

Coronavirus Reasonable Worst Case Scenario Planning

This exercise assumes a reasonable worst case scenario as outline in the UK's pandemic influenza strategy, which you can find here:

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/213717/dh_131040.pdf

Key Assumptions of this scenario include: From arrival in the UK, it will likely take 1-2 weeks before sporadic cases and small clusters of a pandemic disease occur across the country.

Pandemic activity in the UK could last for three to five months.

Previous studies suggest that roughly 50% of people may display symptoms of some kind.

It is assumed that up to 2.5% of those with symptoms could die as a result of pandemic influenza if no treatment proves effective. Institutions should prepare to be able to cope with a mortality rate of up to 210,000-315,000 additional deaths over as little as a 15 week period.

Up to 50 per cent of the workforce may require time off at some stage over the entire period of the pandemic.

In a widespread and severe pandemic, affecting 50 per cent of the population, between 15 per cent and 20

Some key information about Coronavirus: Almost nothing known about CoV in children. So far only one confirmed case in a child (a very young baby).

The disease has a flu-like mortality curve – most deaths have been over 60s.

The case fatality rate is somewhat uncertain, but a reasonable confidence puts it below SARs. (which was about 15% overall, but only 1% for under 24s).

						Systemic Impact - on education/DFE	Likelihood (given a reasonable worst case scenario)
EY	CSC	Schools	FE	HE	Issue		
					EY providers preemptively shut down due to parental concerns (even if there is not a major outbreak that requires it). Stops parents from working, raising the work absence rate more than purely from sickness.	High	High
Y					Children aren't sick but the adults are. Shortages in the workforce may need to temporarily relax ratio requirements if demand is outstripping supply.	Medium/High - would have to legislate to change ratio	High
Y					Early years providers have to open for <i>longer</i> to help healthy people work for longer (to cover sickness absence). Government may require extra funding/legislation. Early Years settings unwittingly drive the spread of infection: Spread of disease from overseas childminders (e.g. Au Pairs, nannies and childminders) passed onto small children who become vectors	High	Low
Y					Disease hits for sufficient length of time to have material impact on child development. Would require adjustment/catch up possibly in schools to account for it. Differential impact across socio-economic status?	Low	Low
Y					The operation of EY/school settings - mainly people, food, and maintenance - if food supplies chain is hit then this may affect viability of settings where children are there for a long time, but most 3-4 hour settings could probably get away with it (does that need a relaxation of the rules). What if schools can't offer meals?	Medium	Low
Y		Y			We run out of face masks or other medical supplies needed within schools.	Medium	Medium
		Y			If we are being good at containing it, people will be less urgent about preventing it. Either under or overreaction of parents. Parents inherently risk averse. Closing schools is a major social signal.	Low	Medium
		Y			Schools may be closed during the run up to exams and exam periods themselves.	Medium	Medium
		Y			Schools which stay open may be disrupted, timetabling + teaching disruption leading to choices being made as to which subjects + cohorts to prioritise.	High	Medium
		Y			Supply teachers become more scarce and more expensive.	Medium	High
					Schools are an important vehicle to educate children about best practice to keep themselves and their families safe. Schools used as a point of contact between children, families and government.	Medium	High
		Y			We can't deliver other services that are delivered through schools - e.g. vaccinations for HPV, BCG, or the school dentist.	Low	High
		Y			Potentially unprecedented need to provide emotional support for children who are bereaved. This may become even more prescient if the virus affects children, and they lose their peers. Might significantly interrupt the ability of schools to continue business as normal (given the huge impact of even one death of a CYP on a school community).	Low	Medium
		Y			Increasing teacher workload + burnout. Other teachers absent, work more stressful b/c of kids panicking + worry about kids, teaching unfamiliar subjects, fear of infection. Long term retention implications.	High	Medium
		Y			Illness leads to a lack of available social workers (direct and as a result of looking after family/dealing with bereavement). Emergency duty teams (out of hours) are often very small and difficult to find replacements quickly. More so than for teachers, and affecting the most vulnerable.	High	High
Y					Illness leads to a lack of support services for children (e.g. respite care) placing increasing pressure on families and on social services. Currently already strained.	High	High
Y					Illness leads to a lack of central children's services staff available to support and co-ordinate social work activity.	Medium	High
Y					Illness leads to a lack of police/medical/legal availability (when required) to support social workers or leads to increased pressure on social services	Medium	High
Y					Illness leads to a lack of available court/tribunal time and creates backlogs in the system	Medium	High
Y					Residential children's care homes require isolation for containment (can't close them like a school).	Low	High
					Foster carers aren't willing/able to take on children in placements - either risk of infection, or fear of infecting. Short term decline in offers for placement. Will create backlog in system of placing children. This is particularly an issue given older people - who are more likely to be foster carers - are more vulnerable to Coronavirus (and so be concerned about transmission).	Low	Low
Y					If schools are closed for a significant period of time, this may increase the risk that vulnerable children aren't identified for social services	Low	Low
Y					Parents may be unwilling to allow social workers into their homes or to have contact with their children if there is a fear of contagion/is used as an excuse.	Low	Medium
Y					Parents may be unwilling to seek medical help for children who fall ill from the virus if they are concerned about it bringing them into contact with social services. At risk children become even more at risk.	Medium	Medium
Y						Low	Medium

EY	CSC	Schools	FE	HE	Issue	Notes	Wildcard	How are these affected by scale?
					How many teachers need to go off sick to close a school?	Is this the key question? Would any school that has had a case of coronavirus be closed automatically?		
		Y	Y	Y				
		Y	Y	Y	Who are the members of staff who, if they are not available, then the whole school stops working?			
		Y	Y		Can we issue all kids with face masks? Would this be financially feasible (supply side rigidities could create a spike in face mask costs? Little evidence that face masks help to prevent catching the virus. But evidence that wearing one may help prevent transmission to others. Can you locally target this?			
		Y	Y	Y	How do you make closing schools happen in a way that limits interaction between students outside of school and limit contagion? Likewise for FE/HE institutions. What are the different challenges based on social patterns of different age groups?			
		Y	Y		How do we educate children who aren't in school for a long time? Are there existing solutions we can learn from? Is this just for sick children, or will we need to do this for whole schools?			Much harder to do on a large scale (i.e. for whole schools or whole regions of school-age kids) than personalised home-learning plans for individual kids who get sick
Y	Y	Y	Y		How many people can stay home with their kids- do we need some sort of legislative sick pay for parents? How do we equip parents to manage if schools are closed for a long time. Will this have a knock on effect on other public services? Should we support young people in FE/HE who have to help with childcare in case of school closure?		Y	