



Department
for Education

Schools COVID-19 operational guidance

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Summary

This guidance explains the actions school leaders should take to manage coronavirus (COVID-19) in their school. This includes public health advice, endorsed by the United Kingdom Health Security Agency (UKHSA).

It is for leaders and staff in:

- primary schools
- secondary schools (including sixth forms)
- special schools, special post-16 providers and alternative provision
- 16 to 19 academies
- infant, junior, middle, upper schools
- boarding schools

We expect independent schools to follow the control measures set out in this guidance in the same way as state-funded schools, and health and safety legislation applies equally to independent schools.

Where this guidance refers to schools, that does not include maintained nursery schools or pre-reception classes.

Separate guidance is available for:

- [early years and childcare settings](#)
- [further education colleges and providers](#)

Additional operational guidance is also available for [special schools, special post-16 providers and alternative provision](#).

Schools and trusts should work closely with parents and carers (future references to parents should be read as including carers), staff and unions when agreeing the best approaches for their circumstances.

We use the terms ‘must’ and ‘should’ throughout the guidance. We use the term ‘must’ when the person in question is legally required to do something and ‘should’ when the advice set out should be followed unless there is a good reason not to.

Overview

On 21 February the Prime Minister set out the next phase of the Government’s COVID-19 response. COVID-19 continues to be a virus that we learn to live with and the imperative to reduce the disruption to children and young people’s education remains.

Our priority is to support you to deliver face-to-face, high-quality education to all pupils. The evidence is clear that being out of education causes significant harm to educational attainment, life chances and mental and physical health.

We have worked closely with the Department of Health and Social Care (DHSC) and the United Kingdom Health Security Agency (UKHSA) to revise this guidance.

Changes to the previous version

Changes to the guidance since its 19 January 2021 publication include:

- Removing the advice on bubbles and mixing
- Update to Tracing close contacts and isolation section to clarify that from 24 February, the guidance in this document will be replaced by UKHSA guidance
- Update to Asymptomatic testing section to reflect that from 21 February, twice weekly testing in mainstream schools will no longer be advised
- Update to Educational visits section to confirm that for international educational visits, schools should refer to the [Foreign, Commonwealth and Development Office travel advice](#)

Risk assessment

You must comply with health and safety law and put in place proportionate control measures.

You must regularly review and update your risk assessments - treating them as 'living documents' - as the circumstances in your school and the public health advice changes. This includes having active arrangements in place to monitor whether the controls are effective and working as planned.

For more information on what is required of school leaders in relation to health and safety risk assessments and managing risk, see the [health and safety advice for schools](#).

Tracing close contacts and isolation

The guidance on tracing and close contacts and isolation below applies until 23 February. From 24 February, schools should follow the published UKHSA guidance.

Close contacts in schools are now identified by [NHS Test and Trace](#) and education settings will no longer be expected to undertake contact tracing.

As with positive cases in any other setting, NHS Test and Trace will work with the positive case and/or their parent to identify close contacts. Contacts from a school setting will only be traced by NHS Test and Trace where the positive case or their parent specifically identifies the individual as being a close contact. This is likely to be a small number of individuals who would be most at risk of contracting COVID-19 due to the

nature of the close contact. You may be contacted in exceptional cases to help with identifying close contacts, as currently happens in managing other infectious diseases.

From 14 December 2021, adults who are fully vaccinated and all children and young people aged between 5 and 18 years and 6 months identified as a contact of someone with COVID-19 are strongly advised to take a LFD test every day for 7 days and continue to attend their setting as normal, unless they have a positive test result. Daily testing of close contacts applies to all contacts who are:

- fully vaccinated adults – people who have had 2 doses of an approved vaccine
- all children and young people aged 5 to 18 years and 6 months, regardless of their vaccination status
- people who are not able to get vaccinated for medical reasons
- people taking part, or have taken part, in an approved clinical trial for a COVID-19 vaccine

Children under 5 years who are identified as close contacts are exempt from self-isolation and do not need to take part in daily testing of close contacts. They are advised to take a PCR test if the positive case is in their household.

Pupils with SEND identified as close contacts should be supported by their school and their families to agree the most appropriate route for testing including, where appropriate, additional support to assist swabbing. For further information please see [SEND guidance](#).

Further information is available in [NHS Test and Trace: what to do if you are contacted](#) and in the [stay at home: guidance for households with possible or confirmed coronavirus \(COVID-19\) infection](#).

18-year-olds are treated in the same way as children until 6 months after their 18th birthday, to allow them the opportunity to get fully vaccinated. At which point, they will be subject to the same rules as adults and so if they choose not to get vaccinated, they will need to self-isolate if identified as a close contact.

Settings will continue to have a role in working with health protection teams in the case of a local outbreak. If there is a substantial increase in the number of positive cases in a setting (see [Stepping measures up and down](#) section for more information) or if central government offers the area an enhanced response package, a director of public health might advise a setting to temporarily reintroduce some control measures.

Face coverings

Face coverings are no longer advised for pupils, staff and visitors in classrooms or communal areas.

Staff and pupils should follow [wider advice on face coverings](#) outside of school, including on transport to and from school.

In circumstances where face coverings are recommended

A director of public health might advise you that face coverings should temporarily be worn in communal areas or classrooms (by pupils, staff and visitors, unless exempt). You should make sure your contingency plans cover this possibility. (See the [stepping measures up and down](#) section).

In these circumstances, transparent face coverings, which may assist communication with someone who relies on lip reading, clear sound or facial expression to communicate, can also be worn. Transparent face coverings may be effective in reducing the spread of COVID-19. However, the evidence to support this is currently very limited. Face coverings (whether transparent or cloth) should fit securely around the face to cover the nose and mouth and be made with a breathable material capable of filtering airborne particles.

The main benefit from a transparent face covering is that they can aid communication, for example enabling lip-reading or allowing for the full visibility of facial expressions, but this should be considered alongside the comfort and breathability of a face covering that contains plastic, which may mean that the face covering is less breathable than layers of cloth.

Face visors or shields can be worn by those exempt from wearing a face covering but they are not an equivalent alternative in terms of source control of virus transmission. They may protect the wearer against droplet spread in specific circumstances but are unlikely to be effective in preventing the escape of smaller respiratory particles when used without an additional face covering. They should only be used after carrying out a risk assessment for the specific situation and should always be cleaned appropriately.

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

Schools, as employers, have a duty to comply with the Equality Act 2010 which includes making reasonable adjustments for disabled staff. They also have a duty to make reasonable adjustments for disabled pupils, to support them to access education successfully.

No pupil should be denied education on the grounds that they are, or are not, wearing a face covering.

Stepping measures up and down

You should have contingency plans outlining how you would operate if you need to take extra measures in exceptional circumstances. Given the detrimental impact that restrictions on education can have on children and young people, any measures in schools should only ever be considered as a last resort, kept to the minimum number of schools or groups possible, and for the shortest amount of time possible.

Information on what circumstances might lead you to consider taking additional action, and the steps you should work through, can be found in the [contingency framework](#).

Control measures

You should:

1. Ensure good hygiene for everyone.
2. Maintain appropriate cleaning regimes.
3. Keep occupied spaces well ventilated.
4. Follow public health advice on testing, self-isolation and managing confirmed cases of COVID-19.

1. Ensure good hygiene for everyone

Hand hygiene

Frequent and thorough hand cleaning should now be regular practice. You should continue to ensure that pupils clean their hands regularly. This can be done with soap and water or hand sanitiser.

Respiratory hygiene

The ‘catch it, bin it, kill it’ approach continues to be very important.

The [e-Bug COVID-19 website](#) contains free resources for you, including materials to encourage good hand and respiratory hygiene.

Use of personal protective equipment (PPE)

Most staff in schools will not require PPE beyond what they would normally need for their work. The guidance on the [use of PPE in education, childcare and children's social care settings](#) provides more information on the use of PPE for COVID-19.

2. Maintain appropriate cleaning regimes, using standard products such as detergents

You should put in place and maintain an appropriate cleaning schedule. This should include regular cleaning of areas and equipment (for example, twice per day), with a particular focus on frequently touched surfaces.

UKHSA has published guidance on the [cleaning of non-healthcare settings](#).

3. Keep occupied spaces well ventilated

When your school is in operation, it is important to ensure it is well ventilated and that a comfortable teaching environment is maintained.

You should identify any poorly ventilated spaces as part of your risk assessment and take steps to improve fresh air flow in these areas.

Mechanical ventilation is a system that uses a fan to draw fresh air or extract air from a room. These should be adjusted to increase the ventilation rate wherever possible and checked to confirm that normal operation meets current guidance and that only fresh outside air is circulated.

If possible, systems should be adjusted to full fresh air or, if this is not possible, then systems should be operated as normal as long as they are within a single room and supplemented by an outdoor air supply.

Where mechanical ventilation systems exist, you should ensure that they are maintained in accordance with the manufacturers' recommendations.

Opening external windows can improve natural ventilation, and in addition, opening internal doors can also assist with creating a throughput of air. If necessary, external opening doors may also be used (if they are not fire doors and where safe to do so).

You should balance the need for increased ventilation while maintaining a comfortable temperature.

The [Health and Safety Executive guidance on air conditioning and ventilation during the COVID-19 pandemic](#) and [CIBSE COVID-19 advice](#) provides more information.

CO₂ monitors have been provided to state-funded education settings, so staff can quickly identify where ventilation needs to be improved.

4. Follow public health advice on testing, self-isolation and managing confirmed cases of COVID-19

When an individual develops COVID-19 symptoms or has a positive test

The guidance in this section on when an individual develops COVID symptoms or has a positive test applies until 23 February. From 24 February, schools should follow the published UKHSA guidance.

Pupils, staff and other adults should follow public health advice on [when to self-isolate and what to do](#). They should not come into school if they have symptoms, have had a positive test result or other reasons requiring them to stay at home due to the risk of them passing on COVID-19 (for example, they are required to quarantine).

If anyone in your school develops [COVID-19 symptoms](#), however mild, you should send them home and they should follow public health advice.

If a pupil in a boarding school shows symptoms and/or tests positive, they should usually self-isolate in their boarding school. Only in exceptional circumstances, where there is an overriding health or safeguarding issue, should a pupil self-isolate away from school.

For everyone with symptoms, they should avoid using public transport and, wherever possible, be collected by a member of their family or household.

If a pupil is awaiting collection, they should be left in a room on their own if possible and safe to do so. A window should be opened for fresh air ventilation if possible.

Appropriate PPE should also be used if close contact is necessary. Further information on this can be found in the [use of PPE in education, childcare and children's social care settings](#) guidance. Any rooms they use should be cleaned after they have left.

The household (including any siblings) should follow the UKHSA [stay at home guidance for households with possible or confirmed coronavirus \(COVID-19\) infection](#).

Pupils and staff should return to school as soon as isolation rules allow.

Asymptomatic testing

From 21 February, staff and pupils in mainstream secondary schools will not be expected to continue taking part in regular asymptomatic testing and should follow asymptomatic testing advice for the general population. Further information is available in the NHS [get tested for COVID-19 guidance](#).

In the event of an outbreak, a school may also be advised by their local health team or director of public health to undertake testing for staff and students of secondary age and above for a period of time.

Staff and pupils in specialist SEND settings, Alternative Provision, and SEND units in mainstream schools are advised to continue regular twice weekly testing. For further information, see [Special schools and other specialist settings: coronavirus \(COVID-19\)](#).

Those formerly considered to be clinically extremely vulnerable

Following expert clinical advice and the successful rollout of the COVID-19 vaccine programme, people previously considered to be particularly vulnerable, clinically extremely vulnerable (CEV), and high or higher-risk are not being advised to shield again. Children and young people who were previously identified as being in one of these groups, are advised to continue to follow the guidance contained in Coronavirus: how to stay safe and help prevent the spread. Children and young people over the age of 12 with a weakened immune system should follow [DHSC and UKHSA advice](#) for people whose immune system means they are at higher risk from Covid-19.

Children and young people previously considered CEV should attend school and should follow the same [COVID-19 guidance](#) as the rest of the population. In some circumstances, a child or young person may have received personal advice from their specialist or clinician on additional precautions to take and they should continue to follow that advice.

Vaccination

We recommend all school staff and eligible pupils take up the offer of a vaccine.

You can find out more about the in-school vaccination programme in [COVID-19 vaccination programme for children and young people guidance for schools](#).

Mandatory certification

Mandatory certification is no longer in place and so venues and events are not required by law to use the NHS COVID Pass as a condition of entry, but some may do so voluntarily. Further information on this is available in the guidance on [using your NHS COVID-19 Pass for travel abroad and at venues and settings in England](#).

You should not use the NHS COVID Pass as a condition of entry for education or related activities such as exams, teaching, extra-curricular activities or any other day-to-day activities that are part of education or training.

Welcoming children back to school

In most cases, parents and carers will agree that a pupil with the key symptoms of COVID-19 should not attend the school, given the potential risk to others.

If a parent or carer insists on a pupil attending your school where they have a confirmed or suspected case of COVID-19, you can take the decision to refuse the pupil if, in your

reasonable judgement, it is necessary to protect other pupils and staff from possible infection with COVID-19.

Attendance

School attendance is mandatory for all pupils of compulsory school age and it is a priority to ensure that as many children as possible regularly attend school.

Where a child is self-isolating (awaiting a test result) or in quarantine because of COVID-19, they should be recorded as code X (not attending in circumstances related to coronavirus). Where they are unable to attend because they have a confirmed case of COVID-19 they should be recorded as code I (illness).

For pupils abroad who are facing challenges to return, code X is unlikely to apply. In some specific cases, code Y (unable to attend due to exceptional circumstances) will apply. Further guidance about the use of codes is provided in the [school attendance guidance](#).

Vulnerable children

Where pupils who are self-isolating are within our [definition of vulnerable](#), it is very important that you put systems in place to keep in contact with them, particularly if they have a social worker. Some children may be vulnerable who are not officially in statutory systems and schools should seek to support any children who they believe may have challenging circumstances at home.

When a vulnerable pupil is self-isolating, you should:

- notify their social worker (if they have one) and, for looked-after children, the local authority virtual school head
- agree with the social worker the best way to maintain contact and offer support

You should have procedures in place to:

- check if a vulnerable pupil is able to access remote education support
- support them to access it (as far as possible)
- regularly check if they are accessing remote education
- keep in contact with them to check their wellbeing and refer onto other services if additional support is needed.

Travel and quarantine

All children and staff travelling to England must adhere to government travel advice in travel to England from another country during coronavirus (COVID-19).

Parents travelling abroad should bear in mind the impact on their child's education which may result from any requirement to quarantine or isolate upon return.

Where pupils travel from abroad to attend a boarding school, you will need to explain the rules to pupils and their parents before they travel to the UK.

Additional guidance has been issued on [boarding school students quarantine and testing arrangements](#).

Remote education

Where appropriate, you should support those who are self-isolating because they have tested positive to work or learn from home if they are well enough to do so. Schools subject to the [remote education temporary continuity direction](#) are required to provide remote education to pupils covered by the direction where their attendance would be contrary to government guidance or legislation around COVID-19.

You should maintain your capacity to deliver high-quality remote education across this academic year, including for pupils who are abroad, and facing challenges to return due to COVID-19 travel restrictions, for the period they are abroad.

Independent Schools (not including academies) are only covered by the remote education temporary continuity direction in relation to state-funded pupils in their schools. However, they are still expected to meet the [Independent School Standards](#) in full at all times.

The remote education provided should be equivalent in length to the core teaching pupils would receive in school.

You should work collaboratively with families and put in place reasonable adjustments so that pupils with special educational needs and disabilities (SEND) can successfully access remote education.

Full expectations for remote education, support and resources can be found on the [get help with remote education service](#).

Education recovery

We have announced a number of programmes and activities to support pupils to make up education missed as a result of the pandemic. Further information is available on [education recovery support](#). Specifically for schools, the document includes further information on:

- [recovery premium](#)
- tutoring (including the [National Tutoring Programme](#) and [16 to 19 tuition fund](#))
- teacher training opportunities

- curriculum resources
- [curriculum planning](#)
- specialist settings
- wider continuous professional development resources, including to support teacher wellbeing and subject-specific teaching

Pupil wellbeing and support

Some pupils may be experiencing a variety of emotions in response to the COVID-19 pandemic, such as anxiety, stress or low mood. You can access useful links and sources of support on [promoting and supporting mental health and wellbeing in schools](#).

School workforce

School leaders are best placed to determine the workforce required to meet the needs of their pupils.

Following expert clinical advice and the successful rollout of the COVID-19 vaccine programme, people previously considered to be particularly vulnerable, clinically extremely vulnerable (CEV), and high or higher-risk are not being advised to shield again. If staff were previously identified as being in one of these groups, they are advised to continue to follow the guidance contained in [Coronavirus: how to stay safe and help prevent the spread](#). Staff with a weakened immune system should follow [DHSC and UKHSA advice](#) for people whose immune system means they are at higher risk from Covid-19.

In some circumstances, staff may have received personal advice from their specialist or clinician on additional precautions to take and they should continue to follow that advice. Whilst individual risk assessments are not required, employers are expected to discuss any concerns that people previously considered CEV may have.

Employers will need to follow this specific [guidance for pregnant employees](#). [COVID-19 vaccination: a guide for women of childbearing age, pregnant or breastfeeding](#) contains further advice on vaccination. Your workplace risk assessment should already consider any risks to female employees of childbearing age and, in particular, risks to new and expectant mothers. You should also consider the needs of pregnant pupils.

Employers should be able to explain the measures they have in place to keep staff safe at work. The Health and Safety Executive (HSE) has published guidance on [protecting vulnerable workers](#), including advice for employers and employees on [how to talk about reducing risks in the workplace](#). Employers should discuss concerns with staff.

School meals

You should continue to provide free school meal support to any pupils who are eligible for benefits-related free school meals and who are learning at home during term time.

More information on [providing school meals during the COVID-19 pandemic](#) is available.

Educational visits

Educational visits should be subject to risk assessments as normal and reflect any public health advice or in-country advice of the international destination. [General guidance on educational visits](#) is available and is supported by specialist advice from the [Outdoor Education Advisory Panel \(OEAP\)](#).

For international educational visits, you should refer to the [Foreign, Commonwealth and Development Office travel advice](#) and the guidance on international travel before booking and travelling to make sure that the school group meet any entry and in country requirements especially in relation to vaccinations. More information can be found [here](#) and in the guidance on [health and safety on educational visits](#).

You are advised to ensure that all bookings have adequate financial protection in place. You should speak to either your visit provider, commercial insurance company, or the risk protection arrangement (RPA) to assess the protection available. Independent advice on insurance cover and options can be sought from the British Insurance Brokers' Association (BIBA) or Association of British Insurers (ABI).

Wraparound provision and extra-curricular activity

More information on planning extra-curricular provision can be found in the guidance for [providers who run community activities, holiday clubs, after-school clubs, tuition and other out-of-school provision for children](#).

Inspection

For state-funded schools, Ofsted has resumed its programme of routine inspections and will aim to inspect every state-funded school within the next 5 academic years. This will mean an extension of up to 6 terms in the inspection interval for those schools not inspected since the start of the pandemic. Within the 5-year period, Ofsted will continue to prioritise schools most in need of inspection, particularly those with the lowest Ofsted grades. It will also prioritise outstanding schools that were previously exempt from routine inspection that have gone the longest without a visit.

For independent schools (other than academies), both Ofsted and the Independent Schools Inspectorate (ISI) have resumed their programme of routine inspections and they will complete the current cycle of standard inspections – which was delayed by the pandemic – in 2022.

Accountability expectations

We will not publish data based on exam and assessment results from summer 2021 in performance tables and you will not be held to account for this data. We will publish Key Stage 4 and 16 to 18 subject entries and destinations data at school and college level in performance tables in autumn 2021.

For the academic year 2021 to 2022, results from qualifications achieved at Key Stage 4 and post 16 will be published at school and college level on performance tables.

We will not publish the results of Key Stage 2 primary assessments. We will still produce the normal suite of KS2 accountability measures and share these securely with schools, academy trusts, local authorities and Ofsted.

For further information, see [COVID-19: school and college accountability](#).



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