

XXXXXXX - Director of Children's Services

XXXXXXX Metropolitan District Council

XXXXXXX - Chief Officer

XXXXXXX CCG

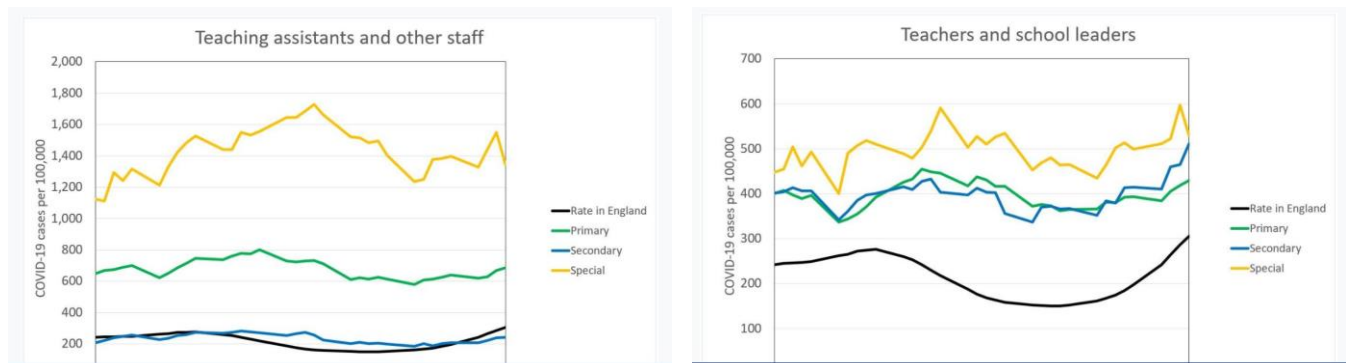
22nd January 2021

Dear XXX and XXX

We write to request that the local authority and its CCG partners follow the same steps as a growing number of local authorities which have approved the extension of Covid 19 vaccinations to staff in special schools, on the basis that most of these staff act as 'care workers' for vulnerable children and young adults. These authorities have recognised that there is a heightened risk of infection that these staff are exposed to, as shown in the data released on Monday 18th January by the ONS:

<https://explore-education-statistics.service.gov.uk/find-statistics/attendance-in-education-and-early-years-settings-during-the-coronavirus-covid-19-outbreak>

which has been analysed to show that staff in special schools are the group most exposed to the risk of infection (see below).



As of January 21st the CCGs in the following local authority areas in England have already made the commitment to vaccinate special school staff on the basis of their role as 'care workers' and have been given approval to do so by the central vaccine control authorities:

- North Yorkshire, Kirklees, Newcastle, Northumberland,
- Tameside, Oldham, Salford, Cheshire East and Cheshire West,
- Bath, Cambridgeshire, Peterborough, Suffolk, Norfolk,
- Merton, Essex, Islington, Hillingdon, Hammersmith.

We have spoken to colleagues in schools in the Special Schools Voice network where the staff teams have already been vaccinated, and are now mobilising to return their schools to full attendance.

There is good reason to support this request, beyond the simple fact that it is a legitimate prioritisation choice and many other CCG/LA partnerships are doing so:

1. Although the absolute risk to all children from Coronavirus is low, the sub-group of children who are most at risk include a high proportion who attend special schools; since March special schools have seen children with complex healthcare needs admitted to hospital ICU wards and there have been deaths with

Coronavirus recorded amongst our pupils. In secondary special schools we have many teenage students with Down's Syndrome whose parents do not feel that school is safe for them, due to the inclusion of the condition in the current "shielding" guidance.

2. The incidence of Coronavirus infection amongst staff in special schools has been high since the end of the first lockdown in May. IMTs have reviewed these outbreaks and often not found any significant failures in the systems of controls, rather they have understood that the nature of the children's behaviour and communication needs makes social distancing impossible, and limits the effective use of PPE.
3. Staff teams have shown resilience and commitment in the face of these challenges, but they are fatigued and extremely anxious, which means that there is a real risk that our special schools could see the threat of 'section 44 letters' return, with the impact of making continued operation of these schools close to impossible, if we 'lose the staff room'.
4. As this second full lockdown threatens to extend, families of children with complex needs are facing a nightmare choice of: sending their children in to schools where they know the virus circulates, as the rate of infection in the community rises again, or keeping their children at home and losing access to the services and respite that they rely upon most.
5. The longer the current situation persists the worse the harm gets; our schools now have many staff recovering with 'Long Covid' conditions that mean they are not able to fully return and work with students in schools. This fact alone threatens the continuity of provision in the worst affected special schools already.

As most of the positive Coronavirus cases identified in special schools are amongst the staff (>80%), the risk to the whole school population would be substantively reduced through full vaccinations of the staff teams, and this would change the balance of risks and enable us to return our schools towards a more normal service offer by half term.

We hope that you will support this request and actively pursue a quick, favourable, resolution.

There are highly active regional networks of special schools, which means that staff awareness will quickly grow that in schools nearby, where we have previously worked, trained and supported, colleagues are being vaccinated. The risk is that the perception of there being a 'two tier' system will also grow, with predictable consequences, unless Bradford is moving with the same tide.

Yours sincerely,

Resources

News coverage of ONS data release and reactions <https://schoolsweek.co.uk/regulator-ons-should-have-elaborated-on-limitations-of-controversial-teacher-covid-analysis/>

School Staff Coronavirus Impact data chart <https://neu.org.uk/media/14166/view>

Full methodology information on Covid-19 in the school workforce <https://neu.org.uk/media/14161/view>