

## ADVICE FROM THE COVID-19 ADVISORY SUB-GROUP ON EDUCATION AND CHILDREN'S ISSUES

October 2020

### The commission

During summer 2020, the COVID-19 Advisory Sub-Group on Education and Children's Issues ('the sub-group') produced advice on a number of issues to enable development of detailed guidance to support a safe return to school and Early Learning and Childcare (ELC) for all children, young people and staff in August 2020. This earlier advice is available at the following links:

- [Physical distancing in schools](#);
- [Physical distancing in early learning and childcare settings \(ELC\)](#);
- [Use of face coverings in schools and ELC](#);
- [School transport](#);
- [School trips which include an overnight stay](#);
- [Physical education, music and drama](#).

The [First Minister's statement to Parliament](#) on 7 October 2020 intimated that all sectors would be asked to review the guidance and regulation on their operating practices. To that end, the sub-group has received a commission to review all of its earlier advice to answer the following question:

**Considering the changed position on infection and transmission rates, the evidence and experience around school re-opening to date, and any fresh scientific evidence that has since become available, does the sub-group consider that its original advice on the following key issues should be:**

- a) maintained;
- b) strengthened / augmented (and if so, how); or
- c) relaxed (and if so, how)?

The sub-group has considered all of its advice and made a number of amendments which are set out in detail in this paper. Where no amendment has been made, the existing advice still stands.

### Overall context

The sub-group's deliberations have been supported by evidence from the Scientific Advisory Group for Emergencies (SAGE) together with an evidence paper on the position in Scotland produced by the Scottish Government. It has reflected on:

- the changed position on infection and transmission rates;
- the evidence and experience around school / ELC reopening to date; and
- any fresh scientific evidence that has since become available.

## **Infection and transmission rates**

When the original advice was produced, community transmission of COVID-19 was at a low level in Scotland, and the sub-group continues to monitor carefully the incidence and prevalence of COVID-19 in Scotland, and in school communities in particular.

At the present time, the rate of growth in the epidemic is increasing, with R now significantly above one (range 1.3 to 1.6). This is leading to accelerating numbers of cases and a rising test positivity rate in most areas of Scotland. The number of new daily infections for Scotland is estimated as being between 154 and 330 per 100,000 people.<sup>1</sup>

Alongside this, the situation is not the same now as it was back in July. Significant restrictions have been put in place; there is a much enhanced Test and Protect system; there is wider use of face coverings in the community; and schools have become adept at implementing mitigating measures. A programme of independent compliance checks of schools by the Health and Safety Executive demonstrated that schools were doing an effective job of implementing the school reopening guidance.<sup>2</sup>

## **Evidence and experience on school and ELC re-opening**

The National Collaborating Centre for Methods and Tools' Rapid Evidence Review concluded that "the risk of transmission from children to children and children to adults in primary school and day care settings appears low, particularly when infection control measures are in place, however findings may change as new data becomes available."<sup>3</sup>

The World Health Organisation's (WHO) summary of what we know about COVID-19 transmission in schools<sup>4</sup> suggests that schools being open did not lead to a rise in community spread where infection was low, that where school outbreaks did occur, it was more likely that the virus was introduced by adult personnel, and that studies suggest that children aged under 10 are less susceptible and less infectious than older children.

The vast majority of cases within a school setting in Scotland are individual cases and not part of larger outbreaks, as confirmed by follow up testing. This suggests a low level of transmission within school settings. Where there are outbreaks (two or more cases) associated with a school, these tend to be either as family clusters such as a parent and two children, outbreaks concentrated among staff members, or where there has been a community association, rather than the school being the setting for transmission in itself.

The evidence also demonstrates that implementation of infection control measures are important to limiting spread. In Scotland, the Test and Protect system is working

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<sup>1</sup><https://www.gov.scot/publications/?term=modelling&cat=filter&topics=Coronavirus%20in%20Scotland&publicationTypes=research-and-analysis&page=1>

<sup>2</sup><https://www.gov.scot/publications/coronavirus-covid-19-guidance-preparing-start-new-school-term-august-2020-version-3/pages/1/>

<sup>3</sup>[National Collaborating Centre for Methods and Tools. \(2020\) Rapid Evidence Review: What is the specific role of daycares and schools in COVID-19 transmission? Update 7. Published 23 Sept. 2020](#)

<sup>4</sup>[https://www.who.int/docs/default-source/coronaviruse/risk-comms-updates/update39-covid-and-schools.pdf?sfvrsn=320db233\\_2](https://www.who.int/docs/default-source/coronaviruse/risk-comms-updates/update39-covid-and-schools.pdf?sfvrsn=320db233_2)

quickly and effectively at contact tracing, and controlling spread to prevent or reduce local outbreaks.

The UK Chief Medical Officers (CMOs)<sup>5</sup> have been clear that school attendance is very important for children and young people, and is critical to reduce inequality, improve life chances and enhance physical and mental health. Schools also play an essential role in safeguarding vulnerable children. The CMOs remain confident in the evidence that schools and ELC settings are less important in the transmission of COVID-19 than for some other respiratory infections, including influenza. Transmission of COVID-19 in the school and ELC setting is much less common than transmission in other work and social environments. Nevertheless, 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.

## **Fresh scientific evidence**

### ***COVID-19 and children***

Evidence is building on the role of children in the transmission of coronavirus. Around the world, children have made up a minority of confirmed cases of COVID-19 during the first wave of the pandemic, usually contributing between 1–5% of total case numbers.<sup>6 7</sup>

#### *Transmission in children*

Currently, the extent to which children contribute to transmission of COVID-19 is not completely understood. The emerging evidence suggests that children and young people have a limited role in transmission of COVID-19. According to the evidence available, children may have lower susceptibility to infection compared to adults, and the data suggests that this may vary by age among children.<sup>8</sup> A large contact-tracing study in the Republic of South Korea showed that only 5% of contacts of children aged 0-9 years became infected, the lowest for all age groups.<sup>9</sup> This suggests young children are less contagious than older children and adults. In Scotland case numbers match this hypothesis: they are higher for older children, with most confirmed cases occurring in the young adult 18-19 age range followed by the 16-17 age range, and dropping off sharply in children 15 and under.

#### *Symptoms in children*

The infection appears to take a milder course in children than in adults. Clinical signs are very similar to other childhood respiratory infections, and very few infected children develop severe disease.<sup>10</sup> Studies suggest that approximately 50% of children may be asymptomatic, and only 10-15% will exhibit symptoms consistent with COVID-19 case definitions (cough, fever, shortness of breath).<sup>11</sup>

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<sup>5</sup> <https://www.gov.uk/government/news/statement-from-the-uk-chief-medical-officers-on-schools-and-childcare-reopening>

<sup>6</sup> <https://dontforgetthebubbles.com/evidence-summary-paediatric-covid-19-literature/>

<sup>7</sup> <https://www.rcpch.ac.uk/resources/covid-19-research-evidence-summaries#epidemiology>

<sup>8</sup> <https://www.rcpch.ac.uk/resources/covid-19-research-evidence-summaries#transmission>

<sup>9</sup> [https://wwwnc.cdc.gov/eid/article/26/10/20-1315\\_article](https://wwwnc.cdc.gov/eid/article/26/10/20-1315_article)

<sup>10</sup> <https://www.rcpch.ac.uk/resources/covid-19-research-evidence-summaries#prognosis>

<sup>11</sup> <https://dontforgetthebubbles.com/evidence-summary-paediatric-covid-19-literature/>

In Scotland, from the start of the pandemic to the week ending 16 October 2020, a total of 95 children and young people aged under 20 years had been admitted to hospital due to COVID-19, compared with 7,970 adults over 20 years old. Of those children and young people admitted, 41 were aged 0-4, 22 were aged 5-14 years and 32 were aged 15-19 years.<sup>12</sup> There were **no deaths** due to COVID-19 among children aged under 15 years, while in this age group there were 184 deaths due to other causes in the year 2020 up to the 25 October.<sup>13</sup>

### *Testing in children*

From the beginning of March to the week ending 18 October 2020, a total of 2,566 children in Scotland (aged 2-17 years) tested positive for COVID-19, compared to 53,853 adults over 18.<sup>14</sup>

| Age group                          | 2-4 years | 5-11 years | 12-17 years | 18+    |
|------------------------------------|-----------|------------|-------------|--------|
| # who tested positive for COVID-19 | 214       | 718        | 1,634       | 53,853 |

In Scotland testing greatly increased following the return to school, with a 60-fold increase in testing between mid-April and the end of August.<sup>15</sup> Even so, the percentage of newly tested children that are positive has increased only slightly, and remains below that for the general population. Before schools went back (from the start of the pandemic until week ending 16 August) there were 538 positive tests among cases from 43,715 tests taken among children aged 2-17: a rate of **1.2%**. Since schools went back (from week ending 23 August to week ending 18 October) there were 2,363 positive tests from 122,017 tests taken among children aged 2-17: a rate of **1.9%**. In recent weeks this test positivity rate for 2-17 year olds has increased (it was 5.2% in week ending 27 September, 5.6% in week ending 4 October and 6.4% in week ending 11 October) as test positivity has increased in the general population.<sup>16,17</sup>

### *Transmission at school / ELC*

The balance of evidence so far suggests that schools and ELC settings play only a limited role in overall transmission.<sup>18</sup> The greater risks appear to be around adult-

<sup>12</sup> <https://beta.isdscotland.org/find-publications-and-data/population-health/covid-19/covid-19-statistical-report/28-october-2020/dashboard>

<sup>13</sup> <https://www.nrscotland.gov.uk/covid19stats>

<sup>14</sup> <https://www.opendata.nhs.scot/dataset/weekly-covid-19-statistical-data-in-scotland/resource/ea092cd7-2507-432b-be3f-751debc85d33>

<sup>15</sup> [https://beta.isdscotland.org/media/5459/supplementary\\_publication.xlsx](https://beta.isdscotland.org/media/5459/supplementary_publication.xlsx)

<sup>16</sup> Please note the figures in brackets have been calculated using a changed method of reporting percentage positive, namely the 'test positivity rate' rather than the 'percentage of newly tested individuals that are positive' – see link for further detail <https://www.gov.scot/publications/coronavirus-covid-19-data-definitions-and-sources/>

<sup>17</sup> <https://www.opendata.nhs.scot/dataset/weekly-covid-19-statistical-data-in-scotland/resource/437b1fe1-0c38-465d-867f-e9654b662196>

<sup>18</sup> <https://rs-delve.github.io/reports/2020/07/24/balancing-the-risk-of-pupils-returning-to-schools.html#schools-and-infection>

adult transmission in school / ELC settings, as referred to the evidence paper.<sup>19</sup> The sub-group has considered these risks, along with the wider evidence and, accordingly, strengthened its advice in relevant areas (particularly with regard to the use of face coverings, see below). The sub-group would also want to re-emphasise the importance of adult compliance in and out of school to ensure schools remain safe environments.

### ***Fomite transmission***

Recent studies suggest that environmental contamination leading to transmission of COVID-19 is unlikely to occur in real life conditions, provided that standard cleaning procedures and precautions are enforced.<sup>20</sup> In schools, this would mean following the general guidance on hand washing and respiratory hygiene, including cleaning and disinfecting frequently touched objects and surfaces, and careful hand-washing with soap and warm water and / or use of alcohol-based hand sanitiser before and after handling jotters (or other pieces of equipment).

### ***Aerosol transmission and face coverings***

The World Health Organization (WHO) and the United Nations Children's Fund (UNICEF) advised on the use of face coverings according to a risk-based approach, as part of a comprehensive package of public health interventions that can prevent and control the transmission of certain viral respiratory diseases, including COVID-19.<sup>21</sup>

The best available scientific evidence is that, when used correctly, a face covering may provide some additional protection, especially in crowded and less well-ventilated spaces, and where two metre distancing is not possible.<sup>22 23 24</sup>

The WHO advises that (i) children aged 5 years and under should not be required to wear masks; (ii) use of masks by children aged 6-11 is dependent on a number of factors; and (iii) children aged 12 and over should wear a mask under the same conditions as adults, in particular when they cannot guarantee at least a one metre distance from others and there is widespread transmission in the area.<sup>25</sup>

## **Physical distancing in schools**

In the sub-group's previous advice on physical distancing in schools, published on 16 July 2020, it was concluded that, "subject to continued suppression of the virus and to surveillance and mitigations being in place, the balance of the evidence suggests that no distancing should be required between children in primary schools. The evidence is less clear for secondary schools but at present we would support the same approach being taken in secondary schools on the basis of the balance of known risks and the effectiveness of mitigations." This advice drew on a wide range of scientific

<sup>19</sup> <https://www.gov.scot/publications/coronavirus-covid-19-children-and-transmission/>

<sup>20</sup> [https://www.thelancet.com/journals/laninf/article/PIIS1473-3099\(20\)30678-2/fulltext](https://www.thelancet.com/journals/laninf/article/PIIS1473-3099(20)30678-2/fulltext)

<sup>21</sup> [file:///C:/Users/u208013/Downloads/WHO-2019-nCov-IPC\\_Masks-2020.4-eng.pdf](file:///C:/Users/u208013/Downloads/WHO-2019-nCov-IPC_Masks-2020.4-eng.pdf)

<sup>22</sup> <https://www.nature.com/articles/d41586-020-02801-8>

<sup>23</sup> [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/892043/S0484\\_Transmission\\_of\\_SARS-CoV-2\\_and\\_Mitigating\\_Measures.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/892043/S0484_Transmission_of_SARS-CoV-2_and_Mitigating_Measures.pdf)

<sup>24</sup> <https://rs-delve.github.io/reports/2020/05/04/face-masks-for-the-general-public.html>

<sup>25</sup> [https://www.who.int/publications/i/item/WHO-2019-nCoV-IPC\\_Masks-Children-2020.1](https://www.who.int/publications/i/item/WHO-2019-nCoV-IPC_Masks-Children-2020.1)

evidence including on the role of children in transmission,<sup>26</sup> as well as general evidence around two metre distancing and other mitigations.<sup>27 28 29</sup>

Previous advice recommended:

- Avoiding large gatherings and crowded spaces;
- Wherever possible, keeping children and young people within the same groups for the duration of the school day;
- Reviewing timetabling to reduce movement of groups of pupils around the school estate as much as possible;
- Two metre distancing should remain in place wherever possible between adults, and between adults and children who are not from the same household;
- Distancing should be adapted and used alongside other strategies to reduce transmission, including respiratory hygiene, ventilation, improved cleaning regimes within schools, including regular cleaning of surfaces, and regular handwashing with greatest emphasis on hand hygiene and surface cleaning;
- As close as possible to zero tolerance of symptoms, with observation of self-isolation rules and cooperation with track and trace;
- Minimising sharing of equipment / utensils / toys / books, use of smaller groups and more outdoor activities.

**Considering the changed position on infection and transmission rates, the evidence and experience of school re-opening between August and October 2020, and recent scientific evidence, the sub-group has concluded that its previous advice on physical distancing in schools should be maintained, and the need for compliance should be strongly reinforced. In particular, adults should be very alert to symptoms and should not go to work if they have even mild symptoms.**

The sub-group acknowledges that the school re-opening guidance<sup>30</sup> (published on 11 September 2020) took a more precautionary approach than the sub-group's July 2020 advice by encouraging distancing between young people where possible in secondary schools, particularly for those in the senior phase. The revised [Reducing Risks in Schools guidance](#) (published on 30 October 2020) takes the same more precautionary approach. The sub-group acknowledges that this guidance is being implemented successfully in many schools and the success of these additional mitigation measures may be contributing to the low transmission rates observed in secondary schools in August-October 2020. The sub-group would therefore encourage continuation of this precautionary approach wherever possible in secondary schools.

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<sup>26</sup> <https://adc.bmj.com/content/105/7/618>

<sup>27</sup> [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/892043/S0484\\_Transmission\\_of\\_SARS-CoV-2\\_and\\_Mitigating\\_Measures.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/892043/S0484_Transmission_of_SARS-CoV-2_and_Mitigating_Measures.pdf)

<sup>28</sup> <https://www.gov.scot/publications/covid-19-advisory-group-physical-distancing-advice/>

<sup>29</sup> <https://rs-delve.github.io/reports/2020/07/24/balancing-the-risk-of-pupils-returning-to-schools.html>

<sup>30</sup> <https://www.gov.scot/publications/coronavirus-covid-19-guidance-preparing-start-new-school-term-august-2020-version-3/pages/1/>

## Physical distancing in ELC

In the sub-group's previous advice on physical distancing in ELC, published on 30 July 2020, it concluded that "subject to continued suppression of the virus, and to surveillance and mitigations being in place, the balance of the evidence suggests that no distancing should be required between young children, and young children and adults in ELC settings.... Maintenance of two metre distance in adult-to-adult interactions is still advised." This advice again drew on a wide range of scientific evidence including on the low susceptibility of children in the age groups accessing ELC to COVID-19;<sup>31</sup> <sup>32</sup> their low likelihood of onward transmission;<sup>33</sup> and the milder course the infection appears to take in them.<sup>34</sup> <sup>35</sup>

Previous advice recommended that a package of measures be put in place to reduce the risk of transmission of the virus in ELC settings:

- "There should be an increased emphasis on teaching and practising good hand hygiene, respiratory hygiene (both indoors and outdoors) and surface cleaning.
- Hand washing / sanitising should be required for everyone on every entry to the setting or moving of rooms. Young children will need assistance to wash / sanitise hands effectively. Young children will also need support to dry hands effectively. Care should be taken to ensure that any products which are being used are age appropriate and suitable for sensitive skin.
- As close as possible to zero tolerance of symptoms should be in place, and strict compliance with the Test and Protect system.
- The preference should be to avoid crowded indoor spaces and, as much as possible, to keep children within the same groups for the duration of the day.
- Sharing of equipment / utensils / toys / books should be minimised; and smaller groups, more outdoor interactions and activities put in place.
- Movement between settings of children should be reduced as far as possible.
- Movement between settings of temporary / supply / peripatetic staff etc. should be kept to an absolute minimum."

**Considering the changed position on infection and transmission rates, the evidence and experience of ELC re-opening between August and October 2020, and recent scientific evidence, the sub-group has concluded that its previous advice on physical distancing in ELC settings should be maintained, and the need for compliance should be strongly reinforced. In particular, adults should be very alert to symptoms and should not go to work if they have even mild symptoms.**

## Face coverings in schools / ELC

The sub-group's previous advice on use of face coverings in schools, published on 25 August 2020, drew on strengthening evidence<sup>36</sup> (in particular, the WHO advice on the

<sup>31</sup> Goldstein E., Lipsitch M & Cevik M On the effect of age on the transmission of SARS-CoV-2 in households, schools and the community. (Preprint.)

<sup>32</sup> <https://rs-delve.github.io/reports/2020/07/24/balancing-the-risk-of-pupils-returning-to-schools.html>

<sup>33</sup> <https://pediatrics.aappublications.org/content/146/2/e2020004879>

<sup>34</sup> <https://www.rcpch.ac.uk/resources/covid-19-research-evidence-summaries>

<sup>35</sup> <https://dontforgetthebubbles.com/evidence-summary-paediatric-covid-19-literature/>

<sup>36</sup> <https://rs-delve.github.io/reports/2020/05/04/face-masks-for-the-general-public.html>

use of masks for children in the community in the context of COVID-19<sup>37 38</sup>) about the important role that face coverings play as one component of a response to preventing school-based transmission of COVID-19.

This advice recommended:

- 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.
- Senior secondary pupils attending college or university for courses, or workplaces for training / work experience, should wear face coverings in those settings.
- Secondary school pupils and adults should be required to wear face coverings in communal areas in schools.
- 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.

**Considering the changed position on infection and transmission rates, particularly amongst adults, the evidence and experience of school re-opening between August and October 2020, and recent scientific evidence, the sub-group has concluded that its previous advice on face coverings in schools and ELC settings should be strengthened and augmented to manage the main area of risk within schools, which is adult to adult transmission. The advice has, therefore, been brought in line with current advice in the community, and the need for compliance should be strongly reinforced.**

In particular, the sub-group would now recommend that in **secondary schools** (unless exempt) :

- Two metre distancing should remain in place wherever possible between adults and children who are not from the same household.
- Use of face coverings should align with Public Health Scotland's current advice, namely that face coverings should be worn by adults where they cannot keep two metre distance from other adults and / or young people.
- Face coverings should be used by adults when not working directly with children, for example when moving around settings, when gathering in staff, office and admin areas, and in canteens.
- Face coverings should be strongly encouraged for parents and other visitors to the school site (whether entering the building or otherwise), including parents at drop-off and pick-up.
- For classroom assistants and those supporting children with Additional Support Needs, who routinely have to work within two metres of secondary or special school pupils, it is advised that these adults should wear face coverings as a general rule. However, this should be balanced with the wellbeing and needs of the young person, recognising that face coverings may limit communication and could cause distress to some young people.

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<sup>37</sup> [https://www.who.int/publications/i/item/WHO-2019-nCoV-IPC\\_Masks-Children-2020.1](https://www.who.int/publications/i/item/WHO-2019-nCoV-IPC_Masks-Children-2020.1)

<sup>38</sup> <https://www.who.int/news-room/q-a-detail/q-a-children-and-masks-related-to-covid-19>

In **primary schools** (unless exempt) :

- Two metre distancing should remain in place wherever possible between adults and children who are not from the same household.
- Use of face coverings should align with Public Health Scotland’s current advice, namely that face coverings should be worn by adults where they cannot keep two metre distance from other adults.
- As for secondary schools, face coverings should be used by adults when not working directly with children, for example when moving around settings, when in staff, office and admin areas, and in canteens.
- As for secondary schools, face coverings should be strongly encouraged for parents and other visitors to the school site (whether entering the building or otherwise) including parents at drop-off and pick-up.

And in **ELC settings** (unless exempt) :

- Use of face coverings should align with Public Health Scotland’s current advice, namely that face coverings should be worn by adults where they cannot keep two metre distance from other adults.
- As for schools, face coverings should be used by adults **when not working directly with children**, for example when moving around settings, when gathering in staff, office and admin areas, and in canteens.
- As for schools, face coverings should be strongly encouraged for parents and other visitors to the ELC site (whether entering the building or otherwise), including parents at drop-off and pick-up.

For both primary and secondary schools, and for ELC settings, the sub-group’s previous advice (included in the advice on physical distancing) that any adult wishing to wear face protection should be enabled to do so, has not changed.

| Face Coverings   | Secondary School | Primary School | ELC |
|--|------------------|----------------|-----|
| To be worn by adults where they cannot keep two metre distance from other adults and / or children and young people.   |                  |                |     |
| To be worn by adults where they cannot keep two metre distance from other adults.  |                  |                |     |
| To be worn by adults when not working directly with children, for example when moving around settings, when gathering in staff, office and admin areas, and in canteens  |                  |                |     |
| Should be strongly encouraged for parents and other visitors to the school site (whether entering the building or otherwise) including parents at drop-off and pick-up   |                  |                |     |
| Classroom assistants and those supporting children with Additional Support Needs, who routinely have to work within two metres of secondary or special school pupils, should wear face coverings as a general rule. However, this should be balanced with the wellbeing and needs of the young person, recognising that face |                  |                |     |

|  |  |  |  |
|--|--|--|--|
| coverings may limit communication and could cause distress to some young people.   |  |  |  |
| Any adult wishing to wear a face covering should be enabled to do so.  |  |  |  |
| To be worn by pupils and adults in communal areas in schools.  |  |  |  |
| To be worn by senior secondary pupils attending college or university for courses, or workplaces for training / work experience. |  |  |  |

There may be a need to strengthen primary school and ELC advice further in future to align it with advice in secondary schools. The sub-group will follow the evidence here closely in the coming weeks and months.

### School transport

The sub-group's previous advice on school transport was published on 16 July 2020. Noting updated advice on face coverings (above) the sub-group concluded that this advice should otherwise be **maintained, and the need for compliance should be strongly reinforced.**

### School trips which include an overnight stay

The sub-group's previous advice on school trips which include an overnight stay was published on 25 August 2020 and stated that decisions to reinstate school trips including an overnight stay would be dependent on there being low levels of COVID-19 infection in the population. Noting updated advice on face coverings (above) the sub-group concluded that this advice should otherwise be **maintained, and the need for compliance should be strongly reinforced.**

### Movement between settings

The sub-group has previously considered the movement of staff and children and young people between different settings. Though it hasn't published separate formal scientific advice on these topics, its advice on physical distancing refers in general terms to the need for a cautious approach, and the current prevalence of COVID-19 in Scotland reinforces the need for caution:

"Evidence from other settings and other epidemics highlights the role played in transmission by people moving between institutions. This learning should be applied to decisions about school re-opening, highlighting the need for particular attention to student teachers and other professionals (social workers, psychologists, voluntary organisation staff etc.) who come in and out of the school estate on an interim basis and move between settings. This also extends to children and young people who move between settings, e.g. students who attend other schools / colleges to study particular subjects in the senior phase, and those in shared headship schools."

The sub-group has previously been asked to consider specific questions around the movement of staff and children and young people between different settings, which led to some clarification of the advice for staff providing support for children with Additional Support Needs, for senior phase students attending HE/FE settings and for ELC staff. These are set out in detail below.

### ***Support for Additional Support Needs***

In considering the role of staff who support children and young people with Additional Support Needs, the sub-group had concluded that there was a strong case to be made that many of these are essential services (provided by e.g. child psychologists, social workers, allied health professionals, and others) key to the implementation of children's care plans. As such, they should be allowed to visit schools with the appropriate mitigations in place for each service. Mitigations should be determined via a risk assessment carried out by the school in co-operation with the service provider. **Considering the changed position on infection and transmission rates, the evidence and experience of school re-opening between August and October 2020, and recent scientific evidence, the sub-group has concluded that this advice on staff who support Additional Support Needs should be maintained,** though taking into account the strengthened position on face coverings as set out above and the need for compliance to be strongly reinforced.

### ***Senior phase students attending HE / FE***

In considering the position of senior phase students attending colleges, the sub-group has advised that senior phase students should be allowed to attend HE / FE settings but that: the default should be to use remote learning wherever possible; where students do attend in person, they should segregate from the rest of the college cohort, and the mitigations (e.g. face coverings etc) that apply to the rest of the college population should also apply to these students. The evidence suggests that there has not been significant transmission in the *educational* aspects of HE / FE settings, while it is clear that there would be significant disadvantage to young people in these circumstances were they not to be able to attend HE / FE to complete these courses.

**Considering the changed position on infection and transmission rates, the evidence and experience of school re-opening between August and October 2020, and recent scientific evidence, the sub-group has concluded that this advice on senior phase students attending HE / FE should be maintained,** again taking into account the strengthened position on face coverings as set out above and the need for compliance to be strongly reinforced.

### ***Risk mitigation for ELC staff***

The sub-group has been made aware that childcare staff may often work for multiple employers, entering more than one setting. Current advice, recommending that movement of peripatetic staff between ELC settings should be kept to a minimum, can restrict these individuals' ability to work and reduce capacity for children to access services.

**Considering the changed position on infection and transmission rates, the evidence and experience of ELC re-opening between August and October 2020, and recent scientific evidence, the sub-group has concluded that its general line recommending that movement of staff between ELC settings be kept to a minimum should be maintained.**

However, there is evidence of very few outbreaks in ELC settings currently, and staff in ELC settings do not appear to be suffering from proportionately higher case rates. Indeed recent work suggests that those living in households with multiple young children may be at lower risk of contracting COVID-19 and hospitalisation, suggesting

a potential protective effect.<sup>39</sup> Vigilance should be maintained around adults mixing in these settings, and face coverings worn when appropriate (as set out above). But the sub-group is content to conclude that it should be possible for staff in this situation to enter more than one setting, with appropriate risk assessment and mitigations in place. There may be occasions when this is restricted for a period of time, for example when there is an increase in cases within a setting, or to ensure appropriate alignment with wider advice set out in the Strategic Framework.

**PE, drama and music**

The sub-group has published advice on physical education, music and drama on 10 September 2020, which set out that there is an increased risk of transmission of COVID-19 because of the respiratory aerosols which are exhaled during these activities and the close proximity of participants. The sub-group set out a hierarchy of risk in these activities, (shared below) and advised that indoor physical education in schools, for pupils of all ages, should not re-start at present.

| <b>Low risk</b>   | <b>High risk</b>  |
|---|---|
| Outdoors or virtual activities (e.g. recorded performances, outdoor creative dance, use of awnings/gazebos)                           | Indoor activities in enclosed spaces (e.g. unventilated classrooms, studios)  |
| Normal breathing and volume of speech (e.g. piano playing, mime)  | Higher volume or aerosol-generating activities (e.g. singing, debating, wind/brass instruments)   |
| Individual or small numbers involved (e.g. solo performance, string quartet)  | Large group (e.g. choir or orchestra)   |
| Any equipment is used only by one person (e.g. pupil and teacher have their own personal instruments; actors have their own costumes) | Equipment is shared (e.g. keyboards, shared percussion, shared props). Risk is lessened if equipment can be fully cleaned between each use. |
| Distancing possible between all participants  | Physical distancing not possible  |

**Physical Education**

Previous sub-group advice set out that, on 10 September, “children and young people under 18 can participate in organised outdoor contact sport (i.e. organised by a sports club or other sports provider). Physical distancing does not need to be maintained during play, but normal restrictions apply before and after play. Physical education within school settings should only take place out of doors for the time being. The re-introduction of indoor physical education should be in line with the plans for allowing over 12 year olds to participate in indoor contact sports. The sub-group advises that indoor physical education in schools, for pupils of all ages, should not re-start at present. This will enable the effects of the major step of school reopening to be understood, and the necessary school-based mitigation practices to become established.”

**Considering the changed position on infection and transmission rates, the evidence and experience of school re-opening between August and October**

<sup>39</sup> <https://www.medrxiv.org/content/10.1101/2020.09.21.20196428v1>

**2020, and recent scientific evidence, the sub-group has concluded that its advice on physical education should now be brought into line with advice outwith school settings<sup>40</sup>, to avoid inconsistency in future.**

This advice should remain broadly in line with advice in the community going forwards, including that set out in the Strategic Framework, in order to ensure consistency and better support compliance.

### ***Drama and music***

Regarding drama and music, existing sub-group advice sets out that, “Adopting a precautionary approach, the sub-group’s advice is that music and drama activities should take place only in situations where they comply with the low risk criteria set out below. Individual lessons where 2 metre physical distancing can be applied, the environment is well ventilated and equipment is not shared, carry low risk. Virtual lessons, rehearsals and performances, using digital forms of communication, carry even less risk, and have been demonstrated to be working well. Choirs, orchestras and group drama performances should not recommence at this point.”

**Considering the changed position on infection and transmission rates, the evidence and experience of school re-opening between August and October 2020, and recent scientific evidence, the sub-group has concluded that its advice on music and drama should be maintained at this point.** The sub-group also confirmed its position that 1:1 music tuition for non-wind instruments can take place with appropriate mitigations, which is broadly in line with current guidance for the performing arts in the community.<sup>41</sup>

### ***Singing in ELC settings***

The sub-group has specifically considered the question of singing in ELC settings. In line with advice above, it has concluded that singing shouldn’t happen indoors as an organised, large group activity for example at the start or the end of a session. However, the sub-group recognises that children sing naturally in the course of activities and play, and should not be discouraged from doing so, and that singing can also be used to comfort young children when necessary.

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<sup>40</sup> <https://www.gov.scot/publications/covid-19-scotlands-strategic-framework/pages/9/>

<sup>41</sup> <https://www.gov.scot/publications/coronavirus-covid-19-guidance-for-the-performing-arts-and-venues-sector/pages/people-involved-in-performing-producing-designing-and-supporting-events/#Playing%20music>