

Advisory Sub-group on Education and Children's Issues
Update on face coverings in schools
25 August 2020

Key Points

- At the time of writing, community transmission of Covid-19 is at very low levels in Scotland. However, local clusters are regularly occurring, some involving staff and school pupils. The Test and Protect system is working quickly and effectively at contact tracing and controlling spread related to local outbreaks.
- The UK Chief Medical Officers have recognised the long-term harm that is incurred to children and young people from not attending school, and are confident in the evidence that schools are less important in the transmission of COVID-19 than for some other respiratory infections, including influenza¹.
- Transmission of COVID-19 in the school setting is much less common than transmission in other work and social environments. The risk of school-based transmission is increased when there is a rise in transmission in the community. Proportionate responses in schools are therefore closely related to population incidence and prevalence.
- The re-opening of schools and early learning and childcare settings was a priority for Scottish Government, recognising the range of benefits for children and young people of attending school/ELC settings. Scottish Ministers have committed to actions to suppress community transmission in order that schools can remain open.
- Approaches to preventing the spread of the virus are well documented. A package of approaches is required to minimise risk, reflecting the setting and population characteristics. Components include attention to physical distancing, good hand and respiratory hygiene, effective ventilation, regular cleaning, more outdoor activity, smaller groups/gatherings, and the use of physical barriers such as face coverings.
- Vulnerability to coronavirus is not homogeneous; it varies by a range of factors including age, health status, occupation, ethnicity, and living and working circumstances. Personal and group behaviours are also critical determinants of risk.
- Organisational and population-based approaches to strengthen compliance are essential. Detailed messaging, environmental adjustments, peer influence, and consistency across settings will all help.
- Face coverings need to be seen as one component of a response to preventing school-based transmission of COVID-19. Evidence about the important role that face coverings play has strengthened in recent weeks.
- WHO advises² (i) that children aged 5 years and under should not be required to wear masks; (ii) that use of masks by children aged 6-11 is dependent on a

¹ <https://www.gov.uk/government/news/statement-from-the-uk-chief-medical-officers-on-schools-and-childcare-reopening>

² <https://www.who.int/news-room/q-a-detail/q-a-children-and-masks-related-to-covid-19>

number of factors; and (iii) that children aged 12 and over should wear a mask under the same conditions as adults, in particular when they cannot guarantee at least a 1 metre distance from others and there is widespread transmission in the area. The report emphasises the need to apply the advice appropriately to the national and local context.

- Consistent with the sub-group's approach and advice, WHO, the Chief Medical Officers and other professional bodies emphasise the importance of making a balanced assessment of risk and taking an approach which reduces the likelihood of harm across a range of domains.
- The sub-group's advice has been reviewed in light of the recent WHO *Advice on the use of masks for children in the community in the context of COVID-19*³ and other recent evidence relating to the effectiveness of face coverings, the prevalence of asymptomatic cases, and the role of children and young people in transmission. Further to this, the sub-group recommends strengthening the existing guidance for schools in Scotland.
- Guidance on face coverings for school transport should be brought in line with that for public transport, with all passengers being required to wear face coverings, unless exempt for health or other reasons. This recognises the enclosed nature of the transport (with associated difficulties in sustaining distancing and natural ventilation), the mix of age groups involved and the likelihood of pupils from different schools travelling together.
- Senior secondary pupils attending college or university for courses, or workplaces for training/work experience, should wear face coverings in those settings. This recognises the risk of establishing bridges of transmission between the school and these wider settings where there is greater mixing and potential exposure to coronavirus.
- Secondary school pupils and adults should be required to wear face coverings in communal areas in schools, where physical distancing has been very difficult to ensure; movement is considerable - often with mixing of groups and raised voices and expiration; and negative impacts on learning and communication are less relevant than they are in the classroom.
- Enhanced attention is required to observe and implement the current guidance on physical distancing in the classroom, reinforcing the importance of adults maintaining distance from pupils and of the precautionary approach encouraging distancing between young people particularly in the senior phase.
- If there is a local cluster of cases, a decision may be made locally to recommend face coverings for all secondary school pupils including in the classroom until any outbreak is resolved. Localised escalation should be determined by the nature and scale of the cluster, reflecting the increased potential for school-based transmission when there is a surge in local prevalence.
- There is likely a small increased risk of transmission associated with the intermittent use of face coverings throughout the school day, as they are taken on and off, stored, and disposed of. There is not yet sufficient evidence to know how significant this risk is. In the meantime, the above approach seems proportionate to the known balance of risks and should be

³ https://www.who.int/publications/i/item/WHO-2019-nCoV-IPC_Masks-Children-2020.1

accompanied by a range of approaches to teach about the safe use of face coverings, and to monitor and reinforce behaviours.

- These recommendations are made in the context of the low prevalence of the virus in Scotland, and the localised nature of the clusters currently being seen. In some aspects relevant evidence is absent or of low quality. Principles of proportionality, clarity of approach, and overall risk minimisation have been applied in managing the uncertainties that result. The advice seeks to achieve a balance across a range of impacts, placing direct COVID-19-related risks in the context of educational, social and developmental risks for children and young people. Appropriate actions will need to be reviewed as further evidence develops and the pandemic progresses within Scotland.

Summary of sub-group considerations on 18 August

1. The Advisory Sub-group met on 18 August and considered the use of face coverings in schools and on school transport in light of any new evidence and the experience of school reopening in Scotland.
2. The sub-group's advice of 16 July was that "Face coverings should not be required for most children (those clinically advised to wear a covering would be an exception). Adults in schools (including in the school environment, such as at the school gate) should not need to wear face coverings as long as they can retain two metre distancing with other adults or pupils. Where adults cannot keep two metre distance, are interacting face-to-face and for about 15 minutes or more, face coverings should be worn." Also "Should the prevalence of the virus in the population start rising, nationally or in parts of Scotland, we would advise that consideration be given to encouraging the wearing of face coverings, especially among adults and older pupils in secondary schools, as part of an enhanced system of approaches to reduce transmission."
3. Advice on use of face coverings was reviewed by both the C-19 Advisory Group and the Sub-group at the end of July. Both groups concluded that they did not recommend changing the advice but stressed that ongoing vigilance and monitoring would be needed.
4. The sub-group discussion on 18 August recognised the recent context of a number of localised clusters of cases involving school-aged pupils and/or staff, and also the concerns that were being expressed about the risks of transmission in the school context, particularly given difficulties of physical distancing throughout the school day.
5. The key points of the discussion were:
 - Since the original advice note of 16 July, evidence that face coverings are effective at reducing transmission has strengthened, and there is additional evidence that face coverings also reduce the viral load. There is also a growing body of evidence about the role of young people in transmitting the virus, with older teenagers transmitting at levels similar to adults.
 - There is no consensus internationally about the need for pupils to wear face coverings in the school environment. Countries are taking different approaches, and across the UK nations guidance to date does not require face coverings to be worn by pupils in school.
 - Although school-aged pupils in Scotland have tested positive since schools re-opened, the majority of transmission is occurring outside school settings, associated with socialising, international travel, or household contacts. Nevertheless, there is a risk of transmission within the school environment and proportionate action is required to minimise this.
 - The balance of harms approach that has underpinned the advice to date remains essential in considering use of face coverings in schools. There is some evidence that face coverings have a number of negative effects, including impairing verbal and non-verbal communication, blocking emotional

signalling between teachers and students, and impacting educational attainment and physical activity.

- The evidence is mixed, but there are also suggestions that face coverings may provide a sense of security that reduces compliance with other mitigating measures; and because of problems with understanding speech, people may move closer together, without intention, and thereby increase infection risk.
- The practicalities of wearing face coverings in a school setting throughout the day are not clear. Anecdotally sub-group members noted the tendency for people to carry and dispose of them unhygienically, and the risks of coverings being shared among friends, or being left lying around on surfaces. If greater use of face coverings was required, equalities and human rights issues would also need to be taken into account (including the costs, and the potential for bullying of pupils unable to wear a face covering).
- The need to recognise face coverings as one of a package of measures and not a mitigation that should be applied in isolation was also emphasised. Nevertheless, the sub-group noted that 'masks' were symbolic, effective, and were being promoted in a range of settings as an important mitigation. Consistency of advice across settings was recognised as being important to enhance understanding and increase compliance. As we move towards winter and other mitigations such as ventilation and outdoor activity become less feasible, the use of face coverings may become an increasingly important preventative approach.

6. The sub-group concluded that there was a need for flexibility and a graduated approach. Preparation for new evidence and potentially an international consensus advising use of face coverings by pupils would be appropriate and precautionary.

Update since sub-group meeting

7. Since the sub-group meeting on 18 August, WHO and UNICEF have published advice on face coverings and children⁴, which represents such a consensus. Key conclusions and advice are as follows:
- The benefits of wearing masks in children, to control COVID-19, should be weighed against potential harm associated with wearing masks, including feasibility and discomfort, as well as social and communication concerns.
 - The best interest, health and wellbeing of the child should be prioritised; the guidance should not negatively impact development and learning outcomes.
 - Consider the feasibility of implementing recommendations in different social, cultural and geographic contexts.
 - For children aged 6-11, a risk-based approach should be applied to the decision about face coverings, taking into consideration issues including local prevalence and transmission rates, social and environmental norms and customs, the child's capacity to comply, potential impact on learning and psychosocial development, and additional specific considerations.
 - Young people aged 12 or older should follow (national) guidance for mask use in adults. Additional specific considerations and adaptations for settings such as schools will need to be specified.

⁴ https://www.who.int/publications/i/item/WHO-2019-nCoV-IPC_Masks-Children-2020.1

- The use of masks by pupils in schools should only be considered as one part of a comprehensive strategy to limit the spread of COVID-19.
- Situations where wearing a mask can significantly interfere with the learning process and have a negative impact on critical school activities require special consideration.
- The views of teachers and educators on the perception of risks, and the time required to ensure adherence, should be considered.

Summary and conclusions

8. The WHO advice and wider evidence has been considered in the context of the low prevalence of the virus in Scotland, the localised nature of transmission in clusters, the limited role that schools play in transmission, and the rapid and effective Test and Protect system. Recommendations therefore focus on areas where the likelihood of transmission is heightened, in order to further mitigate those risks. In addition the importance of local flexibility to increase the use of face coverings in response to local clusters of cases is emphasised.
9. Considerations in the sub-group have led us to advise that pupils attending colleges or universities for courses, training or support should be required to wear face coverings in those settings; as should pupils attending workplaces for work experience. This will provide an important additional protection against the establishment of bridges of transmission as those students mix with others and move between schools and colleges/universities. Separate guidance being developed for colleges and universities should ensure that risk assessments are carried out by these institutions, including identification of communal areas where face coverings will be required by all. Application of physical distancing rules will be required in these settings to reduce the risks of transmission.
10. The use of face coverings by everyone travelling on school transport (bringing it in line with public transport) is recommended, recognising the enclosed nature of transport, the difficulty of distancing and of natural ventilation as we move towards winter, and the mixed age groups (and sometimes pupils from a number of different schools) travelling together.
11. Face coverings are also advised for secondary school pupils and adults in those circumstances in schools where distancing is proving particularly difficult, such as when moving through the school towards communal areas, stairways and exits. Crowding appears to happen in some schools in these circumstances and the wearing of face coverings would mitigate the associated risks.
12. In addition to the above recommendations for national guidance, where there is evidence of local clusters with a link to a school, a decision might be made locally in conjunction with PAGs/Incident Management Teams to recommend face coverings for all secondary school pupils, including within classrooms, until the outbreak is resolved. National guidance could be provided recommending the use of face coverings by pupils in these situations, alongside other actions.

13. Should situations arise where there is evident community transmission again and overall prevalence is rising, a move to blended learning - or school closure - would be required.
14. Lastly, the sub-group recognised the importance of communication, implementation and compliance. An emphasis on the balance of risks, and on the need to see face coverings in the context of other mitigations, was felt to be important. Recognition of the impact of the pandemic on teenagers and young adults, and the need to support their wellbeing – and avoid blame and stigma – was also emphasised. Engagement with pupils locally, to engender a sense of collective responsibility, was recommended. The sub-group also advised on the need to enhance public understanding about why different approaches are appropriate in the school setting compared with other settings. As well as the balance of risks referred to earlier, the ability to contact trace more simply, the range of mitigations being put in place, and the efforts to establish more stable groupings of students during a school day are all key points.
15. In summary, given the balance of evidence, the sub-group advises that the evidence now suggests the need for a strengthening of the existing guidance. While prevalence remains low and school-based transmission is not occurring, proportionate steps would be to advise use of face coverings by all pupils travelling on school transport and by secondary school pupils in communal areas within schools. Face coverings should also be worn by senior pupils attending courses at college or university, or work-based training/placements. There is some evidence of increased risk in each of these settings, and education- and communication-related harms associated with faces being covered would not be incurred. Detailed information would need to be providing explaining the appropriate and hygienic way of wearing coverings, and of carrying and cleaning/disposing of them. Should prevalence rise and school-based transmission occur, the wearing of face coverings by all secondary pupils throughout the school day, including in classrooms, might be a commensurate response, advised in national guidance and triggered locally through the established incident management processes.
16. There is a need to continue to review the evidence and the experience of schools and ELC settings over coming weeks and months, and to be open to further flexibility and change.