Interim HSE advice in relation to return to school and at risk groups

1 NPHET, HSE, Department of Health and Department of Education & Skills advice:
This guidance is subject to the overarching advice of the National Public Health Emergency Team (NPHET), the HSE, the Department of Health and the Department of Education and Skills. Information is available at:

- HSE HPSC - [https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/guidance/](https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/guidance/)
- HSE Coronavirus (COVID-19) - [www.hse.ie/coronavirus](http://www.hse.ie/coronavirus)

2 Overview
Current events surrounding the COVID-19 pandemic are challenging and all public health bodies are placing the safety of patients, staff and communities first in all decisions.

This is an evolving situation. This advice is based on current information. It is additional to the advice of the NPHET, the HSE, the Department of Health and the Department of Education and Skills, and will be updated as necessary.

This document summarises guidance relating to return to school for those who have underlying conditions which may put them at increased risk of severe illness from COVID-19. It considers advice relating to children returning as pupils, members of their household and adults working in the school environment.

Note that for adults, the HSE has classified those at possible increased risk as

- High risk or
- Very high risk (also termed ‘extremely medically vulnerable’)

Information for the public on high risk groups is available here:

[https://www2.hse.ie/conditions/coronavirus/people-at-higher-risk.html](https://www2.hse.ie/conditions/coronavirus/people-at-higher-risk.html)

and for pregnant women here:

[https://www2.hse.ie/conditions/coronavirus-and-pregnancy.html](https://www2.hse.ie/conditions/coronavirus-and-pregnancy.html)
3 Information on COVID-19 and children

In the months since the COVID-19 pandemic started, we have learned that:

- Children seem more likely than adults to have no symptoms or to have mild disease. Symptoms in children include new onset cough, deterioration of existing respiratory condition, fever and changes in sense of smell.
- Children, particularly young children, have rarely been the person who brought COVID-19 into a household when household spread has happened.
- School aged children are not more likely than adults to spread infection to other people.
- There are some recent reports that the virus that causes COVID-19 may very rarely trigger an inflammatory disease called PIMS (Paediatric Inflammatory Multisystem Syndrome) in some children.

4 Pupils with underlying conditions

Given current knowledge about COVID-19 disease in children, it is now difficult to justify cocooning in most children with underlying conditions. Long-term cocooning of children with complex medical needs is likely to adversely affect them and may outweigh the potential risk of infection. For all children, care should continue to be taken to reduce transmission through the measures promoted by HPSC (https://www2.hse.ie/conditions/coronavirus/protect-yourself-and-others.html) including hand washing and social distancing by all household members etc.

For the vast majority of children with cystic fibrosis, the National Clinical Programme for Cystic Fibrosis has recommended a full return to school in line with the guidance from the Department of Education. Children with cystic fibrosis should continue to follow standard public health advice in relation to social distancing, hand hygiene and respiratory etiquette. The exception are those with cystic fibrosis whose disease is unstable or severe (e.g. patients awaiting transplantation).

Children with diabetes are also advised to return to school and to follow general infection control and public health guidance on reducing transmission.

For children with profound immunodeficiency/immunosuppression (e.g. due to ongoing or recent cancer treatment or a recent transplant), their individual risk should be assessed by their treating team and consideration given to the possible necessity of avoiding school.

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1 https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/guidance/educationguidance/


3 Interim Guidance on Medically Vulnerable Children during the Coronavirus (COVID-19) pandemic (CD19-191 / 06.08.20) https://hse.drsteevenslibrary.ie/c.php?g=679077&p=4885072
5 School workforce

It is acknowledged in Department of Education and Skills guidance that there are some school staff who may be unable to return to school.  

As with all decisions re suitability for attendance in the workplace, consideration will be given to the individual’s health and risk factors, the risk associated with the particular work and workplace and the precautions available to mitigate that risk. School occupation health services should be consulted to support an individual risk assessment.

(a) Very high risk conditions
Adults who have a condition considered very high risk (also termed ‘extremely medically vulnerable’) are generally advised to continue working remotely where possible and should discuss this with their occupational health department.

As we learn more about COVID-19 disease, those groups classified as ‘very high risk’ will be further revised. Certain individuals who have a very high risk condition may, following consultation with their specialist team, be considered suitable for return to the workplace.

Those considered very high risk are:

- People aged ≥ 70 years
- Solid organ transplant recipients
- People with specific cancers:
  - people with cancer who are undergoing active chemotherapy
  - people undergoing radical radiotherapy for lung cancer
  - people with cancers of the blood or bone marrow such as leukaemia, lymphoma or myeloma who are at any stage of active treatment
  - people having immunotherapy or other continuing antibody treatments for cancer
  - people having other targeted cancer treatments which can affect the immune system, such as protein kinase inhibitors or PARP inhibitors

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5 Note that this has been amended by NCCP from the definition in HPSC cocooning advice, refining the group to those undergoing any form of active treatment

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people who have had bone marrow or stem cell transplants in the last 6 months, or who are still taking immunosuppression drugs

Note those who otherwise have a past history of cancer do not need to be excluded from the workforce, unless due to another significant comorbidity.

- Dialysis patients
- People with severe respiratory conditions including cystic fibrosis, alpha-1 antitrypsin deficiency, severe asthma, pulmonary fibrosis, lung fibrosis, interstitial lung disease and severe COPD.
- People with certain rare diseases that significantly increase the risk of infections (such as SCID, homozygous sickle cell).
- Women who are pregnant with significant heart disease, congenital or acquired.
- People who are advised to follow cocooning advice prior to certain treatments/surgical procedures (typically for two weeks) or following a treatment/procedure. Patients will generally be advised to work remotely during such a cocooning period, depending on their work environment. Patients should be advised by their healthcare team at the end of treatment or post-operatively as to how long they should continue to follow cocooning recommendations/be excluded from the workplace.
- People on profoundly immunosuppressant therapies, e.g. high dose or prolonged corticosteroid therapy.

Only those medications currently listed in the very high risk category in the guidance available at https://hse.drstevenslibrary.ie/Covid19V2/pharmacy/medicinesmanagement are considered sufficiently immnosuppressing to require the additional precautions for the extremely medically vulnerable/very high risk groups:

- Prednisolone 40 mg/day or greater for > 1 week, or 20 mg/day or greater for 2 weeks or longer
- People taking two or more immunosuppressant medicines. This includes prednisolone 5mg or greater in the last 4 weeks
- Cyclophosphamide or Rituximab in the last 6 months
- People with poorly controlled disease or a history of recurring infections (requiring medical treatment) while on immunosuppressant medication

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6 Amended to reflect definition of those on dialysis as extremely medically vulnerable

7 The information we have so far shows that pregnant women are not at any additional risk of severe disease. This means that if you are healthy, you do not have a higher risk of serious illness if you catch coronavirus while pregnant.

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- For those on treatment for Multiple Sclerosis please refer to https://hse.drsteevenslibrary.ie/Covid19V2/neurology

Note that emerging evidence suggests that those on maintenance immunosuppressant therapy other than high dose steroids, are unlikely to be at very high risk of severe COVID-19 disease.

(b) High risk conditions

Those who work in a school setting and have a condition listed as high risk are generally advised that it is safe for them to return to the workplace and to continue to carefully follow infection control and public health guidance in relation to hand hygiene, etc.

High risk individuals are defined as follows:

- are over 60 years of age
- have a learning disability
- have a lung condition that's not severe (such as asthma, COPD, emphysema or bronchitis)
- have heart disease (such as heart failure)
- have high blood pressure (hypertension)
- have diabetes
- have chronic kidney disease (not requiring dialysis)\(^8\)
- have liver disease (such as hepatitis)
- have a medical condition that can affect your breathing
- have cancer (unless very high risk as outlined above, e.g. due to certain ongoing treatments)
- have a weak immune system (immunosuppressed)
- have cerebrovascular disease
- have a condition affecting your brain or nerves (such as Parkinson's disease, motor neurone disease, multiple sclerosis, or cerebral palsy)
- have a problem with your spleen or have had your spleen removed

\(^8\) Amended to reflect definition of those on dialysis as extremely medically vulnerable
• have a condition that means you have a high risk of getting infections (such as HIV, lupus or scleroderma)
• are taking medicine that can affect your immune system (such as low doses of steroids)
• have obesity
• are residents of nursing homes and other long-stay settings
• are in specialist disability care and are over 50 years of age or have an underlying health problem

6 Family members with underlying conditions

Children with immediate family members, including parents, in both the ‘high risk’ and ‘very high risk’ categories can return to school and it is important for the child’s overall well-being.

This is consistent with public health advice internationally in relation to at-risk family members.⁹

The priority is that the household continues to follow all current advice on how to minimise the risk of coronavirus, through regular hand washing, etc. (See the HSE website) More detailed advice on specific measures within a household are included in HPSC guidance on cocooning (see p.9).

In terms of reassurance, from what we know to date on children and coronavirus, children, particularly young children, have rarely been the person who brought COVID-19 into a household when household spread has happened. School aged children are not more likely than adults to spread infection to other people.

Schools are putting measures in place to reduce the risk of coronavirus being transmitted to/within the school, such as hand hygiene regimes and cleaning measures within the school, reduced mixing between children and less objects going in and out of school.

It remains important for all parents/family members, particularly those at high-risk and very high risk, to ensure that they continue to socially distance from other adults, e.g. at school pick-up times, to minimise their likelihood of possible exposure.

Similarly, children and young people who live with someone who is pregnant can attend school and early years settings. Again, when taking children to school/nursery, it is important to practice social distancing – staying two metres away from teachers/carers and other parents and not going inside the building.