

COVID-19 Public Health Briefing for Bolton Early Education Providers

June 2020



Public Health overview of Covid-19 and the implications for children

Suzanne Gilman
Assistant Director-Public Health



Introduction to COVID-19

- Coronaviruses: large group of viruses-some causing less severe cold-like diseases-other causing more severe life threatening illness such as Middle Eastern respiratory syndrome (MERS)
- January 2020-a novel coronavirus was first identified
- Referred to as SARS-CoV-2 and the associated disease as COVID-19
- COVID-19 mainly transmitted through respiratory droplets (coughing and sneezing) and contact routes (person to person contact and environmental surfaces)
- Incubation period (time from exposure to developing symptoms) is 2-10 days. For most people symptoms appear around day 7.
- The main symptoms are a high temperature, cough and anosmia (loss or change to normal sense of taste or smell)

Source: Public Health England, 2020



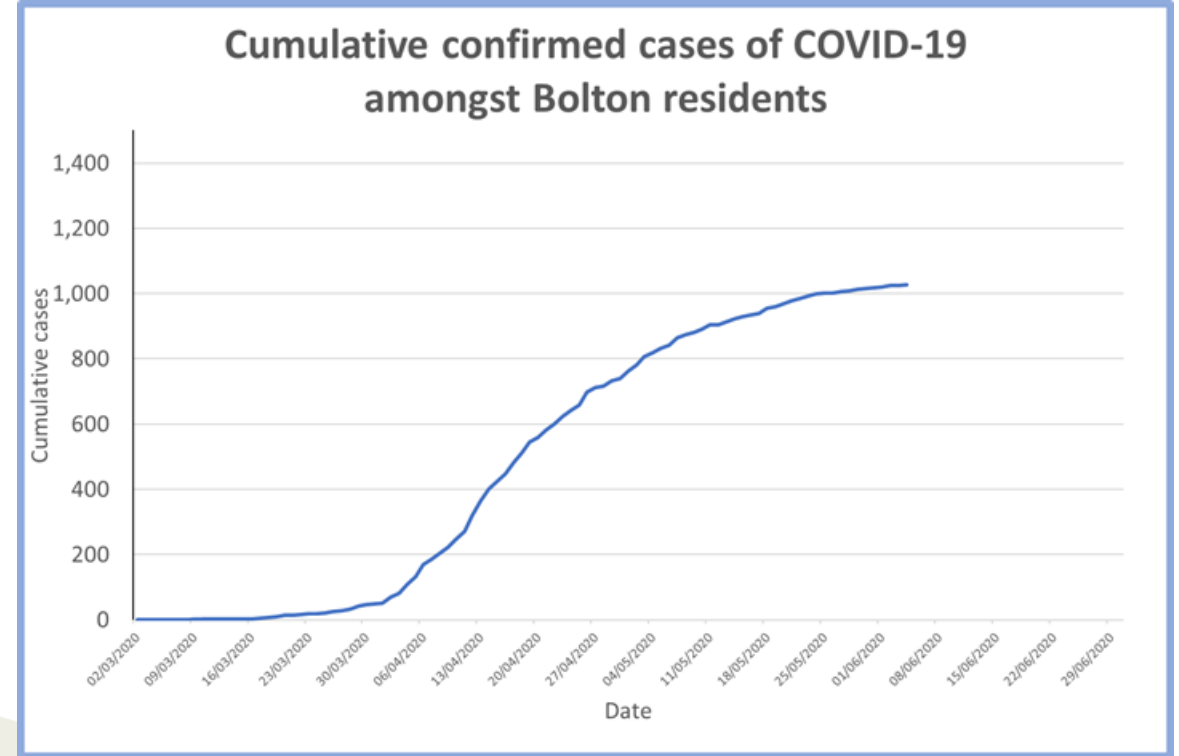
The 'R value' in context

- R value = the average number of transmissions from an infected person
- It is an estimate based on complex statistical modelling, with confidence intervals to help assess the variability around the estimate
- There are a number of different models available ... at least ten!
- Robust estimates are only available at the national and regional level – these are from Public Health England/Cambridge University, and London School of Hygiene and Tropical Medicine (LSHTM)
- **No one value or single piece of information gives a complete picture**
- **R should be interpreted alongside the actual number of infections circulating, the measures in place to interrupt transmission, and the capacity of local health and care systems**



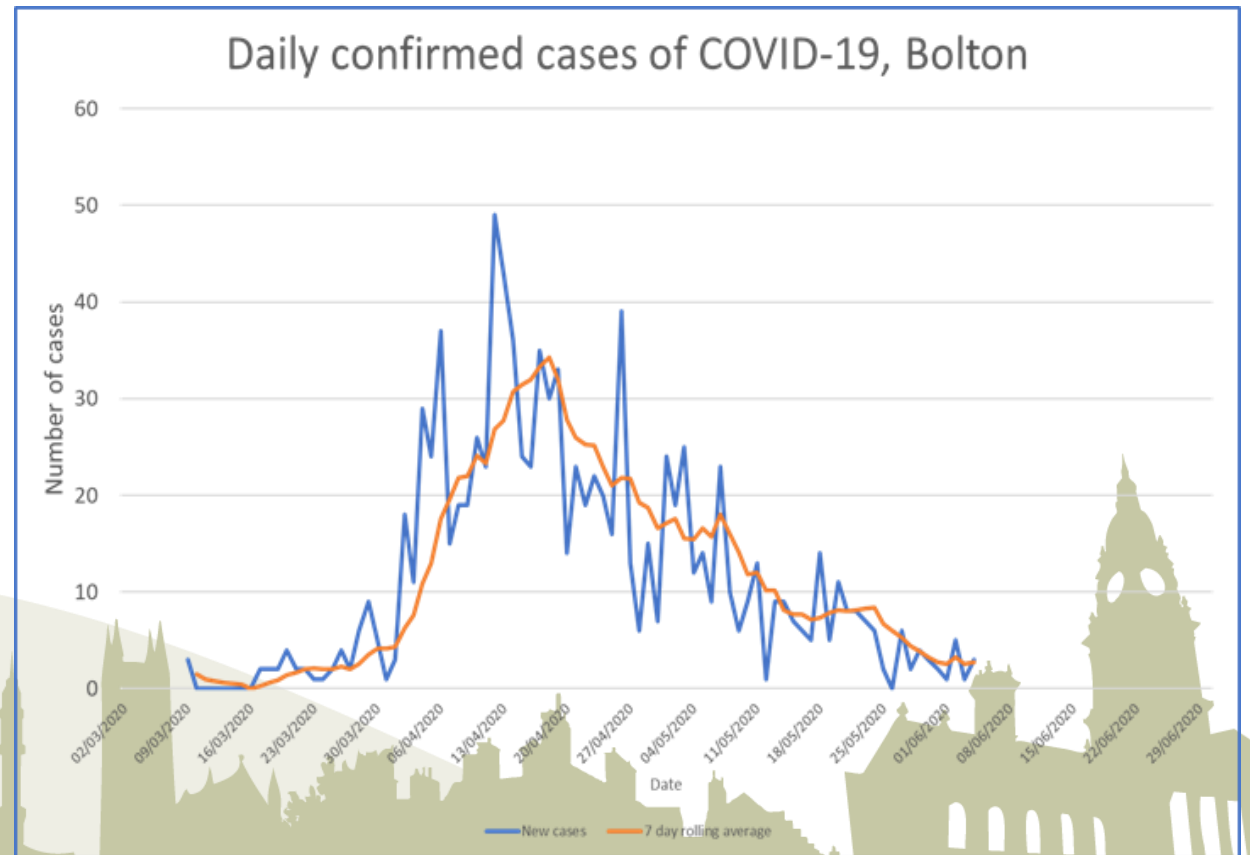
Cumulative cases of Covid-19

- Total confirmed cases, as announced on 4th June 2020 = 1028
- Number of new cases appear to have slowed down



Daily confirmed cases of Covid-19 for Bolton

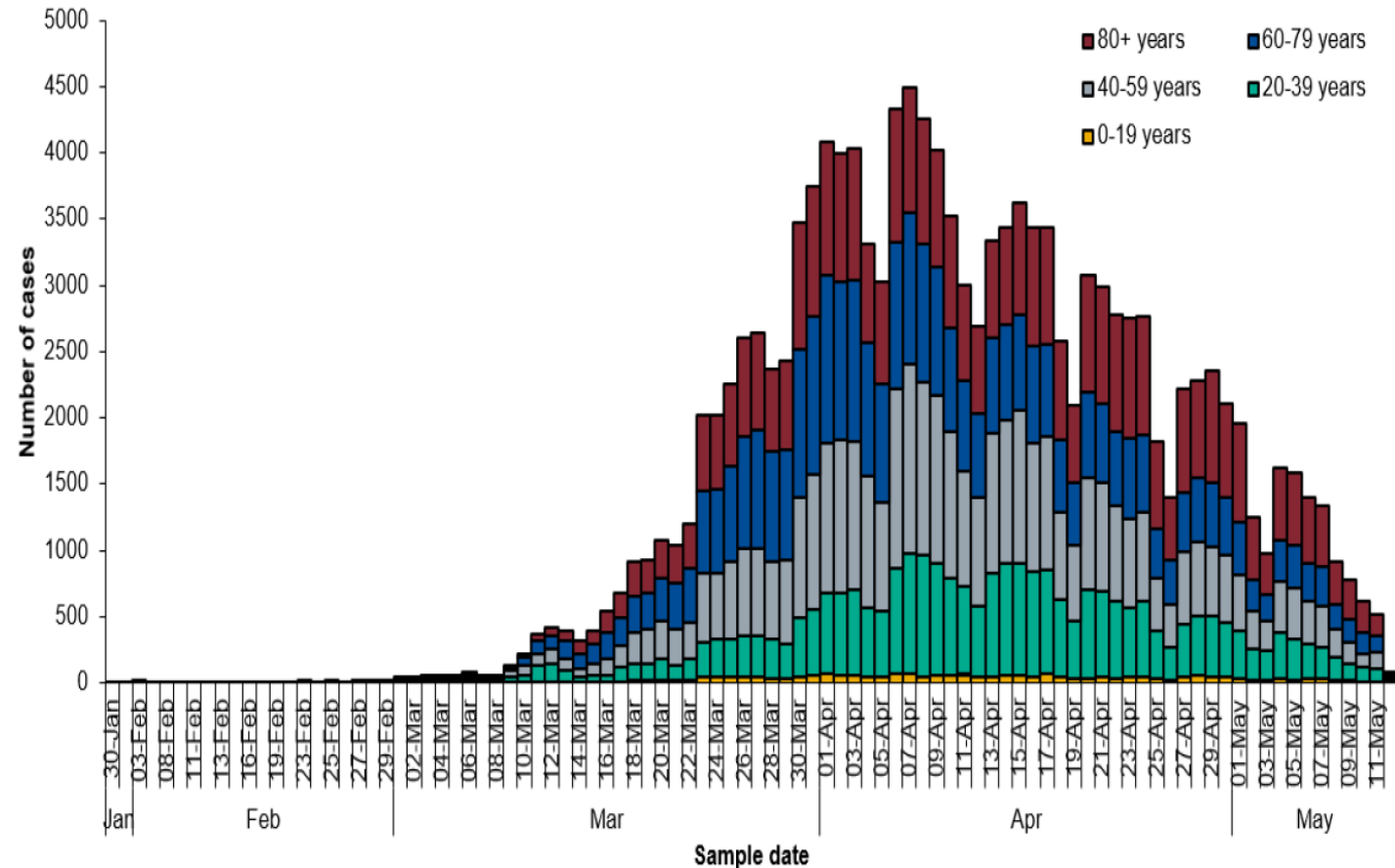
- Data on new cases are updated daily by Public Health England based on lab testing.
- Overall trend shows that the number of confirmed cases based on weekly averages is decreasing.
- Data for the last 5 days period is subject to change as results are updated.



Laboratory confirmed COVID-19 cases by date of sample

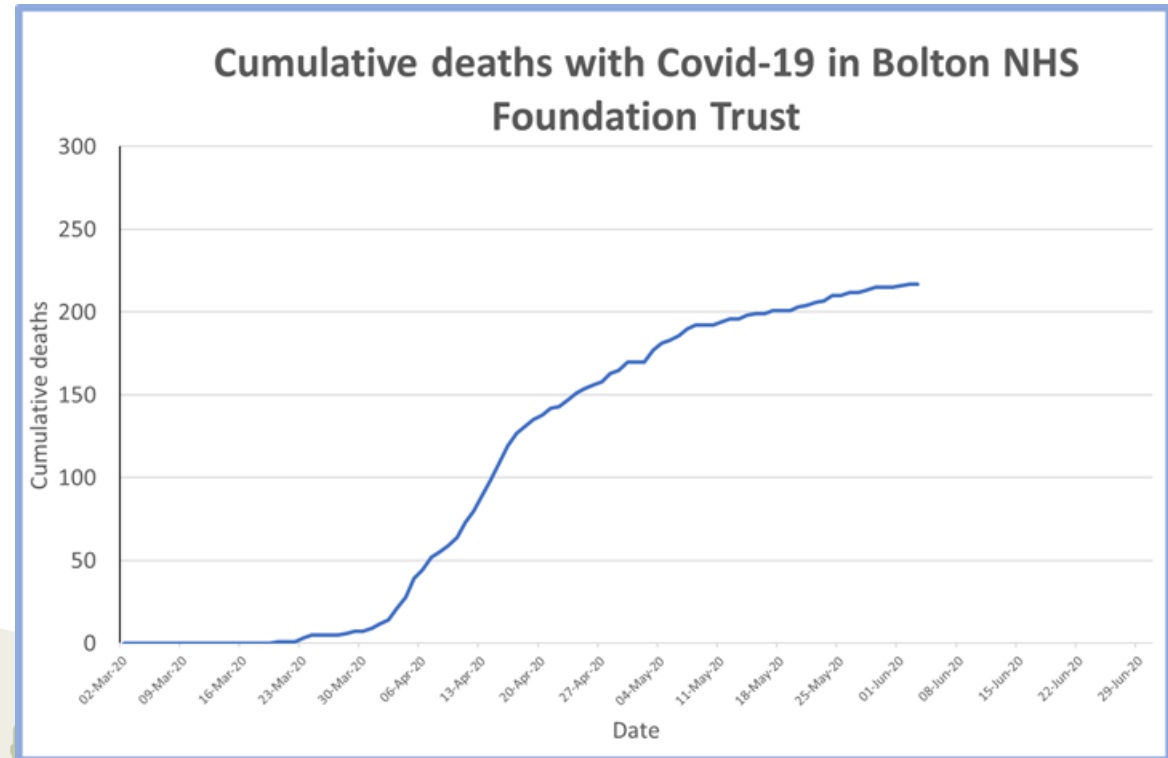
Confirmed cases are in older age ranges-few laboratory confirmed cases in children and young people

NB the majority of testing to date has been those with a medical need and key workers rather than the general population-so tends to represent those with most severe disease than all those who get infected within the community.



Covid-19 deaths in Bolton

- Total, as announced 20th May 2020 = 217
- Number of Covid-19 deaths in hospital are slowing down
- Majority of deaths tend to be in older age ranges



COVID 19-children and young people

- COVID-19 has been reported in children and young people of all ages. However there are fewer confirmed cases compared with adults: <2% of total confirmed cases
- COVID-19 does not appear to be as severe in children than in adults: children are often asymptomatic or have a mild course of illness
- Serious COVID19-related illness and death is extremely rare: mortality seems to be consistent at around 0.01% - in a similar region to seasonal influenza.
- It is uncertain how many children in the community have COVID-19 in the absence of widespread, high quality 'sero' or antibody surveillance studies, but increasingly likely that there are comparatively few children with COVID-19 disease in the community, particularly younger children.
- There is some evidence that children may be less likely to acquire the infection.
- The role of children in transmission is unclear but at this time do not appear to be 'super spreaders' of Covid-19 infection.
- Many children, and adults (potentially up to 40%) are asymptomatic. The approach to take therefore is to consider that everyone could be COVID-19 positive. This is the best approach when considering effective infection prevention and control measures in early years settings.



Testing

- Testing is now available for everyone with covid-19 symptoms:
 - New continuous cough OR
 - High temperature OR
 - Anosmia: loss or change to normal sense of taste or smell
- For those with symptoms all members of their household must self-isolate in line with current guidelines, unless the symptomatic individual receives a negative test result.
- Testing is available at the **University of Bolton Stadium** and can be booked by visiting: www.bolton.gov.uk/covidtesting
- Or through the national portal: <https://self-referral.test-for-coronavirus.service.gov.uk/test-type>
- Those without internet telephone: 119
- For testing of symptomatic children under five years please contact your GP or NHS 111



NHS Test and Trace

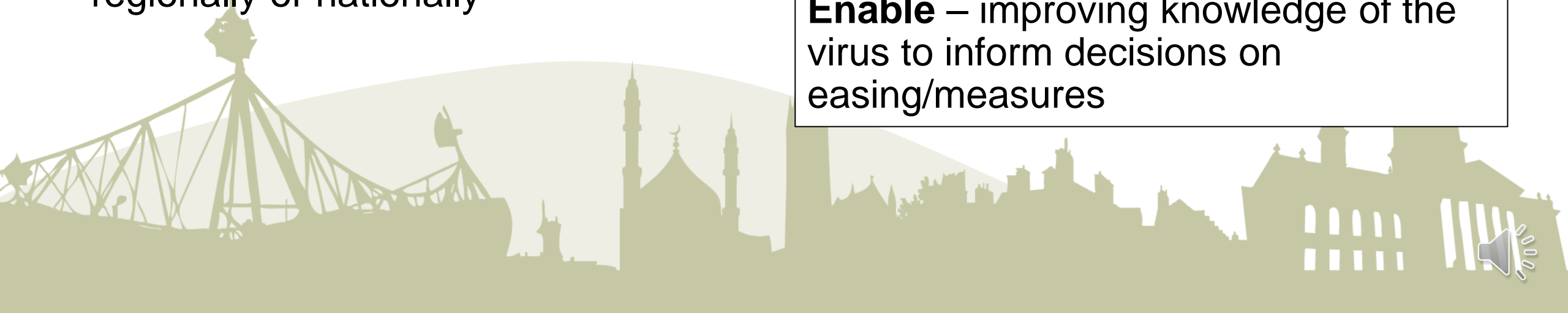
- Central part of the government's COVID-19 recovery strategy
- Enables easing of blanket lockdown measures
- Provides an early warning if COVID-19 activity is increasing locally, regionally or nationally

Test – increasing availability and speed of testing

Trace – identify, alert and support those who need to isolate

Contain – using data to target approaches for outbreaks or 'flare ups'

Enable – improving knowledge of the virus to inform decisions on easing/measures





HM Government

NHS Test and Trace

Got coronavirus symptoms?

1

Start **isolating**

- you for **7 days**
- household for **14 days**



2

Book **a test**

- [NHS.uk/coronavirus](https://www.nhs.uk/coronavirus)
- or call **119**

negative
for COVID-19



- Household stops isolating immediately
- You stop isolating if you feel well

positive
for COVID-19



3

Share **contacts**
via **NHS Test and Trace**

STAY ALERT ▶ CONTROL THE VIRUS ▶ SAVE LIVES

If you have been in close contact
with someone who tests positive

1

You may be alerted
by **NHS Test and Trace**



2

Isolate for **14 days**
after close contact



if you develop symptoms

3

Book **a test**

- Household isolates
for **14 days**

negative
for COVID-19



- Household stops isolating immediately
- You complete **14 day isolation**

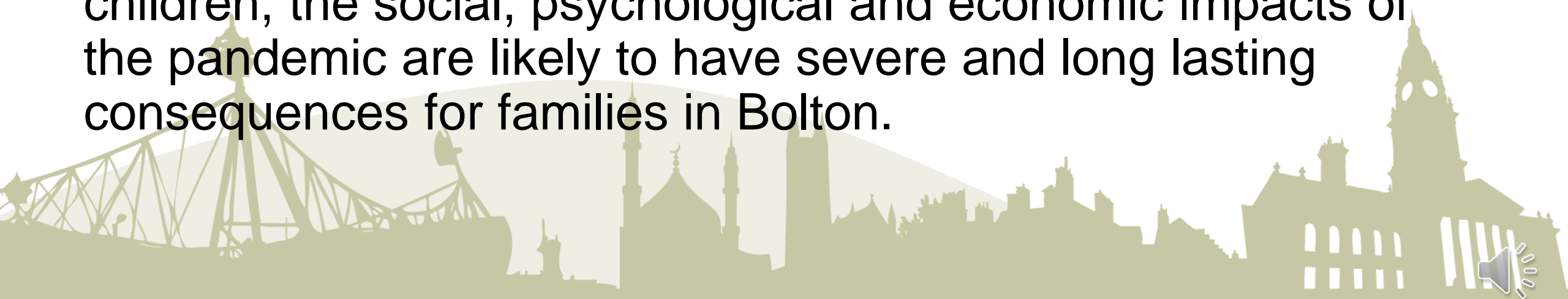
positive
for COVID-19



- You begin new **7 day isolation**
- Household completes **14 day isolation**

The impact of covid-19 on children and families

- The potential health effects and increased health inequalities of the COVID-19 response for the whole population is significant.
- Whilst COVID-19 related illness is less severe amongst children, the social, psychological and economic impacts of the pandemic are likely to have severe and long lasting consequences for families in Bolton.



COVID-19

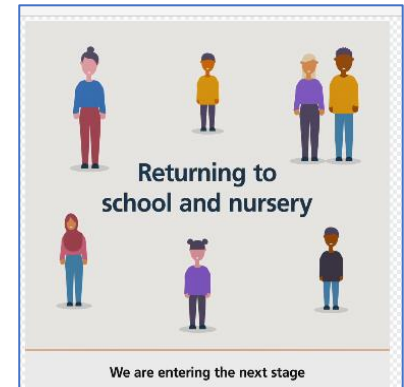
Infection Prevention and Control in Childcare and Early Years Settings

Anna Anobile
(Community Infection Prevention &
Control)



COVID-19: Implementing protective measures in education and childcare settings

- Guidance updated 1st June 2020: [Coronavirus \(COVID-19\): implementing protective measures in education and childcare settings](#):
 - Management of symptomatic cases
 - Minimising contact and mixing
 - Hand washing
 - Respiratory hygiene measures
 - Environmental and enhanced cleaning
 - Which, when, and why personal protective equipment (PPE) may be required, and how to use safely
- Guidance also refers to COVID-19 test and trace programme



IPC: Management of COVID-19 symptomatic cases

Any child with the following symptoms **must not** attend childcare setting, and must remain isolated at home for 7 days (household contacts for 14 days).

General symptoms of COVID-19 are outlined as:

- High temperature ≥ 37.8 degrees C
- New persistent dry cough
- Loss of sense of smell or taste (anosmia) - as announced 18th May 2020

COVID-19 infections in children can occur, but are very unlikely to cause serious symptoms. Other reported symptoms in children:

- Abdominal pain
- Diarrhoea and/or vomiting
- Loss of appetite

Extremely rare 'Toxic Shock Syndrome' or 'Kawasaki Disease' like response in very small number of children – some who have tested positive for COVID-19; and some negative:

- Cardiac symptoms – such as fast heart rate
- Skin rash



IPC: Management of COVID-19 symptomatic cases

Prepare and practice:

- Ensure a procedure is in place for separating sick infants, children and staff from those who are well – without creating stigma
- Symptomatic children or staff may need to be referred directly to a health facility, depending on the situation/context, or sent home
- Share procedures with staff and parents/carers ahead of time, and consider practice 'run through'

Communicate:

- Share information around symptoms of COVID-19 with staff and parents/carers
- Provide information around infection prevention and control efforts at your setting
- Public Health England campaign and social media information available at:

<https://coronavirusresources.phe.gov.uk/schools-/resources/social-media-resources/>



IPC: Minimising contact and mixing

Social 'bubbles':

- Keeping group sizes to a maximum of 8 children, while adhering to EYFS ratios
- Children and staff mix in a small consistent group and that small group stays away from other groups
- Staff must also maintain 2 metres social distancing – including break times

Considerations:

- Furniture removed or re-arranged to facilitate the 2 metres spacing
- Use of outdoor spaces

Reduction of 'pinch-points'. Examples:

- Staggered start/arrival times
- Staggered toileting and hand washing
- One way 'flow through' corridors – in and out doors clearly marked and communicated



IPC: Hand washing

Remains the most important measure in preventing transmission of COVID-19 and other infective organisms

Requirements:

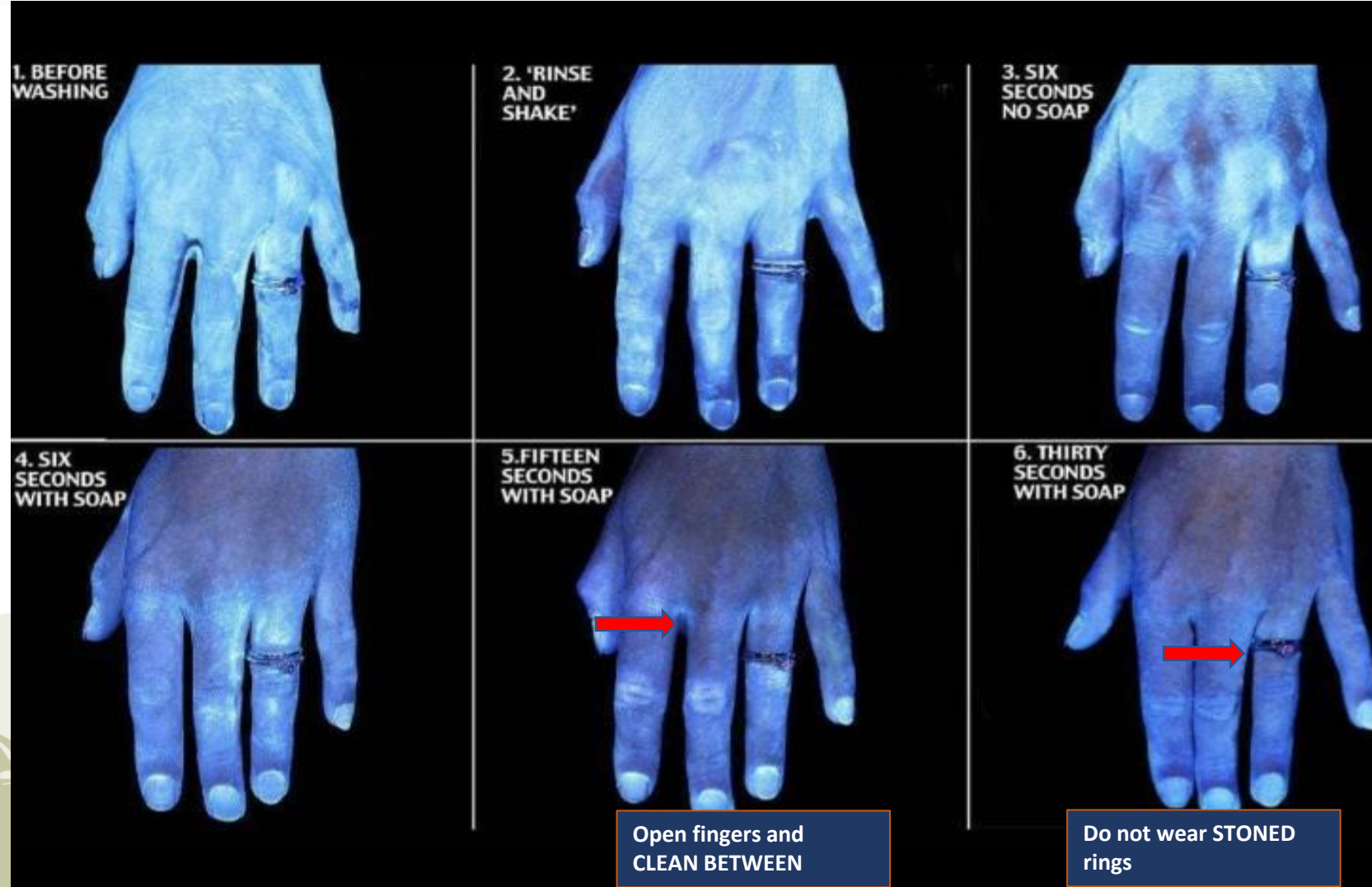
- Liquid soap – ideally wall mounted
- Paper towels – hand dryers avoided as can ‘blow’ viruses and other organisms around small spaces
- Children taught good technique with rubbing to remove organisms for ‘20 seconds’
- Ensure that help is available for children who have trouble cleaning their hands independently
- Consider how to encourage young children to learn and practise these habits through games, songs and repetition
- Display laminated hand washing posters near sinks
- Wash your hands often:
 - ✓ Before and after eating;
 - ✓ After blowing your nose, coughing, or sneezing;
 - ✓ After visiting the toilet
 - ✓ When hands are visibly dirty
- Alcohol based hand rub or sanitising gel may be provided for use on physically clean hands where there are no sinks (e.g. on entrance to your setting), but should not replace hand washing with soap and water in toilet areas.



IPC: Hand washing

Staff must be
**'bare below the
elbows'** – apart from
plain wedding band.

No wrist watches or
jewellery.



IPC: Respiratory Hygiene Measures

Advice on reducing transmission of COVID-19 mirrors that given during flu season for respiratory viruses:

- Respiratory hygiene is vital – **Catch it, Bin it, Kill it** - with supplies of tissues readily available, and individuals asked to cover their mouth and nose if coughing or sneezing. If a tissue is not available, cough or sneeze into the inside of the elbow rather than on hands to prevent transmission.
- Consider 'Sneeze Stations' around the school/nursery where children/adults can wash hands, or clean with wet wipes, and grab a tissue.
- Posters may be a good reminder for children and staff, or songs
- PHE e-bug has some good 'Super Sneeze' resources:
https://e-bug.eu/junior_pack_ks1.aspx?cc=alb&ss=2&t=Super%20Sneezes



IPC: Environmental and enhanced cleaning

Environmental cleaning will reduce the risk of contamination through 'contact' transmission - i.e. viral particulates deposited on surfaces or items through direct touch, or from coughs/sneezes where droplets have landed which can then be picked up by others through touch.

Risk of infection has been modelled on experience from new coronaviruses, including SARS-CoV (Severe Acute Respiratory Syndrome) and MERS-CoV (Middle Eastern Respiratory Syndrome).

Studies of COVID-19 and other coronaviruses suggest that risk of contact transmission is likely to be reduced significantly after 72 hours.

This has informed environmental cleaning and decontamination requirements for COVID-19 with considerations for level of decontamination as:

- Type of surfaces contaminated
- The amount of virus shed from individuals
- The time an affected individual has spent in the setting
- The time since the individual was last in the setting



IPC: Environmental and enhanced cleaning

Environmental cleaning should therefore be approached sensibly and regularly to reduce risks of contact transmission:

- Principles of cleaning to prevent COVID-19 transmission mirror those outlined during other outbreaks, such as Flu and Norovirus
- Detergent cleaning to remove dirt, grease, and organisms (viral, bacterial or fungal) is essential, followed by product containing 'bleach' or 'available chlorine' 1000 parts per million (ppm). Mixed products are also available. Wipes can also be used for high contact areas throughout the day, e.g.:
 - door handles
 - bathrooms, taps and sink
 - grab rails
- Attention to toilets/potties and nappy change areas as evidence of viral shed in faeces
- Disposable cloths/mops are recommended for all cleaning, or items which can be laundered and decontaminated on hot wash
- Personal protective equipment (PPE) - disposable gloves and apron should be whilst cleaning to prevent contamination to skin or clothing. Hands must be washed thoroughly with soap and water following removal of PPE
- Areas should be well ventilated to increase air flow and remove potential droplet/respiratory
- Introduction of 'no outer shoe' policy - several studies have found COVID-19 can be transferred on shoes. Staff and children to wear different shoes inside. Parents/carers also asked to remove outer shoes



IPC: Environmental and enhanced cleaning

Products:

Detergent – AKA ‘surfactant’ or ‘non-ionic surfactant’

- Must be used for **all** cleaning – physically cleans ‘lifts & shifts’ organisms, grease and dirt

Disinfectant – antibacterial/sanitiser

- A chemical liquid which destroys bacteria and other organisms – to be used in conjunction with detergent
- Virucidal disinfectants should conform to EN (European Norm) Standard 14476
- Always check ‘contact time’ for disinfectant products

Bleach – ‘available chlorine’ (1000 ppm)

- Recommended for enhanced cleaning in settings during outbreaks (e.g. D & V) and for blood/body fluid spillages, and for cleaning during COVID-19 pandemic
- Detergent followed by 1000ppm Av. Chlor product or mixed detergent/1000ppm av. Chlor can be used



IPC: Nappy changes



- Disposable gloves and apron must be worn for each nappy change
- Away from play areas/food preparation areas
- Pedal operated nappy bins - regularly cleaned inside and out
- Clean children's skin with a disposable wipe. Flannels should not be used to clean bottoms.
- Label nappy creams and lotions with the child's name and do not share with others. Store in lidded box, named drawer or cupboard with door
- Plastic bags should be available for soiled nappies (or nappy disposal system)
- Changing mats cleaned with detergent and water then 1000 ppm available chlorine (N.B. check virucidal contact time for your product – Milton fluid = 15 minutes)
- Nappies should be covered if stored in bathroom/nappy change area to prevent cross contamination – either in lidded tub, or in drawer or cupboard with door
- Dispose of damaged changing mats
- Hands must be washed with soap and water following removal of PPE – hand rubs/sanitiser gel is NOT recommended for use in toilets or nappy change areas as will not destroy or remove enteric organisms (such as Norovirus)



IPC: Care of play equipment



- All items/toys must be cleaned after use with detergent and warm water & dried thoroughly

- Soft toys - not recommended unless for single child play and toy able to sustain weekly wash on hottest temperature possible, or when visibly dirty
- Ask children not to bring toys or other items from home to the setting, unless this is essential to their health and wellbeing

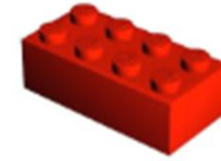


- Store clean items in lidded plastic boxes or cupboard with door to prevent droplet and contact transmission

- Suspend activities where items cannot be cleaned or emptied between different groups of children e.g. sand play
- Play dough must be made fresh and disposed of at the end of session



**Please wipe down or wash toys
after each use.**



**Toy box, lid and contents to be
washed or wiped down once a
week.**



IPC: Personal Protective Equipment (PPE) including face masks and face coverings

Which:

- Wearing a face covering or face mask in schools or other education settings is not recommended, other than situations outlined below
- All staff should, however, have access to disposable apron, gloves, and fluid resistant/repellent surgical face mask (FRSM), and eye protection (if any risk of body fluid splash)

When:

- Children, young people and students whose care routinely already involves the use of PPE due to their intimate care needs should continue to receive their care in the same way
- FRSM should be worn if a distance of 2 metres cannot be maintained for any child, young person, or other learner **displaying coronavirus symptoms**

Why:

- FRSM will reduce potential droplet transmission from known or suspected COVID-19 cases
- Eye protection may need to be worn if there is any risk of splash (e.g. spitting)



IPC: Personal Protective Equipment (PPE) including face masks and face coverings

How:

- As important as having access to items of PPE is to ensure individuals know how to don (put on) and doff (take off), to dispose of safely, and to wear correctly without increasing risk of contamination
- Users must ensure close fit of masks around bridge of nose and under chin
- FRSM must not be moved or touched when wearing
- Provide opportunity to practice putting on and taking off PPE
- Display donning and doffing posters
- Always wash hands or use alcohol based hand rub (60%) on visibly clean hands before putting on, and after taking off PPE

Donning (putting on) order:

Apron, FRSM, eye protection, gloves

Doffing (taking off) correct order:

Gloves, apron (do not touch outer front), FRSM, eye protection (do not touch front of mask or goggles/face shield)



IPC: Donning and Doffing PPE Posters

Posters available at:

<https://www.gov.uk/government/publications/covid-19-personal-protective-equipment-use-for-non-aerosol-generating-procedures>

Public Health England

How to work safely as a home carer
Putting on personal protective equipment (PPE)

Before putting on your PPE:

This is the type of PPE needed when providing personal care which requires you to be in direct contact with the resident(s) (e.g. touching) or within 2 metres of a resident who is coughing.

- make sure you drink some fluids before putting on your PPE
- tie hair back
- remove jewellery
- check PPE in the correct size is available

- 1** Clean your hands using alcohol hand rub/gel or use soap and water.
- 2** Put on apron and tie at waist.
- 3** Put on facemask – position upper straps on the crown of your head, lower strap at nape of neck.
- 4** With both hands, mould the metal strap over the bridge of your nose.
- 5** Don or put on your eye protection, if required due to the risk of splashing.
- 6** Put on gloves.

Please see the Putting on and taking off PPE – a guide for care homes video here: <https://youtu.be/ozY50PPmavE>

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Public Health England

How to work safely as a home carer
Taking off personal protective equipment (PPE)

• PPE should be removed in an order that minimises the risk of self-contamination

• Gloves, aprons (and eye protection if used) should be taken off in the resident's room area

• This is the type of PPE needed when providing personal care which requires you to be in direct contact with the resident(s) (e.g. touching) or within 2 metres of a resident who is coughing

- 1** Remove gloves. Grasp the outside of glove with the opposite gloved hand; peel off. Hold the removed glove in the remaining gloved hand.
- 2** Clean hands.
- 3** Apron. Unfasten or break apron ties at the neck and let the apron fold down on itself.
- 4** Remove eye protection if worn due to risk of splashing. Use both hands to handle the straps by pulling away from face and discard or disinfect before using again.
- 5** Clean hands.
- 6** Remove your facemask once your care task is completed and before you take a break, eat a snack or change activities. Untie or break bottom ties, followed by top ties, and remove by handling the ties, only because the front of the mask may be contaminated. For facemasks with elastic, stretch both the elastic ear loops wide to remove. Lean forward slightly. Discard. DO NOT reuse once removed.
- 7** Clean hands with soap and water.

Please see the guide and instruction video here: www.gov.uk/government/publications/covid-19-how-to-work-safely-in-care-homes

COVID-19: Testing

Announced 18th May 2020, all symptomatic children over the age of 5 years can now be tested for COVID-19. Contact NHS 111 or phone GP for advice if child under age of 5 becomes symptomatic

- If swab returns as **NEGATIVE** the child can return to school or childcare setting, and household members do not need to isolate for the 14 days. However, if child is symptomatic, keep off school or childcare setting until recovered.
- If swab returns as **POSITIVE** the child remains isolated at home, until 7 days post onset of symptoms, and household contacts for 14 days – unless they develop symptoms and 7 day rule will apply (or longer if temperature persists).
- Teaching and support staff in educational and childcare facilities are also able to request to be tested if symptomatic, and would remain off work and in self-isolation for 7 days post onset of symptoms, or until receipt of **NEGATIVE** COVID-19 test result when they may return to work if feeling well.



References

Actions for early years and childcare providers during the coronavirus outbreak :

<https://www.gov.uk/government/publications/coronavirus-covid-19-early-years-and-childcare-closures/coronavirus-covid-19-early-years-and-childcare-closures>

Coronavirus (COVID-19): implementing protective measures in education and childcare settings :

<https://www.gov.uk/government/publications/coronavirus-covid-19-implementing-protective-measures-in-education-and-childcare-settings>

Coronavirus (COVID-19): preparing for the wider opening of early years and childcare settings from 1 June:

<https://www.gov.uk/government/publications/preparing-for-the-wider-opening-of-early-years-and-childcare-settings-from-1-june>

COVID-19: cleaning of non-healthcare settings:

<https://www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-settings>

Coronavirus (COVID-19): guidance for schools and other educational settings :

<https://www.gov.uk/government/collections/coronavirus-covid-19-guidance-for-schools-and-other-educational-settings>

E-bug COVID-19 resource page (including hand washing poster) :

https://e-bug.eu/eng_home.aspx?cc=eng&ss=1&t=Information%20about%20the%20Coronavirus

Health protection in schools and other childcare facilities:

<https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities>

Royal College of Paediatrics and Child Health (RCPH), May 2020, COVID-19 Research Evidence Summaries:

<https://www.rcpch.ac.uk/sites/default/files/generated-pdf/document/COVID-19---research-evidence-summaries.pdf>

Munro PS and Faust SN, Children are not COVID-19 super spreaders: time to go back to school; British Medical Journal, May 2020

WHO - Key Messages and Actions for COVID-19 Prevention and Control in Schools, March 2020:

https://www.who.int/docs/default-source/coronaviruse/key-messages-and-actions-for-covid-19-prevention-and-control-in-schools-march-2020.pdf?sfvrsn=baf81d52_4&gclid=EAIaIQobChMI6deN6dDC6QIVzuvtCh11tgRFEAYASAAEgKpX_D_BwE



**We hope that you have found
today's session useful.**

Please email any questions to
StartWellbookings@bolton.gov.uk

