiratory spread

Contact with cough or other secretions from an infected person, passing on, for example, influenza or Covid-19. This can happen by being near the infected person when they cough and then breathing in the organism; or by picking up the organism from an infected item, for example, a used tissue or on an object in the environment, and then touching one's nose or mouth.

Direct contact spread

Direct skin contact with an infecting organism such as impetigo or staphylococcal infection; this may happen in contact sports or in gyms, for example.

Gastrointestinal spread

Resulting from contact with contaminated food or water, contact with infected faeces or unwashed hands after using the toilet (Acute infectious diarrhoea).

Blood borne virus spread

By contact with infected blood or body fluids, for example, while attending to a bleeding person or injury with a used needle. Human mouths are inhabited by a wide variety of organisms, some of which can be transmitted by

bites. Human bites resulting in puncture or breaking of the skin are potential sources of exposure to blood bome infections, therefore, it is essential that they are managed promptly.

Personal Hygiene and Handwashing in School

Hand hygiene is considered one of the most important infection control measures for reducing the spread of infection. JAGS will incorporate the teaching of hand hygiene routines into the curriculum and daily school activities. Hand hygiene will also be promoted around the school, with appropriately placed posters and will provide soap at every sink, as well as hand sanitiser at appropriate locations around the school. This becomes particularly important during the winter months.

Management of Blood and other Body Fluid/Substance Exposures

Schools should have appropriate Personal Protective Equipment (for example, gloves and masks) available for staff to use when dealing with blood or body fluids/substances. Staff members and students should be familiar with, and practice recommended standard precaution practices.

Vulnerable individuals

Certain diseases and medications make an individual more vulnerable to infection these include but are not limited to:

- Autoimmune diseases
- Chronic respiratory disease including severe asthma, COPD, emphysema
- Chronic liver/kidney disease/splenic dysfunction (including Sickle Cell disease)
- Chronic neurological disease/disability
- Diabetes Type 1 diabetes, Type 2 diabetes
- Heart disease –chronic/congenital including high blood pressure
- History of Stroke, Transient Ischaemic Attack (TIA)
- Immunosuppression due to disease or treatment e.g., steroids, chemotherapy
- Morbid obesity (BMI > 40)
- Neuro disability/degenerative disease
- Pregnant women

APPENDIX ONE

Coronavirus Guidance

From 1 April 2022, the government's guidance on <u>living with COVID-19</u> replaces the DfE's <u>operational guidance</u> <u>for schools</u>.

Most of the COVID-19 specific guidance for education and childcare settings has been withdrawn from GOV.UK.

Guidance specific to education and childcare that settings should now refer to includes:

- UK Health Security Agency (UKHSA) health protection in education and childcare settings
- DfE emergency planning and response
- DfE good estate management for schools

New and updated UKHSA guidance for the general population, which will also be relevant to education and childcare settings, includes:

- guidance for people with symptoms of a respiratory infection including COVID-19, or a positive test result for COVID-19
- living safely with respiratory infections, including COVID-19
- ventilation of indoor spaces to reduce the spread of COVID-19 and other respiratory infections
- COVID-19 guidance for people whose immune system means they are at higher risk

The school will follow the UK Health Security Agency guidance, the NHS guidance, and the Department for Education guidance documents here: <u>UK Health Security Agency</u>

Department for Education

NHS

Effective Infection Protection and Control

Ensuring that pupils, staff, and other adults do not come into the school if they have coronavirus (COVID-19) symptoms, are essential actions to reduce the risk in schools and further drive down transmission of coronavirus (COVID-19)..

From *guidance for people with symptoms of a respiratory infection including COVID-19, or a positive test result for COVID-19*Symptoms of respiratory infections, including COVID-19

Respiratory infections can spread easily between people. It is important to be aware of symptoms so you can take action to reduce the risk of spreading your infection to other people.

The symptoms of COVID-19 and other respiratory infections are very similar. It is not possible to tell if you have COVID-19, flu or another respiratory infection based on symptoms alone. Most people with COVID-19 and other respiratory infections will have a relatively mild illness, especially if they have been vaccinated.

If you have symptoms of a respiratory infection, such as COVID-19, and you have a high temperature or you do not feel well enough to go to work or carry out normal activities, you are advised to try to stay at home and avoid contact with other people.

Symptoms of COVID-19, flu and common respiratory infections include:

- continuous cough
- high temperature, fever, or chills
- loss of, or change in, your normal sense of taste or smell
- shortness of breath
- unexplained tiredness, lack of energy
- muscle aches or pains that are not due to exercise
- not wanting to eat or not feeling hungry
- headache that is unusual or longer lasting than usual
- sore throat, stuffy or runny nose
- diarrhoea, feeling sick or being sick

If you are feeling unwell with these symptoms, you should get plenty of rest and drink water to keep hydrated. You can use medications such as paracetamol to help with your symptoms. Antibiotics are not recommended for viral respiratory infections because they will not relieve your symptoms or speed up your recovery.

In some cases, you might continue to have a cough or feel tired after your other symptoms have improved, but this does not mean that you are still infectious.

You can find information about these symptoms on the NHS website.

If you are concerned about your symptoms, or they are worsening, seek medical advice by contacting NHS 111. In an emergency dial 999.

What to do if you have symptoms of a respiratory infection, including COVID-19, and have not taken a COVID-19 test

Try to stay at home and avoid contact with other people

If you have symptoms of a respiratory infection, such as COVID-19, and you have a high temperature or do not feel well enough to go to work or carry out normal activities, try to stay at home and avoid contact with other people, until you no longer have a high temperature (if you had one) or until you no longer feel unwell.

It is particularly important to avoid close contact with anyone who you know is at higher risk of becoming seriously unwell if they are infected with COVID-19 and other respiratory infections, especially those whose <u>immune system means that they are at higher risk of serious illness, despite vaccination</u>.

The following actions will reduce the chance of passing on your infection to others:

- wearing a well-fitting face covering made with multiple layers or a surgical face mask
- avoiding crowded places such as public transport, large social gatherings, or anywhere that is enclosed or poorly ventilated

taking any exercise outdoors in places where you will not have close contact with other people

 covering your mouth and nose when you cough or sneeze; wash your hands frequently with soap and water for 20 seconds or use hand sanitiser after coughing, sneezing, and blowing your nose and before you eat or

handle food; avoid touching your face

Reduce the spread of infection in your household

While you are unwell there is a high risk of passing your infection to others in your household. These are <u>simple</u> things you can do to help prevent the spread:

try to keep your distance from people you live with

• in shared areas wear a well-fitting face covering made with multiple layers or a surgical face mask, especially

if you live with people whose immune system means that they are at higher risk of serious illness, despite vaccination

• ventilate rooms you have been in by opening windows and leaving them open for at least 10 minutes after you

have left the room

wash your hands regularly and cover your mouth and nose when coughing or sneezing

regularly clean frequently touched surfaces, such as door handles and remote controls, and shared areas such

as kitchens and bathrooms

• advise anyone that does need to come into your home that you have symptoms, so they can take precautions

to protect themselves such as wearing a well-fitting face covering or a surgical face mask, keeping their

distance if they can, and washing their hands regularly

<u>GermDefence</u> is a website that can help you identify simple ways to protect yourself and others in your household from COVID-19 and other viruses. People who use GermDefence are less likely to catch flu and **other infections**

and are less likely to spread them at home.

There is further guidance on protecting yourself and others in living safely with respiratory infections, including

COVID-19.

Children and young people (aged 18 years and under) who have symptoms of a respiratory infection, including

COVID-19

Respiratory infections are common in children and young people, particularly during the winter months.

Symptoms can be caused by several respiratory infections including the common cold, COVID-19, and RSV.

For most children and young people, these illnesses will not be serious, and they will soon recover following rest

and plenty of fluids.

Very few children and young people with respiratory infections become seriously unwell. This is also true for children and young people with long-term conditions. Some children under 2, especially those born prematurely

or with a heart condition, can be more seriously unwell from RSV.

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Attending education is hugely important for children and young people's health and their future.

When children and young people with symptoms should stay at home and when they can return to education

Children and young people with mild symptoms such as a runny nose, sore throat, or slight cough, who are otherwise well, can continue to attend their education setting.

Children and young people who are unwell and have a high temperature should stay at home and avoid contact with other people, where they can. They can go back to school, college, or childcare, and resume normal activities when they no longer have a high temperature, and they are well enough to attend.

All children and young people with respiratory symptoms should be encouraged to cover their mouth and nose with a disposable tissue when coughing and/or sneezing and to wash their hands after using or disposing of tissues.

It can be difficult to know when to seek help if your child is unwell. If you are worried about your child, especially if they are aged under 2 years old, then you should seek medical help.

What to do if you have a positive COVID-19 test result – adults

Try to stay at home and avoid contact with other people

If you have a positive COVID-19 test result, it is very likely that you have COVID-19 even if you do not have any symptoms. You can pass on the infection to others, even if you have no symptoms.

Many people with COVID-19 will no longer be infectious to others after 5 days. If you have a positive COVID-19 test result, try to stay at home and avoid contact with other people for 5 days after the day you took your test. There is different advice for children and young people aged 18. They are advised to stay at home for 3days after the day they took their test but for longer if displaying a raised temperature.

During this period there are actions you can take to reduce the risk of passing COVID-19 on to others.

Try to work from home if you can. If you are unable to work from home, talk to your employer about options available to you.

If you have been asked to attend a medical or dental appointment in person, contact your healthcare provider and let them know about your positive test result.

You may wish to ask friends, family, or neighbours to get food and other essentials for you.

At the end of this period, if you have a high temperature or feel unwell, try to follow this advice until you feel well enough to resume normal activities and you no longer have a high temperature if you had one.

Although many people will no longer be infectious to others after 5 days, some people may be infectious to other people for up to 10 days from the start of their infection. You should avoid meeting people at higher risk

of becoming seriously unwell from COVID-19, especially those whose immune system means that they are at higher risk of serious illness from COVID-19, despite vaccination, for 10 days after the day you took your test.

If you leave your home

If you leave your home during the 5 days after your positive test result the following steps will reduce the chance of passing on COVID-19 to others:

- wear a well-fitting face covering made with multiple layers or a surgical face mask
- avoid crowded places such as public transport, large social gatherings, or anywhere that is enclosed or poorly ventilated
- take any exercise outdoors in places where you will not have close contact with other people
- cover your mouth and nose when you cough or sneeze; wash your hands frequently with soap and water for 20 seconds or use hand sanitiser after coughing, sneezing, and blowing your nose and before you eat or handle food; avoid touching your face

Reduce the spread of infection in your household

While you are infectious there is a high risk of passing your infection to others in your household. These are simple things you can do to help prevent the spread:

- try to keep your distance from people you live with
- in shared areas wear a well-fitting face covering made with multiple layers or a surgical face mask, especially if you live with people whose <u>immune system means that they are at higher risk of serious illness, despite</u> vaccination
- ventilate rooms you have been in by opening windows and leaving them open for at least 10 minutes after you have left the room
- wash your hands regularly and cover your mouth and nose when coughing or sneezing
- regularly clean frequently touched surfaces, such as door handles and remote controls, and shared areas such as kitchens and bathrooms
- advise anyone that does need to come into your home that you have a positive test result, so they can take
 precautions to protect themselves such as wearing a well-fitting face covering or a surgical face mask, keeping
 their distance if they can, and washing their hands regularly

<u>GermDefence</u> is a website that can help you identify simple ways to protect yourself and others in your household from COVID-19 and other viruses. People who use GermDefence are less likely to catch flu and other infections and are less likely to spread them at home.

What to do if you are a close contact of someone who has had a positive test result for COVID-19

People who live in the same household as someone with COVID-19 are at the highest risk of becoming infected because they are most likely to have prolonged close contact. People who stayed overnight in the household of someone with COVID-19 while they were infectious are also at high risk.

If you are a household or overnight contact of someone who has had a positive COVID -19 test result it can take up to 10 days for your infection to develop. It is possible to pass on COVID-19 to others, even if you have no symptoms.

You can reduce the risk to other people by taking the following steps:

- avoid contact with anyone you know who is at <u>higher risk of becoming severely unwell</u> if they are infected with COVID-19, especially <u>those whose immune system means they are at higher risk of serious illness from COVID-19,</u> <u>despite vaccination</u>
- limit close contact with other people outside your household, especially in crowded, enclosed or poorly ventilated spaces
- wear a well-fitting face covering made with multiple layers or a surgical face mask if you do need to have close contact with other people, or you are in a crowded place
- wash your hands frequently with soap and water or use hand sanitiser

If you develop symptoms of a respiratory infection, try to stay at home and avoid, contact with other people, and follow the guidance for people with symptoms.

If you are a contact of someone with COVID-19 but do not live with them or did not stay in their household overnight, you are at lower risk of becoming infected. There is guidance on protecting yourself and others in living safely with respiratory infections, including COVID-19.

Children and young people aged 18 years and under who have a positive test result

It is not recommended that children and young people are tested for COVID-19 unless directed to by a health professional.

If a child or young person has a positive COVID-19 test result they should try to stay at home and avoid contact with other people for 3 days after the day they took the test, if they can. After 3 days, if they feel well and do not have a high temperature, the risk of passing the infection on to others is much lower. This is because children and young people tend to be infectious to other people for less time than adults.

Children and young people who usually go to school, college, or childcare and who live with someone who has a positive COVID-19 test result should continue to attend as normal.

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APPENDIX TWO

Personal Protective Equipment (PPE)

Currently there is no indication that staff should wear PPE in schools during normal school activities if good hand hygiene, social distancing and a high standard of social cleaning is maintained. However, if you have a symptomatic pupil i.e. an unwell child with a raised temperature or vomiting/diarrhoea or cough, the parents will be contacted to collect the pupil as soon as possible.

Whilst awaiting collection the pupil should be "isolated" in one of the designated areas of the school and the staff waiting with the pupil should apply PPE.

Procedure – How to safely put on PPE

- Reassure the pupil that this is just routine for any unwell pupils, it may be alarming for them to see staff in PPE
- Wash your hands or if a sink is not easily accessible, apply hand sanitiser
- Put on a disposable apron tying at the back
- Put on a disposable face mask elastic around the ears. Pinch the metal support to mould around nose and pull the bottom of the face mask to ensure it is covering all your chin. Do not touch the mask once in place. If the mask becomes wet/damp this should be changed
- Apply eye visor, if available
- Put on disposable gloves ensure this covers your watch/bracelet or ideally remove

It may be appropriate depending on the situation to offer the pupil a facemask – they may feel more comfortable wearing a mask like you.

Safely removing PPE

All equipment needs to be disposed of in a safe manner which will protect you and others.

Keep the PPE on until the pupil has been collected from School.

PPE should be removed in an area where you have access to a bin and handwashing facilities.

- Remove apron pulling from the front the ties at the back will break do not undo the ties. Discard the used apron in a bin using the foot pedal to open the bin
- Remove gloves peel back first glove from the wrist drop the used glove into the palm of the other gloved hand and repeat the procedure. The second glove is removed with the first inside the palm and both gloves end up inside out and together drop into the open bin
- Wash hands thoroughly using soap and water (sing happy Birthday twice in your head!)
- Remove your visor if wearing
- Discard the used visor in a bin using the foot pedal to open the bin
- Remove your mask and dispose
- Wash hands again
- Inform school keepers the area needs to be cleaned and rubbish safely disposed of.

APPENDIX THREE

From the Government Guidance: Government Publications health protection in schools and other childcare facilities/exclusion <u>table</u>

This guidance refers to public health exclusions to indicate the period an individual should not attend a setting to reduce the risk of transmission during the infectious stage. This is different to 'exclusion' as used in an educational sense.

Infection	Exclusion period	Comments
Athlete's foot	None	Children should not be barefoot at their setting (for example in changing areas) and should not share towels, socks, or shoes with others.
Chickenpox	At least 5 days from onset of rash and until all blisters have crusted over	Pregnant staff contacts should consult with their GP or midwife
Cold sores (herpes simplex)	None	Avoid kissing and contact with the sores
Conjunctivitis	None	If an outbreak or cluster occurs, consult your local health protection team (HPT)
Respiratory infections including coronavirus (COVID-19)	Children and young people should not attend if they have a high temperature and are unwell Children and young people who have a positive test result for COVID-19 should not attend the setting for 3 days after the day of the test	Children with mild symptoms such as runny nose, and headache who are otherwise well can continue to attend their setting.
Diarrhoea and vomiting	Staff and students can return 48 hours after diarrhoea and vomiting have stopped	If a particular cause of the diarrhoea and vomiting is identified there may be additional exclusion advice for example E. coli STEC and hep A For more information see chapter 3

Diptheria*	Exclusion is essential. Always consult with your <u>UKHSA</u>	Preventable by vaccination. Family contacts must be
	<u>HPT</u>	excluded until cleared to return by your local HPT
Flu (influenza) or influenza like illness	Until recovered	Report outbreaks to your local HPT
		For more information see chapter 3
Glandular fever	None	
Hand foot and mouth	None	Contact your local HPT if many children are affected. Exclusion may be considered in some circumstances
Head lice	None	
Hepatitis A	Exclude until 7 days after onset of jaundice (or 7 days after symptom onset if no jaundice)	In an outbreak of Hepatitis, A, your local HPT will advise on control measures
Hepatitis B, C, HIV	None	Hepatitis B and C and HIV are blood borne viruses that are not infectious through casual
		contact. Contact your UKHSA
		HPT for more advice
Impetigo	Until lesions are crusted or healed, or 48 hours after starting antibiotic treatment	Antibiotic treatment speeds healing and reduces the infectious period
Measles	4 days from onset of rash and well enough	Preventable by vaccination with 2 doses of MMR Promote MMR for all pupils and staff. Pregnant staff contacts should seek prompt advice from their GP or midwife
Meningococcal meningitis* or septicaemia*	Until recovered	Meningitis ACWY and B are preventable by vaccination. Your local HPT will advise on any action needed
Meningitis* due to other bacteria	Until recovered	Hib and pneumococcal meningitis are preventable by vaccination. Your <u>UKHSA HPT</u> will advise on any action needed
Meningitis viral	None	Milder illness than bacterial meningitis. Siblings and other

		close contacts of a case need not be excluded
MRSA	None	Good hygiene, in particular handwashing and environmental cleaning, are important to minimise spread. Contact your <u>UKHSA HPT</u> for more
Mumps*	5 days after onset of swelling	Preventable by vaccination with 2 doses of MMR. Promote MMR for all pupils and staff
Ringworm	Not usually required	Treatment is needed
Rubella* (German measles)	5 days from onset of rash	Preventable by vaccination with 2 doses of MMR. Promote MMR for all pupils and staff. Pregnant staff contacts should seek prompt advice from their GP or midwife
Scabies	Can return after first treatment	Household and close contacts require treatment at the same time
Scarlet fever*	Exclude until 24 hours after starting antibiotic treatment	A person is infectious for 2 to 3 weeks if antibiotics are not administered. In the event of 2 or more suspected cases, please contact your UKHSA HPT
Slapped cheek/Fifth disease/Parvovirus B19	None (once rash has developed)	Pregnant contacts of case should consult with their GP or midwife
Threadworms	None	Treatment recommended for child and household
Tonsillitis	None	There are many causes, but most cases are due to viruses and do not need or respond to an antibiotic treatment
Tuberculosis* (TB)	Until at least 2 weeks after the start of effective antibiotic treatment (if pulmonary TB Exclusion not required for nonpulmonary or latent TB infection Always consult your local HPT before disseminating	Only pulmonary (lung) TB is infectious to others, needs close, prolonged contact to spread Your local HPT will organise any contact tracing

	information to staff, parents, and carers	
Warts and verrucae	None	Verrucae should be covered in swimming pools, gyms and changing rooms
Whooping cough (pertussis)*	2 days from starting antibiotic treatment, or 21 days from onset of symptoms if no antibiotics	Preventable by vaccination. After treatment, non- infectious coughing may continue for many weeks. Your local HPT will organise any contact tracing

^{*}denotes a notifiable disease. Registered medical practitioners in England and Wales have a statutory duty to notify their local authority or UKHSA health protection team of suspected cases of certain infectious diseases. All laboratories in England performing a primary diagnostic role must notify UKHSA when they confirm a notifiable organism.