

COVID-19 RESPONSE PLAN

KEEPING FOCUSED ON SUPPORTING OUR STUDENTS AND STAFF

SCHOOL		BLADON HOUSE SCHOOL
COVID LEADER FOR SCHOOL		SHALLY SALERI-PALMER
REGISTERED MANAGER		MATT COUSINS
SENAD COVID LEADER		DR MARK FLYNN
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Coronavirus: COVID 19 background

COVID-19 is a new strain of coronavirus first identified in Wuhan City, China in January 2020, but it is now worldwide. Due to its incubation period of between 2 and 14 days, high infection rate and the absence of an inoculation or drugs to deal with a virus, the UK Government has identified that organisations need to be prepared for the following scenario:

- Up to 80% of the population being infected over 6 months
- Up to 20% of the workforce being off work during the peak period
- That it may take up to 3 months for the virus infection to peak
- And then for the virus to remain around for up to 3 months
- NHS (hospitals and GPs) being over stretched so NHS services will be affected
- That the majority of people will have a mild version of the virus
- Those with pre-existing health conditions (diabetes, cancer and chronic lung, heart and immune issues) are at greater risk, especially those over age 75
- Young people, in particular children, are at lower risk
- That the majority of people will have to self-manage the illness with 'over the counter remedies' as antibiotics will not work with a virus

The UK government have been planning an initial response based on information available at the time, in a context of uncertainty that can be scaled up and down in response to new information to ensure a flexible and proportionate response.

The plan takes steps to **Contain, Delay and Mitigate** any outbreak, using HM Government leadership to inform policy development. This Covid-19 Response Plan is the framework of how the service will manage the inevitable escalation of the Coronavirus (COVID-19).

Education

<https://www.gov.uk/government/publications/guidance-to-educational-settings-about-covid-19>

Social Care

<https://www.gov.uk/government/publications/guidance-for-social-or-community-care-and-residential-settings-on-covid-19/guidance-for-social-or-community-care-and-residential-settings-on-covid-19>

We have followed the framework set out by the Government in the [HM Government Action plan](#) published on 3rd March 2020. Our response will change, that is evolve, as the COVID-19 virus outbreak unfolds over time in line with Government advice.

The Head Teacher and her SLT will review the plan every Monday

The Three Phases: Contain, Delay, Mitigate

The School supported by the SENAD Group will monitor local, national and international guidelines. This helps us set policy which reflects government guidelines. The school *may* be at a different phase compared to the UK.



Contain and prepare to delay the spread of infection

- In the event of the expected pandemic arriving, infected residents & day students would typically be cared for away from the school/home by hospitals and Health Care facilities
- Day pupils would not come into school if infected
- Infected staff would not come into school as directed by the NHS
- Infection control protocols and training enhanced
- Parents and visiting professionals asked to also play their part with infection control.

Delay and prepare to minimise the impact of next phase

If the virus spreads as is predicted NHS facilities will soon become overwhelmed.

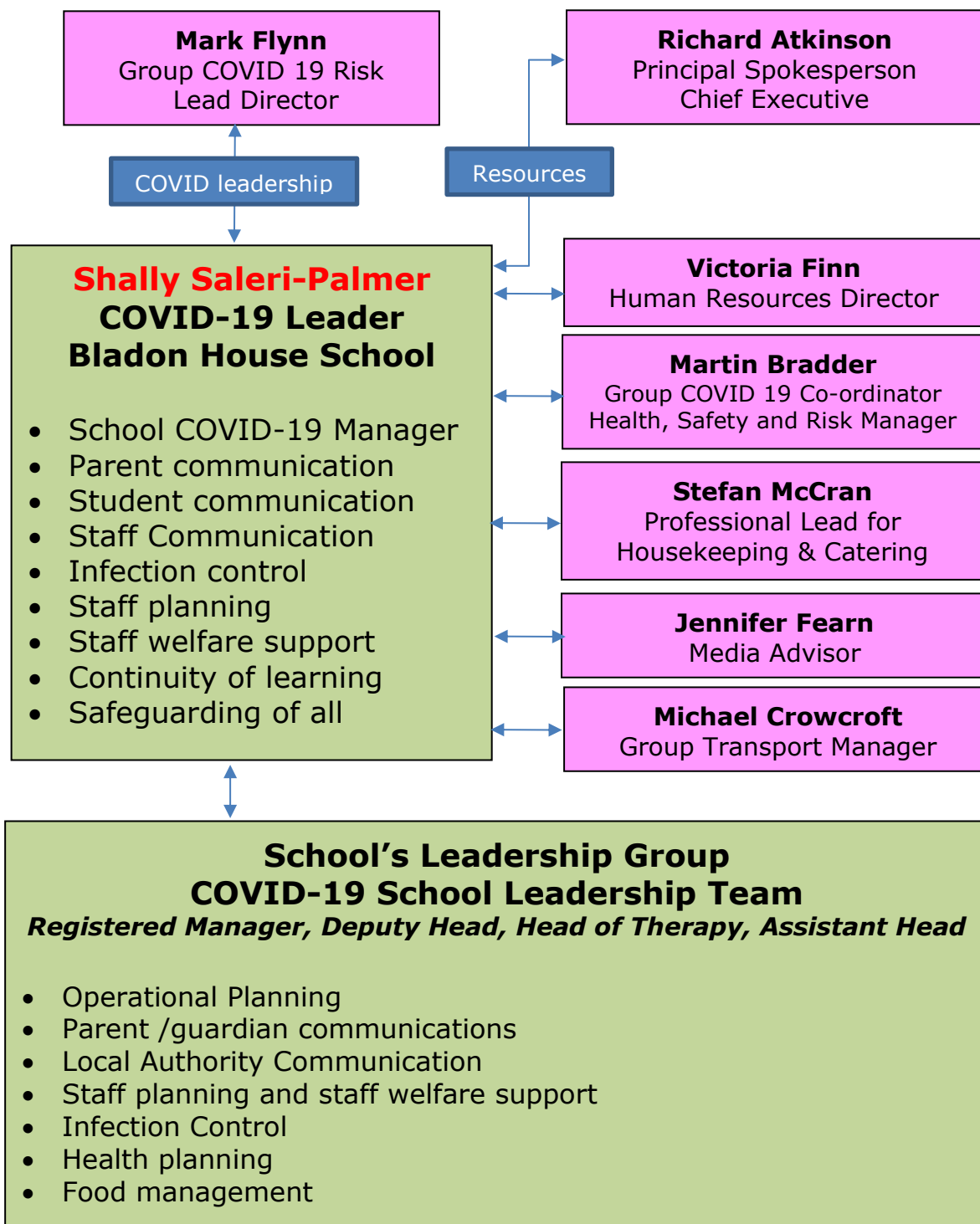
- SENAD facilities would be required to provide primary care for the virus infected resident(s). We would manage this by isolating individual house units within the children's home
- The school may be shut down for parts of the term for cleaning, as directed by PHE Health Protection Teams
- The school has clear protocols for '*barrier care*' infection control management (policy 305 within SENAD services)
- Staff roles and deployment will be reviewed to provide support capacity

Mitigate (reduce) the impact of COVID-19

- If the NHS becomes overwhelmed, SENAD facilities will be obligated to provide some primary care for the service users.
- This will need '*reactive planning*' to minimise the potential for infection spreading amongst our residents and our staff teams.
- We will follow PHE Government advice on how to manage such a scenario which will be published later this (March) month.

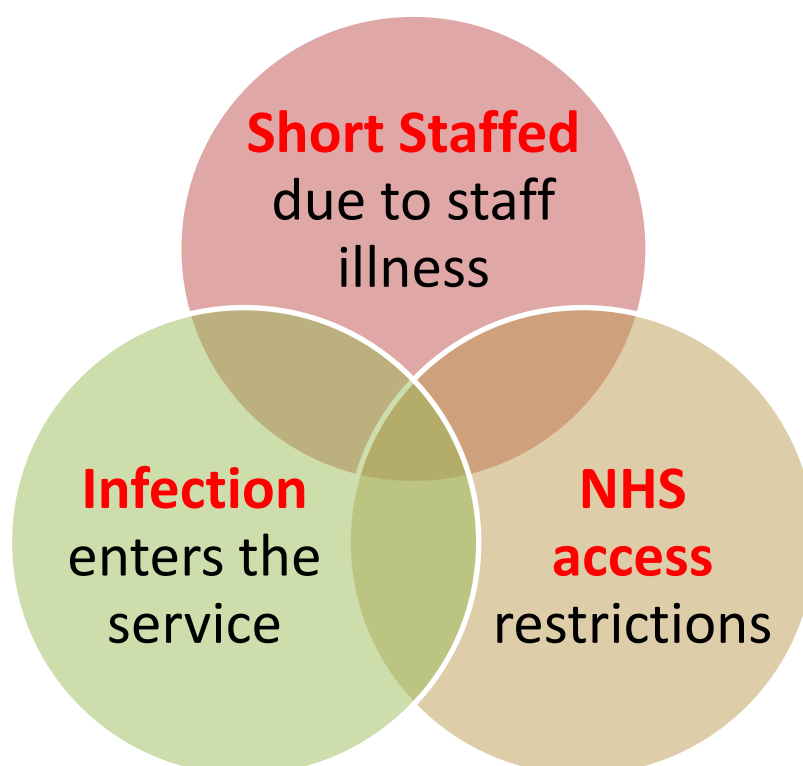
Leadership of the School's COVID-19 Response Plan

The **Head Teacher** leads the school and supports the Registered Manager who manages the allied children's home. The **SENAD Group's** Chief Operations Officer (and Responsible Individual) supports the Head Teacher and the Registered Manager.



Three Risks: Staffing, Infection & NHS Access

The scale of disruption and the longevity of the impact of the Coronavirus (COVID-19) **will place schools and homes under extreme pressure.** This is very likely to happen. The School/Home has comprehensive operating policies for managing risks and problems. This **COVID-19 Response Plan** addresses **three key risk areas that become very complicated** to manage when the coronavirus is at its peak.



What happens?	Why this happens	What needs to be done
Short staffed	Staff become ill with COVID-19 or are caring for their families so can't attend work	<ul style="list-style-type: none"> • Clear minimum emergency staffing ratios • Back up 'cover rotas' where possible
Infection	Day & resident students will become infected (80% chance)	<ul style="list-style-type: none"> • Day pupils stay at home • 52 week students have "barrier care" social care support by staff
NHS access restrictions	NHS will cancel access to treatment outside of COVID-19 priorities. GP access is harder.	<ul style="list-style-type: none"> • Clear plan to manage health conditions & primary care needs • Clear on how to escalate medical priority with GP

Planning principles: managing the three risk factors in three phases

Phase	Short Staffed	Infection present	NHS access blocked
Contain	<p>Prepare how to reduce staffing</p> <ul style="list-style-type: none"> ✓ Start to simplify routines ✓ Plan how to combine groups ✓ Consult on reduction of escorted parental visits ✓ Review & update Behaviour Support Plans ✓ Identify who '<i>can do what</i>' ✓ Identify '<i>at risk</i>' staff health issues ✓ Ensure 1st aider on site at all times ✓ Check 1st aid refreshers up to date ✓ Set up active access routes to Employee Assist Programme 	<p>Manage isolates & prepare</p> <ul style="list-style-type: none"> ✓ Isolate individuals who are infected as per PHE direction ✓ Target '<i>deep cleans</i>' ✓ Contact point cleaning protocols ✓ Info-campaign on hygiene ✓ Check stocks of barrier PPE ✓ Clear visitor protocols ✓ Refresh infection control training ✓ Consult parents about '<i>what happens</i>' if home becomes infected ✓ Check day & term-time residential student on arrival for infection – send home if unsure ✓ Set up FaceTime for parent contact 	<p>Prepare for reduced access</p> <ul style="list-style-type: none"> ✓ Triage health plan needs into critical vs deferrable ✓ Liaise with GP practice on escalation approaches ✓ Retime dental/opticians ✓ Accelerate appointments ✓ Defer non-essential treatment ✓ Identify '<i>how to manage</i>' if delayed ✓ Agree alternative consultation approaches with specialists ✓ Review amended dietary issues ✓ Review & update Behaviour Support Plans ✓ Refresh CPR training
Delay	<p>Reduce the demand for staffing</p> <ul style="list-style-type: none"> ✓ Curtail off-site activities ✓ Simplify routines ✓ Combine groups & activities ✓ Reduce escorted activities ✓ Typically reduced visitors ✓ Be clear how we support necessary medical appointments ✓ Support staff welfare ✓ Ensure 1st aider on site at all times 	<p>Parts of site infected</p> <ul style="list-style-type: none"> ✓ Barrier care for affected home ✓ Restrict access to affected house ✓ Strict hygiene control when entering '<i>infected homes</i>' ✓ Discharge residents to parental home if possible ✓ Daily deep clean within all homes ✓ Restricts movement out of home ✓ Set up '<i>internal food bank</i>' ✓ No unnecessary visitors ✓ PHE notified of infection 	<p>NHS/GP access reduces</p> <ul style="list-style-type: none"> ✓ Follow health plan triage approach ✓ Use alternative consultation models used by GP/NHS (video etc) ✓ Use alternative consultation models used by freelance specialists ✓ Call GP or 111 for non-emergency care advice ✓ Call 999 for emergency care

Planning principles: managing the three risk factors in three phases continued....

Phase	Short Staffed	Infection present	NHS access blocked
Mitigate	<p>Restrict to absolute minimum</p> <ul style="list-style-type: none"> ✓ Ensure 'minima' ratios covered ✓ Simplify food preparation ✓ Simplify in-home activities ✓ Term-Time students (day & residential) typically sent back to parental home ✓ No escorted activities ✓ Typically no visitors ✓ Support staff welfare – review staff rotation, overnight stays etc ✓ Ensure 1st aider on site at all times ✓ Access to Employee Assist Programme 	<p>Whole site is/may be infected</p> <ul style="list-style-type: none"> ✓ Barrier care for whole site ✓ Restrict access to the home ✓ Use infection control protocols to manage staff moving between homes ✓ Send other residents to parental home if possible ✓ Daily deep clean across whole site ✓ Restriction of movement ✓ No unnecessary visitors ✓ Deploy internal food bank to the homes with simplified menus ✓ PHE notified of infection 	<p>NHS¹ only accessible for '999'</p> <ul style="list-style-type: none"> ✓ Follow health plan triage approach ✓ Use alternative consultation models used by GP/NHS (video etc) ✓ Use alternative consultation models used by freelance specialists ✓ Call GP or 111 for non-emergency care advice ✓ Call 999 for emergency care

The Group COVID 19 Risk Lead Director provides dynamic guidance support, based on HM Government information, to the Head Teacher to respond to the evolving situation that COVID-19 infection brings.

¹ NHS also covers freelance specialists used by the schools such as SLT, OT, dietician, behaviour support, psychologists and psychiatry