Information for Parents about the changes to contract tracing and testing for children aged between 3 months and 13 years in Early Learning and Care (ELC) and School Age Childcare (SAC), education (primary school), sports, and social settings

What is changing?
The National Public Health Emergency Team has provided updated new advice to the HSE. Routine contact tracing and testing of asymptomatic (no symptoms) close contacts among children in these settings will no longer take place from Monday September 27.

What stays the same?

Children with symptoms - Public Health advice remains the same for any child aged between 3 months and 13 years of age with symptoms of COVID 19. They need to immediately self-isolate, stay at home, and you should contact their GP for advice and COVID 19 testing.

Children who are household close contacts - Children aged between 3 months and 13 years who are household contacts of a confirmed case of COVID 19 will still have to restrict their movements and get a COVID 19 test. A child under 13 who is not fully vaccinated, is a household contact if they were present overnight in a house or residential setting while a person with COVID 19 was infectious in that house. This may be their own home or if they were staying overnight with family or friends.

What will be different from Monday September 27th?
From Monday September 27th children who do not have symptoms of COVID-19 and may have been in close contact with a confirmed case of COVID-19 in schools, childcare facilities, sports, and social settings, will not have to restrict their movements or get a COVID 19 test.
Questions parents or guardians might have

My child is a close contact from childcare, primary school, a sporting or social event and they have not finished their 14 days restricted movements yet - can they go back to school on Monday 27th?

Yes, from Monday 27th, once your child has no symptoms of COVID 19 they can go back to their activities. Your child may have a test appointment booked, and may still receive a test appointment text message. They do not need to have this test. They do not need to keep restricting their movements. There is different advice for children who are household close contacts, and children who are close contacts from a setting such as a special education needs class or a respite care facility.

Household close contacts.
Children in a household where there is a positive case of COVID 19 will need to continue restricting their movements and follow the advice they got from the HSE. This will have explained whether they need to restrict their movements for 14 days or 17 days if there is ongoing household exposure. They will also need to have their COVID 19 tests.

Children in Special Education Needs schools, classes, respite care.
Children in these settings can return on Monday once they have restricted their movements for 5 days and have no new signs or symptoms of COVID 19.

Will contact tracing of children happen in primary schools, childcare, SAC and ELC or social and sporting settings from Monday 27th September?
No, not routinely but in some circumstances, Public Health teams may still do a Public Health Risk Assessment. In more complex settings like respite care or SEN, Public Health will continue to do Public Health Risk Assessments. They will also provide advice and support.

Will the measures in place to deal with COVID 19 in these settings still remain in place?
Yes all infection prevention and control measures currently in place will remain.
What about specific settings e.g. Respite care, Special Educational Needs settings etc?
In these settings Public Health will continue to do Public Health Risk Assessments and provide advice and support. Public Health want all children without symptoms of COVID 19 to be able to participate in school and activities. However, in some instances it may still be that Public Health will need to ask some children to restrict their movements. Any period of restricted movements for children in these settings will only be when needed and if necessary, and will now be for 5 days. Children who are close contacts in these settings will now only be offered 1 COVID 19 test. Testing will not be needed to end restricted movements after 5 days.

What should I do if I am concerned about my child’s symptoms?
If you think your child has symptoms of COVID 19 you should immediately make sure they self-isolate. You should phone their GP for advice and guidance, and COVID 19 testing if the GP thinks it is necessary.

What about if my child has a mild symptom like a runny nose?
If your child has a runny nose, but is otherwise in good health and good form, then they can go to school. If your child has a runny nose and other symptoms and seems a little off form, then they should stay home from school or childcare. You should watch their symptoms and contact their GP for advice if you are worried. Children with chronic symptoms should not be regularly or routinely excluded from school or social and sporting settings.

Will Public Health teams still provide support and advice to schools?
Public Health teams will continue to provide support to schools should it be clinically required. Testing will be available for children for public health or clinical reasons, or after a Public Health Risk Assessment.

Why is this change happening?
We now know that children are more likely than adults, to have no COVID 19 symptoms or to have mild disease. When we looked at cases identified in school settings we see that child to child transmission in schools is uncommon. School transmission is not the main cause of Sars-CoV (COVID 19) infection in children, particularly in preschool and primary schools. Children are rarely identified as the route of transmission of infection into the household. Children are not more likely than adults to spread infection to others.
This change is also happening because there has been a widespread uptake of COVID 19 vaccination in Ireland among those aged 12 years and older. Vaccines have reduced the spread of COVID 19 and the risk of severe disease and or having to go to hospital.

Another very important reason to make this change is that we know the negative impact absences from school have on children’s educational, social and emotional well-being. We believe that this is a positive change for children, while still making sure there is rapid access to testing for children who clinically need it.