Updated FAQs for School Principals or Designated Contact Person

This leaflet was developed for school principals or designated contact person by the HSE in collaboration with the Department of Education.

New or significantly changed information:

Close contact testing:

Q. What is the period of restricted movements required of a pupil/student or staff member deemed to be a “close contact”?

A. Pupils/students will be asked to restrict their movements. In line with national recommendations for close contacts, testing is offered at Day 0 and Day 10. If a close contact received a ‘not detected’ result from both tests, then they can end their restricted movements and return to school. If they have a ‘detected’ test result, they will then be managed as a case of COVID-19. If they do not undertake COVID-19 testing, then they are required to restrict their movements for a full 14 days. Anyone who is a close contact of a person that tested positive for COVID-19 has to restrict their movements and follow the process as above. Restricted movements start from the last date they were in contact with a confirmed case of COVID-19. As several close contacts are usually identified in an education setting, the date of D10 testing can change, depending on the results public health receives from everyone’s Day 0 testing. Often the date of D10 testing will be pushed out. All close contacts will be informed of their new date of D10 testing and prolonged restricted movements, if this is the case.

A close contact can stop restricting their movement and return to school when both of the following apply:

- They have a negative test (COVID-19 not detected) 10 days after they were last in contact with a person who tested positive for COVID-19.
- They do not have any symptoms of COVID-19

As per data protection regulations, a school cannot confirm the name of the pupil/student and/or staff member who tested positive (‘detected’) for COVID-19.

Q. Do ‘close contacts’ of close contacts need to be excluded from schools?

A. No. Nationally it is not recommended the close contacts of close contacts need to also restrict their movements, and therefore siblings of close contacts identified through the schools setting can still attend school. If there are particular concerns following the case and school PHRA being undertaken, the public health doctor may sometimes request siblings also restrict their movements, but this will be a specific clinical recommendation. It is not routine and siblings of schools close contacts identified should not be excluded by schools.
Previous infection with COVID-19

Q. What if a staff or student says they have had COVID-19 previously?
A. Staff / students and in the case of young children, the parents should be told to discuss with the HSE schools teams. If there is clear evidence of a confirmed infection with COVID-19 within the past 6 months, as per national guidelines, then as long as staff/student has no symptoms, then they are not determined as a close contact and do not need to restrict their movements. This does not apply if there are specific concerns the case may have a particular variant of concern e.g. Brazilian P1 variant or South African B.1.351. In these circumstances restricted movements will apply, but public health teams will determine this. For the majority of staff and students who have had a confirmed case of COVID-19 within the last six months, they will not need to restrict their movements and can return to school.

Singing

Q: Guidance for singing / wind instruments at primary level

A: Guidance with regard to singing at primary school level remains the same as circulated before Christmas. This stated that ‘singing whilst maintaining social distancing and within normal pod structures can take place outdoors. Unfortunately, no parents / guardians will be allowed to attend these outdoor events either’. It is important that this advice continues, especially as we move closer to end of term festivities.

Q: Guidance for singing / wind instruments at post-primary level

A: Guidance for singing / wind instruments at post primary level are outlined within the document ‘Return to School Guidance for Practical Subjects in Post Primary Schools and Centres for Education; March 2021’ and should be followed.

Travel

Q: What’s the advice for people travelling into Ireland?

A: There is a Government Advisory in operation against all non-essential international travel. If travel is essential, then the advice needs to be followed, depending on whether travel was from a category 1 or category 2 country. Testing / restriction requirements for people returning from countries are explained on the gov.ie website. These apply to staff and students who might be returning after travel. These are legal requirements, and apply to all citizens and residents returning to Ireland.

The requirements as of 17.3.21 state that returning travellers from category 1 countries ‘may leave to take a RT-PCR test no less than 5 days after your arrival – if you receive written confirmation that the result of this test is negative/ 'not detected’ your period of quarantine can end. You must retain the written confirmation of your test result for at least 14 days. If your journey began in any of the Category 2 countries, you must complete the full 14 days of quarantine – regardless of whether you have a negative test result.’
As these measures and countries included as Category 1 or category 2 will change, up to date advice should always be sought from here. HSE schools teams will have no different advice to this national advice.

**Data**

Schools data is presented weekly on the HSE website here. It presents information on the number of facilities a PHRA and onward testing has been undertaken and the close contact positivity ie. For each index case identified to us who attended school in their infectious time period, how many of the identified close contacts tested positive for Covid-19. So far, since schools phased return from 8th February, data up to 13th March shows 118 facilities across SEN, Primary and Post primary have had a PHRA and onward testing undertaken; identifying 2,625 close contacts with 61 cases (2.3%) subsequently testing positive for Covid-19. The reports also present the total number of children who have tested positive for Covid-19 in the week, and since Covid-19 were first notifiable. Between March 2020 and 13th March 2021, 24,900 5-18 year olds have had a confirmed diagnosis of Covid-19. This is 2.7% of all children aged 5-18 years. The reports are uploaded weekly on to the website.

**Pregnancy**

Pregnancy related guidelines for the Education Sector have been published and are available on the HSE website here.

**Detected result confirmation**

**Q: If the school is informed of a positive case, what should the school do?**

**A.** Await instructions from public health - don’t panic – classes do not need to be sent home or told not to come in to school.

It is important to remember that the confirmed case is no longer within the school and therefore the risk of onward transmission from that person has been removed from the school setting.

If the case was not in the school setting whilst infectious, then public health will not routinely call the school because there is no significant risk that the case has spread the infection in the school setting.

If the case of COVID-19 was in the school during the infectious period the school should await a call from the Department of Public Health. This will usually be on the same day but may be the next day. The ‘infectious period’ is the timeframe during which someone with an infectious disease can spread it to other people – the ‘infectious period’ for COVID-19 includes the 24 hours before testing for asymptomatic cases, or the 48 hours before symptom onset for symptomatic cases.

The ‘incubation period’ (when someone might be infected with the virus but not unwell) is 14 days (average 4-7 days) and therefore even if a staff member or student was in the school within the infectious time period, it takes an average of 4-7 days before any other person might become unwell from becoming infected. This allows Public Health the time to undertake the Public Health Risk Assessment (PHRA), through same day or following day response.
When public health doctors make contact with the school they will proceed to ask several questions and undertake a PHRA with the school.

**Q: What should I expect when Public Health call me?**

**A:** The regional Department of Public Health will ask several questions and carry out a risk assessment. Public Health will identify any close contacts from the school setting with you, through the process of the Public Health Risk Assessment (PHRA).

You will be asked by the Department of Public Health to provide information on the close contacts identified. This information will be required in a specific excel format.

The legal basis for sharing requested data with Public Health (Medical Officers of Health and staff in Departments of Public Health) is the *Infectious Diseases Regulations 1981* as amended which provides the legal responsibility for Public Health in Article 11 and the authority in Article 19 which states that ‘Any person who refuses to comply with a requirement or direction given or a request for information made in pursuance of any of the provisions of these Regulations shall be guilty of a contravention of these Regulations’. This legislation fulfils GDPR Article 6 conditions c, d, and e regarding lawfulness of processing, and processing of special categories of personal data is allowed under Article 9 2 (i).

**Q: What is a Public Health Risk Assessment (PHRA)?**

Schools teams within regional departments of Public Health will undertake a PHRA with the school to explore the following:

- unique information and factors relevant to the case and that particular educational facility and its infrastructure, with regard to infection transmission
- interactions of the community of pupils and teachers both within the school and how they interlink within the wider community
- patterns of infection within the wider local community and
- consider general community infection rates in the regions serviced by the educational facility.

This information will inform the decisions regarding the identification of close contact and any further action required including the need for full, or partial, closure of any school.

The definition of close contacts is on the [hpsc website](https://www.hpsc.ie), and this is used, with the information identified through the PHRA to determine who the close contacts are within the school setting. It will not be automatically assumed that a whole class will be deemed as close contacts. This is because the school settings are so varied e.g. in young primary school children, ‘pods’ will likely be deemed close contacts and all removed. In secondary settings where there is social distancing rather than a ‘pod’ per se, close contacts will be determined by proximity and interaction with the index case; class placement; classroom structure; common travel; social networks and friendship groups etc.
Q: What happens if teachers or students receive notifications of the HSE COVID Tracker App?

A: Close contacts within the school setting are identified by Departments of Public Health following a Public Health Risk Assessment (PHRA). If there is any information from the HSE COVID Tracker App, this information will be considered in the risk assessment. However, it may be that not all people who are alerted through the App are actually deemed close contacts, or vice versa – Public Health might determine that some people who have not been notified by the App are close contacts. While the COVID tracker App is a very useful tool for collecting information on potential close contacts, Public Health risk assessment and advice overrides the App. This is because the Public Health Risk Assessment (PHRA) collects more nuanced, composite information to better appraise infection transmission risk in defined circumstances.

Q. Will the Department of Public Health provide instructions to the school as to how to proceed?

A. Once the Public Health Risk Assessment is complete, the Department of Public Health will then advise you of the public health instructions.

These instructions are delivered by the Medical Officer of Health/ Health officer on the advice of the MOH, under Infectious Diseases legislation.

The advice will typically include asking the school principal to:

- Contact the parents/guardians of the pupils/students, who are determined by Public Health to be ‘close contacts’. Parents of these pupils/students will be asked by the school principal to collect them from school as soon as is safely and practically possible, so they can start restricting their movements. This may still be at the end of the school day. Public Health may also ask the school to issue a letter / text message or written guidance to these parents/guardians, prepared and provided by Public Health.

- Contact any staff member who may be determined by Public Health to be a “close contact” and ask him/her to go home to start restricting their movements.

Q: If there is a case identified - how far back do Public Health go to consider close contacts?

A: For a confirmed case of COVID-19 who was symptomatic, Public Health will identify close contacts in the 48-hour period before the person became symptomatic. If the confirmed case was asymptomatic, then public health will identify close contacts for the 24-hour period before the test was taken.

Q. Is contact tracing within the school community always required?

A. No. It may well be that for someone who is identified as a confirmed case of COVID-19 there is no need to do any contact tracing within the school setting. This would be because the person was not in school while infectious and therefore no contact tracing of other persons within the school will be required. In this instance Public Health would not contact the school.
Q: I have heard that someone from the school has been identified as a confirmed case of COVID-19 – why has Public Health not contacted me?

A: It may have already been determined that there are no close contacts or onward transmission risk within the school setting, for example if the individual was not in the school during the infectious period. When Public Health do need to contact a school, they will usually do so the same day, or following day. This is safe practice, as the case is no longer within the school setting, and therefore the risk of onward transmission from this case is no longer present.

Q: Can the school share a name of the pupil/student or staff member who is a confirmed case of COVID-19?

A: No, the school cannot share the name of the person who has tested positive for COVID-19 (Covid-19 detected). This information is private and confidential. Close contacts will not be told the name of the confirmed case.

Q: Is the school complying with GDPR requirements when collecting and sharing information on complex/close contacts with the HSE?

A: Yes, under the Infectious Diseases Regulations 1981, as amended, Medical Officers of Health ask that you collect the data, keep it secure and release it only to Public Health when requested to do so as part of the investigations into a confirmed or suspected case of COVID-19. Processing of these data by the MOH is provided for under GDPR, special category data 9 2(i).

Q: What if the press media or wider school community contact the school?

A: The following is a generic statement that schools may wish to consider using in full or part in response to press/media queries.

“The school cannot comment on individual cases or outbreaks of COVID-19 to protect the privacy and confidentiality of those involved.

The school can confirm that we have engaged with the HSE. The HSE’s role includes carrying out a Public Health Risk Assessment. As part of this risk assessment, all close contacts will be identified, contacted and advised of the next steps. Close contacts are requested not to come to school, in line with HSE Public Health advice. If Public Health does not make contact with you, you are not impacted and can continue to attend school.

The school will continue to work with the HSE in ensuring all necessary hygiene, health and safety protocols are in place at the school for the prevention and containment of COVID-19.”
If a pupil/student and/or staff member develops symptoms

Q: What should the school do if a pupil/student is displaying symptoms while at school?

A: The pupil/student should be immediately brought to the designated isolation area in the school, which should have good ventilation and preferably a window to the outside that opens.

The school should contact the parents/guardians and ask them to collect their child as soon as possible. The pupil/student should be cared for appropriately by a designated staff member until they are collected. The staff member who is caring for the child should take all necessary precautions as outlined in the public health guidance document. The staff member assisting with the pupil/student does not need to go home unless they develop symptoms themselves, or are later advised to by public health. After the symptomatic pupil/student has left the isolation space, it should be cleaned and contact surfaces disinfected.

Q. What should the school do if a staff member is displaying symptoms while at school?

A. The onus is on the staff member to immediately inform the principal that s/he is displaying symptoms. The staff member should immediately go home, self-isolate and seek medical review by their GP (phone the GP if you have symptoms of COVID-19, do not attend in person. GP assessment for COVID-19, and COVID testing if required, are free of cost.)

Q: What should the school do if they are informed over the phone that a pupil/student is symptomatic?

A: The Principal is asked only to make a note of the pupil/student’s absence. The principal may note a brief description of the pupil/student’s symptoms, if they are disclosed by the parent. However, the principal is not required or entitled to ask about clinical symptoms. Schools can remind parents that if they are concerned a child may have symptoms of COVID-19, the child should not attend school and they should contact their GP without delay. No further actions are required of the school at this stage.

Q. Should a school advise the school community that a staff or pupil/student is symptomatic?

A. No. Schools are asked to note that they should not inform other parents or staff members that a pupil/student or staff member has gone home due to their symptoms. Other pupils/students or staff do not need to be removed from class. This includes siblings or other household members of staff or pupils/students.

Q: Should siblings/household members of someone with symptoms be removed from the school setting?
A: Only under certain circumstances: if the GP of the pupil/student/ staff member decides that their symptoms are consistent with COVID-19, (for example, fever OR a new cough, shortness of breath, deterioration of existing respiratory condition any loss of or changes to the sense of smell or taste), that person becomes a suspected case of COVID-19 and will be referred for a test. It is at this point that members of the symptomatic person’s household, including siblings or children of staff members, should be withdrawn from school by their parents or guardians and start restricting their movements, until the test results are known.

Q: How will a test be set up for these pupils/student and/or /staff members?

A: The pupil/student or staff member will be advised to contact their GP. Their GP will assess them and determine whether they should be referred for a COVID-19 test. If an individual is referred for a COVID-19 test, s/he will receive a text message with information of the appointment (time and place).

Q: If a pupil/student has symptoms which may be consistent with COVID-19 – what does the parents/ guardian need to do?

A: If a child has symptoms which could be consistent with COVID-19, the parents/guardians should call their GP. Their GP will decide whether they should be tested for COVID-19. If the GP determines that the child does need a COVID-19 test, it is at this point that all of their household contacts are asked to restrict their movements. This means that siblings or staff members in the same household as the person who has symptoms should be removed from the school setting. Only the symptomatic case is asked to self-isolate.

Note: there will be many cases where testing is determined not to be required, for example, because the GP thinks that the child’s symptoms are not due to COVID-19 and might be due to another cause. If the GP does not recommend COVID testing, and it is early in the child’s illness, the recommendation is to observe the child for 48 hours and if no further symptoms develop, then they can return to school. If the GP has made a different diagnosis, parents/guardians should follow advice and recommendations on exclusion depending on this diagnosis.

Q: How soon will the pupil/student or staff member receive a test?

A: The person will receive an automated notification of a scheduled appointment at a testing centre at the next possible free slot for testing.

Q: Will the pupil/student or staff member receive one test or more than one test on the basis of being symptomatic? If the latter, why?

A. If the pupil/student or staff member is experiencing symptoms and has been referred for testing by their GP, they will receive one test.
If a pupil/student/ staff member is identified as a close contact

Q: How will a test be set up for persons identified as a close contact?

A: The HSE will send an SMS with the appointment date, time and location of the free COVID-19 test(s)

Q: How soon will the pupil/student/staff member receive a test after being identified as a close contact?

A: Public Health will advise on the timing of a test for close contacts. This will depend on when the pupil/student/staff member was last in contact with the positive case. Testing will be arranged within 1-2 days. Close contacts are recommended to have two tests; one at day 0 and the second at day 10.

Q: Will the pupil/student/staff member receive one test or more than one test? If the latter, why?

A: Public Health will advise whether a pupil/student/staff member needs one or more tests for COVID-19. They will usually require testing on Day 0 and Day 10 since their last exposure to the confirmed case, but there may be circumstances whereby Public Health require only one test to be undertaken, for example, if sufficient time has elapsed such that the first test for close contacts will be 7 days since they were last exposed to the individual they will only require one test. Public Health doctors will make this judgement following the risk assessment.

Q: If a test comes back as “not detected” for a symptomatic pupil/student/staff member, will the person still be required to restrict their movements and why?

A: Yes. If the person receives a negative / ‘not detected’ test result, the person should remain at home until they are well enough to return to school, unless parents/guardians of (pupil/students) or staff members are specifically asked by HSE public health to remain excluded because of further investigation.

A pupil/student /staff member can return to their normal activities, once they have been given either:

- a negative (‘not-detected’) test result and are 48 hours without symptoms or
- another diagnosis, which is not COVID-19.

Those who live with the person will then no longer need to restrict their movements.

Q: If a test comes back ‘SARS-CoV-2 detected’ (confirmed case of COVID-19) will the pupil /student/staff member still be required to self-isolate?

A: If a person was symptomatic for COVID-19 they should already be self-isolating. If a close contact who was restricting their movements receives a positive COVID-19 test result (SARS-CoV-2 detected), they are now a confirmed case of COVID-19 and must self-isolate; additionally, their close contacts including household contacts must now also start restricting their movements. They may already have been restricting
their movements, however if only one person in the house was deemed a close contact from an exposure outside the house e.g. in the school, then the other family members would not have been restricting their movements until this point.

Q: If a pupil/student/staff member has tested positive for COVID-19 and self-isolated for 10 days thereafter, can they return to school/work?

A: Yes, provided the following applies:

- they have self-isolated for 10 days from onset of symptoms with last 5 days without a fever (high temperature (38 degrees Celsius or over)

or

- if they were asymptomatic they must have self-isolated for 10 days from date of test)

Close contact information

Q: What is the definition of a close contact?

A: A person is deemed to be a close contact within an education setting if s/he has

- had face to face contact for <1m with a confirmed case of COVID-19 for >15 minutes in a school day.
- been between 1 and 2 metres from a confirmed case of COVID-19 for >15 minutes in a school day with consideration of other mitigation measures e.g. face-coverings, pods, ventilation, IPC measures or uncertain compliance with mitigation measures in place (assessed through clinical PHRA)

Contacts are assessed from contact with a confirmed case of COVID-19 during their infectious period - 48 hours before the onset of symptoms if symptomatic, or 24 hours before the test for COVID-19 was taken in those who are asymptomatic.

Q: Can the class of a confirmed Covid-19 case attend school?

A: The HSE will have carried out a Public Health Risk Assessment (PHRA). The only individuals who cannot attend school are those who have been identified as close contacts by Public Health. This may be a small number, for example a ‘pod’, or it could be a full class. However, if a pupil/student/staff member develops symptoms which could be consisted with Covid-19, they should self-isolate immediately and discuss the matter with their GP.

Q: What message can be communicated to the wider school? (if required) or What should the principal do if parents of pupils/students or staff members, that have not been identified as close contact, ring the school for information on the confirmed (positive) case and other close contacts?

A: A suggested communication would include “The HSE is guiding our school through the actions we need to take to protect staff, students and our school community. A Public Health Risk Assessment has been carried out. All close
contacts have been identified and sent home from school to restrict their movements for 14 days. The school community will continue to engage with and implement Public Health advice to protect ourselves and the school community from Covid-19.

Q: Can siblings or children of a staff member who is a close contact attend school?

A: Yes. Only the pupil/student/staff member who is a close contact needs to restrict their movements, even though they have no symptoms. However, no other family member is required to do so – unless also identified as a close contact.

If however the pupil/student/staff member who is a close contact develops symptoms, of COVID-19 then they are a suspected case of COVID-19 and should now self-isolate and contact their GP, explaining that they have been identified as a close contact of a confirmed case of COVID-19 and they now have symptoms too.

If the GP determines they are now a suspected case of COVID-19, they will arrange testing and the close contact should:

- continue to self-isolate; and
- household members should restrict their movements, as per guidance for household contacts of a suspected case of COVID-19.

Q: Will a pupil/student's / staff members result be shared with the educational facility?

A: COVID-19 tests remain confidential as per patient – doctor confidentiality. No other pupil/student, parent, family or teacher will be informed of the results.

However, parents should be advised at the point of testing, that if their child’s result is positive for COVID-19(SARS-CoV-2-19 detected) then it will likely need to be shared with an appropriate named individual within the school/educational facility, if this is deemed necessary by the Medical Officer of Health for onward safe management of the situation.

Up to date information and advice on coronavirus is available on hse.ie