



Department
for Education



Public Health
England

Coronavirus (COVID-19): Guidance on isolation for residential educational settings

Updated 8 April 2020

Contents

1. [Who this guidance is for](#)
2. [General guidance for all residential educational settings](#)
3. [Staff within clinically vulnerable groups](#)
4. [Children's social care](#)
5. [Special schools and special colleges](#)
6. [Self-isolation](#)
7. [Stay home](#)

© Crown copyright 2020

Who this guidance is for

This guidance is to support the management of children and young people living in:

- children's homes
- residential special schools and colleges
- other further education (FE) providers with residential accommodation
- mainstream boarding schools
- **university halls of residence and houses in multiple occupation**

It contains advice on managing isolation for individuals or groups, in the event that a child, young person or staff member either shows symptoms of coronavirus (COVID-19) or is confirmed as having the disease.

The most important symptoms of coronavirus (COVID-19) are recent onset of any of the following:

- a new continuous cough
- a high temperature
- a loss of, or change in, your normal sense of taste or smell (anosmia)

Public Health England (PHE) has provided [a suite of guidance](#) to support people in making decisions related to coronavirus (COVID-19).

Most educational settings are closed, except for vulnerable children and the children of workers critical to the coronavirus (COVID-19) response. To cater for them, and others who have nowhere else to go, residential special schools, boarding schools and FE and higher education (HE) halls of residence will need to remain open, unless otherwise advised by PHE.

University and college halls of residence and HMO's for students aged 18 and over!

University and college halls of residence and HMO's for students aged 18 and over

Students living in halls of residence or houses in multiple occupation (HMOs) who develop symptoms of coronavirus (COVID-19) should self-isolate in their current accommodation for 7 days. Universities and colleges should facilitate this. Students should discuss this with their university or college, and with the manager of their halls if they are privately owned, or the landlord of their HMO.

If a resident of an HMO has coronavirus (COVID-19) symptoms, all residents will be required to take part in whole household isolation for 14 days.

When students are living in hall of residence where someone else has symptoms of coronavirus (COVID-19), their institution will discuss the situation with the local PHE health protection team who will undertake a risk assessment and identify who is required to take part in whole household isolation for 14 days based on their likelihood of being infected. Those living in private halls should inform their hall manager so they can inform the PHE local health protection team.

Depending upon the circumstances, this would normally include those students living in the same flat or on the same floor who share cooking or washing facilities, or both.

Where halls accommodation is different from the format described above, for example longer corridors of single rooms, decisions on the whole household group to self-isolate for 14 days will need to be taken on a case-by-case basis. This decision will be informed by the catering and social areas shared by groups of students, in consultation with the local PHE health protection team.

Institutions, and building managers of private halls, will need to design procedures with their staff to ensure that self-isolating students can receive the food and medicines they need for the duration of their isolation. This is especially important for disabled students.

Students in HMOs will need to discuss their circumstances with both their landlord and their institution, who should work in tandem to ensure necessary support is in place.

Staying at home for a prolonged period can be difficult particularly if there is no access to outside space.

It is important to take care of mental as well as physical health and seek support if needed. Students can keep in touch with family and friends over the phone and on social media. There are also sources of support and information, such as [Every Mind Matters](#) for adults, and [Young Minds](#) for young people. Students in university or college accommodation can also contact any support or wellbeing service provided by their institution.

General guidance for all residential educational settings

Residential children's homes, special schools and colleges, other residential FE provision, and mainstream boarding schools are usually considered households for the purposes of the household self-isolation policy, which means the setting should self-isolate if a resident develops a high temperature or a new, continuous cough, or has a loss of, or change in, their normal sense of taste or smell (anosmia).

These households, in contrast with other households, will almost always need to have staff and other professionals arriving and leaving during the period of self-isolation.

Careful infection control measures should be followed during and after visits, as any self-isolating household would do if they had unavoidable visitors.

If a pupil or student showing symptoms (a high temperature or a new, continuous cough, or has a loss of, or change in, their normal sense of taste or smell (anosmia)) requires staff contact for personal care, please refer to the [guidance on infection control procedures](#).

To find out more about cleaning areas where a pupil or student showing symptoms has been resident, please read the [guidance on cleaning and disposal of waste](#).

These infection control measures would apply to:

- staff in the home, school or college
- social workers
- police investigating child protection
- clinicians providing healthcare
- any visiting professionals
- any other necessary visitors

The approach to self-isolation will depend on the physical layout of the residential educational setting and staffing arrangements.

It is important to decide whether the whole setting should be treated as a single household or as multiple households. For example, where residential provision is spread across several, separate buildings, you may wish to treat these as different households.

Staff ratios must be maintained at a safe level to protect children and young people.

Children's homes, and special schools and colleges, should assess staffing levels on a daily basis and liaise with families, local authorities and commissioners where there is a risk of staffing shortages.

Staff who are non-resident, visiting, or partially-resident, and travel between an affected setting and their own home, will need to apply careful infection control. Staff who are well should avoid close contact with people showing symptoms wherever possible, practice social distancing and ensure frequent hand washing.

Where possible, children's homes, schools, FE providers and HE halls of residence should operate a consistent staff rota to minimise the risk of transmission. However, we acknowledge this will not be possible in all circumstances.

Supporting children and young people in children's homes and residential special schools and colleges during self-isolation will be a complex task. Consideration should be given to the needs of the entire household, and to individual children's and young people's needs, working closely with parents and carers where appropriate. Where the home, school or college is not located in the child's or young person's 'home' local authority, the two local authorities should liaise to ensure no child or young person is unsupported.

Staff within clinically vulnerable groups

Atypical settings are staffed by a wide range of people and some may be more vulnerable, for example, because they have an underlying health condition.

Any staff member with symptoms of coronavirus (COVID-19) should cease working immediately and self-isolate.

Staff [not in one of the more vulnerable health groups](#) can continue to work as normal.

For staff with an [underlying health condition](#), settings should make a risk assessment based on their personal circumstances and the roles they play within the setting. Many will be able to work normally, while being particularly careful to follow [social distancing measures](#). If someone in the setting is showing symptoms of coronavirus (COVID-19), staff with an underlying health condition should be redeployed to work in roles which mean that they are not in contact with potential coronavirus (COVID-19) cases.

Staff whose health [makes them extremely vulnerable](#) should follow shielding guidance and should not attend work. These people will have received a letter from the NHS, or have been contacted by their GP, warning them that their health makes them particularly at risk.

All staff should ensure that they follow [social distancing guidance wherever possible](#), wash their hands frequently, sneeze or cough into a tissue and [self-isolate](#) if they or a member of their household becomes ill.

Children's social care

If social workers or police need to visit the setting and investigate child protection concerns, such professionals should be admitted to the home while observing appropriate infection control procedures.

If a child in a residential care home develops symptoms of coronavirus (COVID-19):

- staff can continue to enter and leave the home as required - however, consistent staff rotas should be used where possible and staff should follow infection control procedures
- other residents in the home should remain in isolation, following the [guidance for households](#)

Special schools and special colleges

All residential special schools and colleges, jointly with local authorities, and taking into account parents' views, should assess the risk, both for the individual institution and for the individual pupil or student, in deciding how to apply this guidance most effectively. This is likely to include working with the local Public Health England (PHE) health protection team and the local clinical commissioning group (CCG).

It is important to maintain safe staff ratios, particularly for those pupils or students whose needs mean they are safer remaining in the setting than returning home. If necessary, the setting should work with the local authority to draft in staff from other settings rather than close. This could include deploying staff from mainstream schools and colleges, or other special schools and colleges that are not remaining open. Staffing should be prioritised towards the most vulnerable pupils and students, particularly those in residential provision. Where settings cannot remain open safely, they should aim to make closures temporary and reopen once they have drafted in additional staff. Local authorities must help with these staff movements and should, as far as possible, disregard the usual boundaries of maintained, academy, college or other institution type to move appropriate staff into priority settings.

Students should adhere to social distancing wherever they are living. For term-time residential pupils and students, social distancing should happen at their residential educational setting during term time and in the family home during the holiday period. Moving between these locations is allowed. If pupils and students have returned home, for example over a holiday period, and they come into contact with someone with symptoms of coronavirus (COVID-19), or display symptoms themselves, then they must not return to the residential educational setting, and must self-isolate at home in line with [PHE guidance](#).

Self-isolation

Managers of residential settings should speak to parents and carers to establish views on whether the child or young person should return home for any period of self-isolation (due to them, or someone else in the same setting, displaying symptoms) or should remain at their setting. They should do this pre-emptively, rather than waiting until someone shows symptoms. Where possible, the risk assessment should also include consideration of the impact on the pupil or student from the disruption of their usual staff relationships and routines.

If a resident develops symptoms, the residential setting will need to identify the appropriate grouping to self-isolate; for example whether it comprises individuals in a single room or groups in multi-occupancy dormitories. The setting should support all those pupils or students in the grouping that shares a room and/or bathroom facilities to isolate for 14 days. This is in line with [PHE guidance for households](#). The setting can seek advice from PHE local health protection teams if needed.

In the event that self-isolation is needed, the decision on whether a child or young person self-isolates at their residential educational setting, or at their family home, should be taken in light of each risk assessment, but it is expected that the majority of pupils and students will benefit more from self-isolating at their setting, so that their usual support can continue.

This could include when:

- there is no suitable family home to return to
- the health services they need cannot be supplied at home

- the pupil or student would otherwise be significantly disadvantaged by the change

Some pupils and students will benefit more from self-isolating at their family home but should only return home if they are able to do so without using public transport. On returning home, the household should begin a period of whole household isolation for 14 days following [PHE guidance](#).

Necessary health and therapy support (including access to medical supplies) should continue to be provided if the child or young person returns to their family home. The local authority will need to establish whether there are any safeguarding concerns if the child or young person returns to their family setting.

Residential educational settings must make sure that the local authority responsible for placing the child or young person is aware that they are returning to their family setting, to make sure there is continuity in necessary services.

The family households to which these children and young people return are more likely than other households to need contact with non-household members, for example clinicians providing health services to the child or young person, so should follow infection control guidelines particularly closely. If a child or young person returns to their family home, this should not be considered an unauthorised absence, assuming they return after the self-isolation ends.

Local authorities should maintain a register of all pupils and students with Education, Health and Care (EHC) plans, including any still under assessment for EHC plans, who have been sent home from their residential educational setting. The local authority should also contact the family frequently as part of its monitoring duties to ensure risks are being managed, and to establish whether additional support is necessary and how that will be delivered.

Boarding schools, and mainstream FE college residential provision for students under the age of 18

If a pupil or student in a boarding school or FE residential college presents symptoms of coronavirus (COVID-19), the residential facility at the setting will need to remain open for the period of self-isolation. As far as possible, the setting should ensure pupils and students are looked after by residential staff.

Where this is not possible, and staff need to leave and enter the residential facility, the school or the manager of the accommodation should operate a consistent staff rota to minimise the risk of transmission. Settings will need to ensure that the arrangements for oversight of pupils and students in isolation protects the safety and welfare of all children and staff.

If a pupil or student presents symptoms of coronavirus (COVID-19), the setting will need to identify the appropriate grouping to self-isolate, whether that is an individual in a single room or children in multi-occupancy dormitories. The setting should self-isolate all those pupils or students for 14 days in the grouping that shares a room and/or bathroom facilities, following the [PHE guidance for households](#).

The setting will need to put in place arrangements to bring meals and other essential commodities to the areas where self-isolation is occurring.

In exceptional cases, some pupils or students may benefit more from self-isolating at their family home; although not all will be able to return home, for example, international students with no family resident in the UK. Settings should discuss these arrangements with the parent or carer. If the pupils or student returns to their family home, they should not use public transport. Their household will need to isolate for 14 days, and their residential education setting will also need to isolate for 14 days as described above.

If pupils or students have returned home, for example over a holiday period, and they come into contact with someone with symptoms of coronavirus (COVID-19), or display symptoms themselves, then they must not return to the residential educational setting, and must self-isolate at home in line with [PHE guidance](#).

Stay home

Following the Prime Minister's [announcement that everyone in the UK should stay at home](#), all students should remain in their current residence.

It is important that institutions operate a 'non-eviction' policy, so that no student is required to leave halls if their contract is up, if their rental agreement does not cover holiday periods or if they are unable to pay their rent. This applies whether students are self-isolating or not, and is particularly important in the case of international students, care leavers and estranged students.

Students in HMOs are [protected from eviction by new rules](#) developed by the Ministry of Housing, Communities and Local Government.

Institutions will need to make clear to the manager of any privately owned halls of residence that evictions are unacceptable and the hall manager must – if they are unable to accommodate a student – work through local partnerships, such as with the local authority and lettings agents, in order to prevent students being made homeless.

If the university or college has a nomination agreement with the private halls provider, this relationship should be leveraged to avoid evictions. Where no relationship exists, universities or colleges should ensure that the private halls provider has solutions in place. Under no circumstances should students be evicted.