Oaklands Catholic School and Sixth Form College

Stakes Hill Road Waterlooville Hampshire PO7 7BW

© 023 9225 9214

(RX) 023 9223 0317

www.oaklandscatholicschool.org

oaklands@oaklandscatholicschool.org

Headteacher: Matthew Quinn B.Ed (Hons), M.A., NPQH



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Our Ref: MQ/SM

24 September 2021

Dear Parents/Carers

We are now well into the new academic year, and I have been delighted to hear positive reports from staff as students engage in school with enthusiasm and optimism. I hope you have read the latest copy of the Oaklands News that we emailed earlier this week.

I wanted to write to you so that I can help explain how cases of COVID-19 are now being managed in school and what we know about the Government vaccination programme for 12 to 15 year-olds.

Since early August, as you may have seen, nationally levels of infection have risen significantly - although in the last seven days, according to Government statistics, there has been an overall decline, but levels are still high.

For the avoidance of doubt, the responsibility for Track and Trace now remains with the NHS **not** the school. There have been a small number of cases at Oaklands, but at the time of writing not sufficient for Public Health England (PHE) to advise any further mitigations in addition to the action we are already taking in school or you at home. If we are advised to increase the level of mitigation, I will write to you again and we will keep these in place for as short a period as possible. We know that you may find this concerning but we are continuing to monitor the situation and liaise with PHE.

I want to reassure you that children and young people still have a very low risk of health harm from COVID-19, and those without symptoms (asymptomatic) are also at a relatively low risk of transmitting COVID-19 to adults. Your child should continue to test twice weekly with the LFTs provided and attend as normal if the LFT test is negative, and they are well and do not have symptoms. The Government intends to review the provision for LFT testing for secondary school children at the end of September.

There are now two types of LFT kits – one which requires a nose and throat swab and a newer kit which only requires nasal swabbing. Tests carried out in school at the start of the year were nasal only, but the kits issued to the students were nose and throat tests. Please make sure that you follow the instructions contained within the kit box when testing.

We do encourage all household members that are aged 11 and over to continue with twice weekly LFT testing to help identify cases promptly, particularly if they think they may have been in contact with a case and have not been contacted by NHS Track and Trace.





If your child develops symptoms of coronavirus, or has a positive LFT test, the guidance has not changed; they should get a PCR test and remain at home at least until the result is known. If negative, the child can end self-isolation; if positive, the child should isolate until at least 10 days after their symptoms appeared.

Symptoms of coronavirus (COVID-19) are:

- a new, continuous cough
- a high temperature,
- a loss of, or change in, the normal sense of taste or smell.

If your child has a positive PCR test result but does not have symptoms, they should stay at home and self-isolate for 10 days from the date the positive test was taken. This isolation period will be extended if they go on to develop symptoms by counting 10 full days from the day following their symptom onset.

For students who are isolating, work will be set on Teams. If they are well enough they should complete this work.

Anyone with symptoms (or positive LFT) will be eligible for a PCR test (the normally available test type) and this can be arranged via <u>Get a free PCR test to check if you have coronavirus (COVID-19) - GOV.UK (www.gov.uk)</u> (www.gov.uk) or by calling 119.

I am sure by now you are aware that a decision has been made to extend the vaccination programme to those aged 12 to 15. Information will be made available to you shortly to understand the risks and benefits as part of the informed consent process prior to vaccination. Please do look out for this and engage fully when you receive it.

The Chief Medical Officers set out a compelling case for 12 to 15 year-olds to be offered vaccinations in order to reduce educational disruption after 18 months of turbulence, which has not only damaged the learning of many pupils, but has also affected welfare and mental health.

I am aware that this programme is not without its critics. It should be noted that this is an offer of a vaccination and that students, along with their parents or carers, can decide whether or not to take up that offer. The role of schools is limited to hosting these sessions and dealing with associated communications, and it is quite wrong to suggest that the student vaccination programme is a school decision.

I hope that this letter provides helpful clarification on the current position. In closing, I would particularly like to add my sincere thanks and recognition of the immense efforts by you and your families over this difficult time.

Yours sincerely

Mr M Quinn Headteacher