

PHYSICAL DISTANCING GUIDANCE FOR SCHOOLS

Physical distancing and transmission reduction in schools providing on-site operations in the context of coronavirus (COVID-19)

INTRODUCTION

As Victorian government schools transition to remote teaching and learning from Term 2, students will be learning from home. Access to on-site learning and care will be provided for students only under limited circumstances and on days when they are not able to be supervised at home and no other arrangements can be made.

On-site learning and care will be available for children of parents who cannot work from home, and vulnerable children, including:

- children in out-of-home care
- children deemed by Child Protection and/or Family Services to be at risk of harm
- children identified by the school as vulnerable (including via referral from a family violence agency, homelessness or youth justice service or mental health or other health service and children with a disability).

There are a range of actions that schools with continuing on-site provision can implement to reduce coronavirus (COVID-19) transmission and promote the safety and wellbeing of the small number of staff, children and young people in attendance.

The information below provides guidance on actions to be considered, implemented and adapted as necessary according to the education setting and the individual needs of the staff, children and young people in attendance. These have been endorsed by the Department of Health and Human Services and align with existing advice, [Physical distancing and other transmission reduction measures - coronavirus \(COVID-19\)](#).

This guidance recognises that the general advice for the Victorian public to maintain a physical distance of 1.5 metres will not always be practical in education settings, notably in settings that work with younger children and children with complex medical needs.

KEY MESSAGES:

- All staff, children and young people who are unwell must remain at home.
- Hand hygiene, cough etiquette and environmental cleaning are effective ways to reduce transmission of coronavirus (COVID-19).
- Parents/carers of children and young people with complex medical needs should seek medical advice (from the child or young person's medical/health practitioner) to support risk assessment and informed decision-making about whether on-site education is suitable.

ACTIONS FOR SCHOOLS:

Attendance

- All unwell staff, children and young people to be actively encouraged to stay home.
- Parents/carers of children and young people with complex medical needs (including but not limited to underlying respiratory and cardiovascular conditions), should seek advice from the child or young person's medical/health practitioner to support informed risk assessment and decision-making about whether on-site education is suitable. This is in line with the [DET Health Care Needs](#) policy.

Learning spaces, offices and break management

- Extension of routine environmental cleaning, including progressive cleaning throughout the day, to ensure that risks of transmission are reduced for high-touch services. See [Access to cleaning supplies and services](#).
- Windows should be open during the day, where possible, to promote air flow.
- Hand sanitisers and tissues should be made available in all learning and office spaces.
- Based on a room size of 40 square metres, a room should have no more than 10 occupants at any given time.
 - Occupancy rates may be adjusted for larger room sizes, as long as there is no more than one occupant per four square metres of floor space.
 - Schools supporting students with complex health needs may need to adapt these requirements to meet individual student and equipment requirements.
- Children and young people should be spaced out as much as possible. For example, a minimum of two desk spaces between each child or young person. Fixed seating arrangements and/or exam-style seating should also be considered, where practical and appropriate.
- Office space should be occupied as one staff member per four square metres of office floor space. Where possible, staff should use separate offices or unused classrooms.
- Mixing of staff, children and young people between rooms should be avoided where possible.
 - It is acknowledged that staff may need to move between rooms to support breaks.
 - Staff in schools supporting students with complex health needs will need to regularly provide assistance to different groups across the course of the day. In these situations, staff should be reminded of the importance of following routine hand hygiene.
- Breaks and time outside should be staggered to limit contact between groups.

Hygiene

- Staff, children and young people should be encouraged to regularly perform good hand hygiene, including on arrival to the school and before and after meals. Staff should direct and supervise hand washing at a minimum of before and after eating food; this should be either through washing hands with soap and water or using hand sanitiser.
- Where soap and water are not readily available, hand sanitiser should be provided in every occupied room; staff, children and young people should be actively encouraged to use this. Staff, children and young people unable to use hand sanitiser should be encouraged to wash their hands more regularly.
- Staff, children and young people should be encouraged to keep as much physical distance as possible and developmentally appropriate between each other when eating, noting that some children and young people will require assistance with eating (see Routine care).
- Sharing of food should be actively monitored and discouraged.

Routine care

- Standard precautions are advised when coming into contact with someone for the purpose of providing routine care and/or assistance (for example, the use of gloves for nappy-changing, toileting, feeding).
- Staff should always wash hands with soap and water or use a hand sanitiser before and after performing routine care.
- Additional Personal Protective Equipment (PPE), for example face masks, is not required to provide regular care for children or young people who are well, unless such precautions are usually adopted in the routine care of an individual child or young person. Hand hygiene, cough etiquette and environmental cleaning are the most important measures for reducing risk. See also [Actions for health and other organisations where health professionals provide close body contact procedures or services](#).

First aid

- Standard precautions as per [DET Infectious Disease](#) policy should be adopted when providing first aid. For example, use gloves and apron when dealing with blood or body fluids/substances.
- Always wash hands with soap and water or use hand sanitiser before and after providing first aid.
- Additional PPE (for example, face masks) are not required to provide standard first aid on children, young people and staff who appear to be well. Hand hygiene, cough etiquette and environmental cleaning are the most important measures for reducing risk.

Management of an unwell child, young person or staff member

- Staff, children or young people experiencing compatible symptoms with coronavirus (COVID-19), such as fever, cough or sore throat, should be isolated in an appropriate space with suitable supervision and collected by a parent/carer as soon as possible.
- In this situation, where staff, children or a young person are experiencing compatible symptoms with coronavirus (COVID-19), the important actions to follow include hand hygiene, physical distance and (where possible) putting on a face mask. If care is to be prolonged (for example, because it will take some hours for a parent to collect a child), gloves, gown and eye protection could be considered if available.
- Face masks should not be used in situations where an individual is unable to safely or practically tolerate a mask (for example, a child with complex medical needs including existing respiratory needs, and younger children).
- Urgent medical attention should be sought where indicated.
- It is not suitable for an unwell child or young person to travel home unsupervised.
- All children and young people with a health care plan should ensure this is up to date and that it provides additional advice, where required, on monitoring and identification of the unwell child in the context of the coronavirus (COVID-19) pandemic.
- Where indicated, school nurses (in the context of schools supporting students with complex health needs) could check the temperature of a child or young person who has compatible symptoms of coronavirus (COVID-19). This could be one indicator of potential illness.

Follow cleaning guidance according to the situation of the case. If a child spreads droplets (for example by sneezing, coughing or vomiting), clean surfaces immediately with disinfectant wipes.