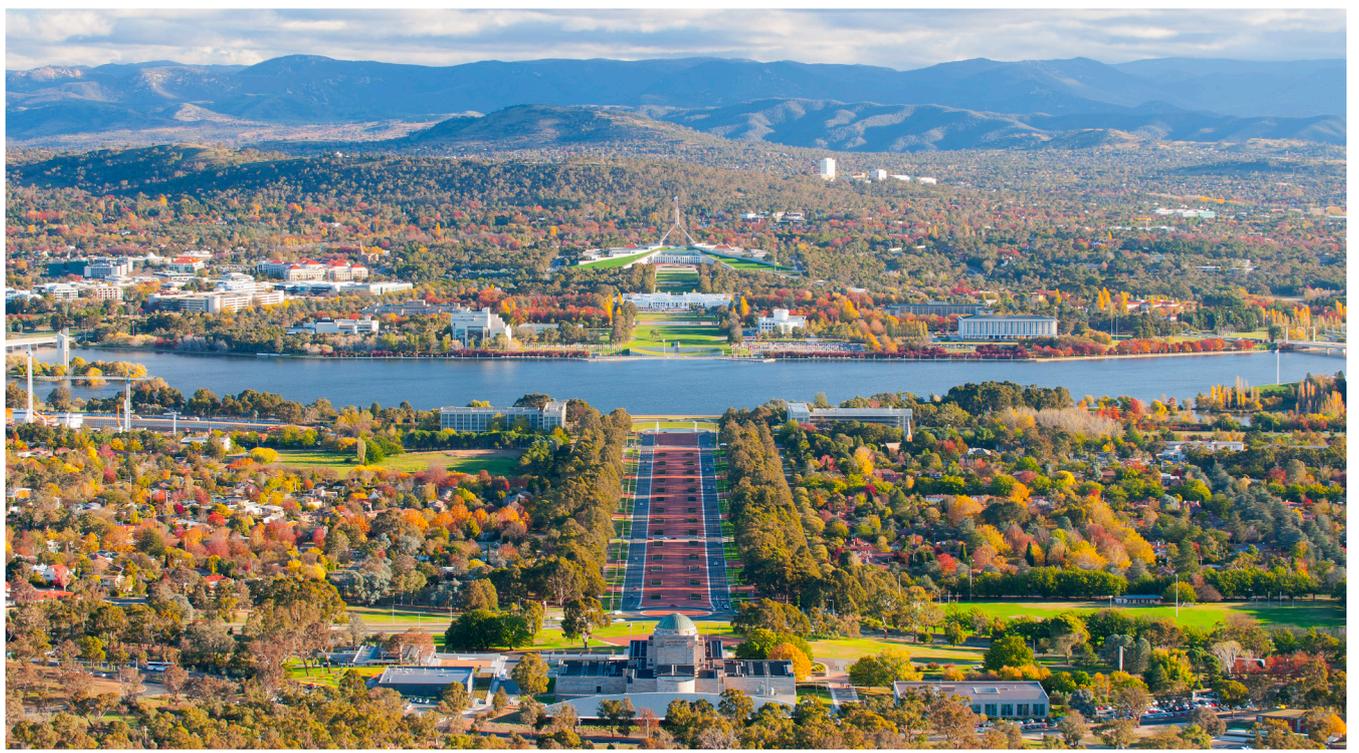


# SCHOOL EXCURSIONS TO THE AUSTRALIAN CAPITAL TERRITORY



## COVID-19 PROTOCOLS **GUIDELINES**

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# Background to the Guidelines

In mid-2020, the National Capital Educational Tourism Project (NCETP), with the support of the ACT Government, commissioned [Aspen Medical](#) to develop *School Excursion COVID-19 Protocols* in collaboration with the sector, for the purpose of reactivating local and interstate school excursions.

On 17 December 2020 the NCETP was advised the Protocols had been endorsed by [the ACT Health Directorate](#), and the NCETP has developed these user-friendly Guidelines to help schools travel safely to and from Canberra.

## Purpose

These Guidelines have been developed to address all components of how schools can travel safely to Canberra, from departure to return, including with reference to travel, accommodation and visits to attractions.

## Disclaimer of Liability

The following Guidelines have been developed to assist key stakeholders with decisions during the COVID-19 pandemic outbreak.

Every effort has been made to ensure the accuracy of content provided within these Guidelines, but key stakeholders should be aware that Protocols/Guidelines may change to reflect knowledge in the transmission of the COVID-19 virus.

The NCETP accepts no responsibility for any inaccuracies, information perceived as misleading or success or failure of any treatment regimen detailed.

Users of these Guidelines are strongly recommended where possible to confirm that information is correct by way of independent resources.

External links and information resources used in the development of these recommendations have been made available.

## Important Contact Details – 7 days a week

Australian Capital Territory COVID-19 Helpline	02 6207 7244 8 am – 8 pm
National Coronavirus Hotline	1800 020 080 24 hours a day
National Capital Educational Tourism Project	02 6162 4460 24 hours a day

# Recommendations

## General recommendations

The Australian Health Protection Principal Committee (AHPPC) has advised:

- Schools should maintain good behaviours to prevent the spread of disease.
- This includes frequent handwashing, respiratory hygiene and physical distancing where possible.
- Children and staff should not attend school if unwell and should stay home and be tested.
- In circumstances where children have other medical reasons for recurrent symptoms, a letter from the GP is sufficient to allow return to school without a negative test.<sup>1</sup>
- Physical distancing of children in schools is not required.<sup>2</sup>

This advice applies equally when schools are on excursions.

The ACT Government has advised 'be vigilant with hand and respiratory hygiene, maintain physical distancing from other groups, and stay home if feeling unwell.'<sup>3</sup>

The Centres for Disease Control and Prevention (CDC) guidelines recommend if physical distancing cannot be guaranteed wearing a face mask should be adhered to.<sup>4</sup>

Additionally:

- Children from the same school may be considered a cohort.
- Effort should be made to limit mixing between classes and year levels to minimise risk
  - this may affect numbers allowed into certain venues.
- Schools and industry bodies can take several actions to reduce the risk of COVID-19 exposure and transmission in schools and during excursions.
- These include: maintaining single cohorts; preventing mixing of cohorts at venues; and staggering scheduled times of activities for cohorts.
- School cohorts should implement appropriate measures to mitigate COVID-19 transmission in different parts of their journey.
- The Domestic Passenger Journey Protocol is used as a guide for airlines and airports to assist to mitigate transmission of COVID-19 within domestic airports and on aircraft.<sup>5</sup>
- If a school cohort requires transport by flight risk mitigation measures should be adhered to as implemented by the airline the cohort is travelling with.
  - These include physical distancing of a school cohort while boarding and disembarking a flight in which a school cohort can be seated together with spacing between other groups and individuals.

## Environmental Cleaning recommendations

The Department of Health has published [Coronavirus \(COVID-19\) Information about routine environmental cleaning and disinfection in the community](#).

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<sup>1</sup> <https://www.health.gov.au/news/australian-health-protection-principal-committee-ahppc-updated-statement-on-minimising-the-potential-risk-of-covid-19-transmission-in-schools>

<sup>2</sup> <https://www.health.gov.au/committees-and-groups/australian-health-protection-principal-committee-ahppc>

<sup>3</sup> <https://www.covid19.act.gov.au/community/travel>

<sup>4</sup> <https://www.cdc.gov/coronavirus/2019-ncov/downloads/community/School-Admin-K12-readiness-and-planning-tool.pdf>

<sup>5</sup> <https://www.infrastructure.gov.au/aviation/domestic-passenger-journey-protocol.aspx>

## School Children as a Cohort

1. School children treated as a cohort within the school environment and venues attended for educational purposes reduces the risk of COVID-19 transmission.
2. Maintaining separate cohorts during travel and excursion activities mitigates the risk of COVID-19 transmission into the broader community.
3. A cohort is defined as a group of people with shared characteristics (e.g. a school class, a year level) that has been established within the school environment.
4. Transmission of COVID-19 between children and from children to adults is uncommon, however adults who have not been specifically requested to fulfil a necessary function/role – e.g. part of a mandatory adult: student ratio, or an essential carer to a student – should be excluded from the excursion.
  - 4.1. These adults include, but are not limited to, parents, guardians, and carers from the households of children.
5. Identifying this group, class, year level, as a cohort will in turn treat this cohort as 1 unit.
6. This cohort will move as 1 unit while maintaining physical separation and distance from other cohort groups or members of the public.
7. AHPPC advice suggests maintaining physical distance between different cohort groups and limiting mixing between cohort groups should remain as a precautionary measure.
8. These measures will aid containment and contact tracing in the event of a confirmed case of COVID-19 within a cohort.
9. Movement of a cohort during an excursion could, for instance, take the form of:
  - 9.1. 2 x classes (~ 50 children) plus adults who already share a common space within the school environment.
  - 9.2. They are transported as 1 cohort by coach to a community venue where they are not required to maintain 1.5 metre physical distancing within their established cohort, but are required to practice physical distancing from other cohort groups (e.g. another school group) and members of the public.
  - 9.3. During this time, a high level of personal hygiene, including hand hygiene and cough etiquette, should be maintained.
  - 9.4. Precautionary measures such as designated toilets and eating areas should be considered to ensure this cohort does not mix with other similar cohort groups at a venue.
  - 9.5. The return journey should consist of the original cohort of children and adults on board the same coach with the same driver used to transport the group to the venue.
10. Remaining as 1 cohort will ensure it is unnecessary for these children to adhere to 1.5 metre physical distancing requirements.
11. Information regarding the composition of a cohort as it moves through Canberra should be stored by schools for 28 days, in accordance with ACT Health policy.<sup>6</sup>

### Hygiene Practice

12. School children should follow good hygiene practices including:
  - 12.1. Regularly washing hands and using of hand sanitiser.
  - 12.2. Not sharing drinks or food.
  - 12.3. Coughing or sneezing into the crook of an elbow, or a tissue which is immediately discarded.
  - 12.4. Monitoring of symptoms and excluding children with fever, cough, sore throat, or lethargy.

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<sup>6</sup> <https://www.legislation.act.gov.au/View/ni/2021-98/current/PDF/2021-98.PDF>

## Pre-excursion Risk Assessment

1. If a child displays symptoms such as fever, cough, sore throat, shortness of breath, and loss of smell or taste, or is generally unwell, they should not attend school.
  - 1.1. The child's Parent/Guardian/Carer should seek medical advice immediately.
2. All children and young people with a health care plan should ensure this is up-to-date and that, if required, it provides additional advice on monitoring and identification of the unwell child in the context of the COVID-19 pandemic.
3. On the day of the school excursion, prior to a child attending the excursion, a Personal Health Declaration (PHD) must be completed by a child's Parent/Guardian/Carer, which includes a declaration of the current health status of the child.
4. The PHD requires the Parent/Guardian/Carer of a child to declare if they are coming from an area deemed a hotspot by the State/Territory in which they reside, or have visited an exposure site during a designated exposure period.
5. If any Teacher, Parent/Guardian/Carer or child due to attend the excursion has come from an area deemed a hotspot or has visited an exposure site during a designated exposure period their school must assess whether they should attend the excursion.
6. Part of the PHD includes granting permission in circumstances of ACT COVID-19 Helpline engagement, for a child to undergo testing for COVID-19 under the supervision of an accompanying Teacher, in accordance with ACT COVID-19 Helpline directives and management guidelines.
7. All PHDs and the information they contain are to be collected and managed by the child's school in accordance with privacy requirements.
8. Before commencing the excursion (e.g. boarding a coach), observation of a child's general wellbeing is recommended to be undertaken by Teachers supervising the cohort.
9. If a child displays symptoms such as fever, cough, sore throat, shortness of breath, and loss of smell or taste, or is generally unwell, they should not take part in the excursion.
10. If any Teacher, Parent/Guardian/Carer or child due to attend the excursion is a suspected COVID-19 case they should be excluded from the cohort and isolated.
  - 10.1. The Parent/Guardian/Carer of a child must be contacted immediately.
  - 10.2. The excursion should not go ahead.
11. Where there is a suspected or confirmed case of COVID-19 in a school environment schools should contact the National Coronavirus Helpline (1800 020 080 – operating 24 hours a day, 7 days a week) for further advice, then contact the NCETP.
12. Schools should not conduct COVID-19 testing themselves.

# Transport

Transport and Tour Operators must have a COVID-19 safe plan specific to their operation.

## 1. Coach Travel

- 1.1. Maintaining adult–adult and adult–child physical distancing is recommended for all adults accompanying a cohort of children within a school environment, during transportation, and during an excursion.<sup>7</sup>
- 1.2. Adults accompanying children should maintain 1.5 metre physical distancing from other adults.
  - 1.2.1. An example of physical distancing may include:
    - 1.2.1.1. 2 adults sit on 2 sides at the front of the coach.
    - 1.2.1.2. 2 adults sit on 2 sides at the back of the coach.
- 1.3. If adults are unable to physical distance during transportation or during an excursion the wearing of a face mask should be adhered to, as recommended by CDC guidelines.<sup>8</sup>
- 1.4. Physical barriers such as plexiglass should be installed around a driver's seating area to isolate them from coach passengers, reducing the transmission risk of COVID-19 during boarding, disembarking and transport.
- 1.5. If physical barriers such as plexiglass are not available, spaced seating and a restricted area around the coach driver should be maintained, with the 1st row of the coach remaining empty when possible.
- 1.6. Drivers transporting the cohort should wear face masks, as recommended by CDC guidelines, when physical distancing cannot be guaranteed.
- 1.7. Entering and exiting a coach should be completed by separate doors if possible, to allow for unidirectional flow of movement through the coach.<sup>9</sup>
- 1.8. If separate entry and exit doors are not available, movement of students boarding and disembarking a coach should be orderly and controlled by supervising adults.
  - 1.8.1. An example of this is disembarking 1 row of seating at a time to eliminate bottlenecking of students at a coach door.
- 1.9. During the boarding and disembarking process the driver should remain behind the physical barrier of plexiglass or consider remaining outside the coach.
- 1.10. All coaches should carry a full PPE kit on board that can help address unforeseen situations that may require the use of PPE.
- 1.11. PPE kits should include gloves, surgical masks, safety eyewear (goggles/face shields) and gowns. Kits should also include bags for waste disposal and hand sanitiser to maintain hand hygiene.

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<sup>7</sup> <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public>

<sup>8</sup> <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/cloth-face-cover-guidance.html>

<sup>9</sup> <https://www.health.gov.au/news/principles-for-covid-19-public-transport-operations>

## **2. Air Travel**

- 2.1. If a child displays symptoms such as fever, cough, sore throat, and lethargy or is generally unwell they should remain at home and the child's parent/guardian/carer should seek medical advice immediately.

### **Pre-departure**

- 2.2. When dropping off a child at an airport on the day an excursion begins a Parent/Guardian/Carer must complete a PHD screening tool for their child; this includes a declaration of the current health of the child.
- 2.3. It is highly recommended that school groups use a separate group check-in area where possible, as this practice supports physical distancing from the public.
- 2.4. It is recommended that, at the initial gathering / attendance recording of a cohort within an airport facility (during handover of a child from a Parent/Guardian/Carer to a Teacher in charge of an excursion), before each child joins the cohort, observation of the general wellbeing of the child should be undertaken by Teachers, prior to the Parent/Guardian/Carer leaving the facility.
- 2.5. If a child is displaying symptoms such as a fever, cough, sore throat, or lethargy, and appears generally unwell, the child should not take part in the excursion or the boarding the aircraft but should return home with their Parent/Guardian/Carer who should seek immediate medical advice.

### **Departure Terminal**

- 2.6. Where possible physical distancing of the cohort from members of the public should be maintained while traversing through airport terminals.
- 2.7. If possible, the cohort should remain in 1 area once they arrive at the boarding gate. Interaction between the cohort and members of public should be limited when possible.
- 2.8. Regular hand hygiene should be undertaken.
- 2.9. Supervising adults should carry hand sanitiser – regular use is encouraged for the cohort while waiting to board.
- 2.10. In the event of the use of toilet facilities at the airport, strict hand hygiene should be employed, with hand sanitiser applied to children on their return to the cohort.
- 2.11. Visitation to airport shops should be discouraged while waiting to board.
- 2.12. The purchase of food/drink items should be discouraged while waiting to board.
- 2.13. Strict hand hygiene measures should be applied if items from airport shops or food/drinks have been purchased at an airport.
- 2.14. At all times while waiting to board the cohort should adhere to strict hand hygiene, cough etiquette and physical distancing from members of the public.

## **On-board/In-flight**

- 2.15. Physical distancing of the cohort from members of the public should be encouraged during the boarding process where possible.
- 2.16. The cohort should board the plane as 1 unit.
- 2.17. The entire cohort should be seated together in 1 area, if feasible separated from other groups or members of the public by at least 1 row of seats.
- 2.18. Adults travelling with the cohort should maintain physical distancing from other adults where possible.
- 2.19. If adults are unable to physical distance while onboard the plane the wearing of face masks should be adhered to.
- 2.20. Regular hand sanitisation pre-boarding and in-flight is highly recommended. Educators and other supervising adults who are part of the cohort should carry hand sanitiser and promote regular use to members of the cohort.
- 2.21. Cough etiquette and hygiene measures should be encouraged at all times.

## **Disembarking**

- 2.22. The cohort disembarking from the aircraft should be completed as 1 unit, maintaining physical distancing from aircraft crew and other members of the public where possible.
- 2.23. When possible, the cohort should remain seated until the aisle of the aircraft is clear of other passengers, to reduce the chances of bottlenecking while disembarking.
- 2.24. After disembarking the cohort should use hand sanitiser before traversing through the terminal to their baggage claim area.
- 2.25. The cohort should remain together as 1 unit at the baggage carousel, maintaining practice physical distancing from members of the public while waiting to claim their baggage.
- 2.26. Once baggage has been claimed the cohort should traverse as 1 unit to the waiting transport, maintaining physical distancing from members of the public.
- 2.27. Before boarding the coach the educators and supervising adults of the cohort should conduct a wellness check of all members of the cohort.
- 2.28. Hand hygiene should be performed before boarding the coach.

# Shared Accommodation

Accommodation providers must have a COVID-19 Safety Plan specific to their operations.

## 1. Shared Accommodation – Health & Wellbeing

- 1.1. Ensure staff and customers who are unwell are excluded from the premises.
- 1.2. Ensure staff complete a health screen before each shift.
- 1.3. Ensure customers/guests complete a daily health screen.
- 1.4. Provide staff with information and training on COVID-19, including advice related to when to get tested, physical distancing and cleaning.
- 1.5. Encourage each adult within a coach cohort not to share a room with anyone else.
- 1.6. Where possible, for each coach cohort, use separate doors for:
  - 1.6.1. entry and exit
  - 1.6.2. check-in
  - 1.6.3. baggage storing points.
- 1.7. Reduce crowding wherever possible.
- 1.8. Promote physical distancing with markers on the floor in areas where people are asked to queue (e.g. reception and hand hygiene stations).
- 1.9. Where reasonably practical ensure all venue staff always maintain 1.5 metres physical distancing (including at meal breaks) and assign workers to specific workstations.
- 1.10. Review regular deliveries and request contactless delivery and invoicing where practical.
- 1.11. Manage group activities in common areas (e.g. movie rooms, games rooms) to ensure appropriate physical distancing.

## 2. Shared Accommodation – Physical Distancing

- 2.1. Ensure cohorts are physically distanced from each other at all times.
- 2.2. Encourage Teachers and Drivers to physically distance from each other and from students – students within a cohort do not need to physically distance from each other.
- 2.3. Do not allow the use of recreational areas such as play equipment.

### **3. Shared Accommodation – Hygiene & Environmental Cleaning**

- 3.1. Adopt good hand hygiene and cough etiquette practices.
- 3.2. Ensure hand hygiene facilities are available to customers and staff.
- 3.3. Ensure bathrooms are well stocked with hand soap and paper towels and contain posters with instructions on how to wash hands.
- 3.4. Make hand sanitiser available at key points and encourage frequent use.
- 3.5. Consider strategies to reduce the number of surfaces touched by customers.
- 3.6. Clean public areas frequented by staff or customers at least daily with detergent/disinfectant.
- 3.7. Clean frequently touched areas and surfaces several times per day with a detergent/disinfectant solution or wipe.
- 3.8. Maintain disinfectant solutions at an appropriate strength.
- 3.9. Use disinfectant solutions in accordance with manufacturer instructions.
- 3.10. Ensure staff wear gloves and face mask when cleaning.
- 3.11. Ensure staff wash hands thoroughly with soap and water before and after cleaning.
- 3.12. Engage a professional cleaning service with expertise in Environmental Cleaning & Disinfection to decontaminate all relevant areas if a potential COVID-19 case is identified.

# Food Services & Dining Rooms

## 1. Food Services & Dining Rooms – Health & Wellbeing

- 1.1. Exclude from the premises staff and customers who are unwell.
- 1.2. Ensure staff complete a health screen before each shift.
- 1.3. Ensure customers/guests complete a daily health screen.
- 1.4. Provide staff with information and training on COVID-19, including advice related to when to get tested, physical distancing and cleaning.
- 1.5. Make staff aware of their leave entitlements if they are sick or are required to self-isolate.
- 1.6. Assign 1 staff member as a COVID-19 Safe Hygiene Marshall, who will utilise distinctive clothing (e.g. a high vis shirt or badge) and be responsible for ensuring all aspects of the COVID-19 Safety Plan are being adhered to, including overseeing physical distancing and cleaning, and ensuring the accuracy of recordkeeping.

## 2. Food Services & Dining Rooms – Physical Distancing

- 2.1. Each coach cohort is to be physically distanced others within a dining room.
- 2.2. Encourage Teachers and Drivers to physically distance from each other and from students – students within a coach cohort do not need to physically distance from each other.
- 2.3. Ensure no contact or mingling between coach cohort groups and groups at other tables.
- 2.4. Move or remove tables and seating to support 1.5 metres of physical distance between cohorts.
- 2.5. Reduce crowding and promote physical distancing with markers on the floor where people are asked to queue, (e.g. at entrances to dining rooms and at food service and beverage stations).
- 2.6. Where possible, ensure venue staff maintain 1.5 metre physical distancing (including at meal breaks and in office or meeting rooms).
- 2.7. Assign workers to specific workstations.
- 2.8. If a premises has multiple food and drink areas staff should work in an assigned area and not work across different areas.
- 2.9. Stagger start times and breaks for staff members, where practical.
- 2.10. Consider physical barriers such as plexiglass around counters where there are high-volume interactions with customers.
- 2.11. Review regular deliveries and request contactless delivery/invoicing, where practical.

### **3. Food Services & Dining Rooms – Hygiene & Environmental Cleaning**

- 3.1. Adopt good hand hygiene practices and cough etiquette.
- 3.2. Where possible, restrict the use of public access to bathrooms in dining room.
- 3.3. Visitors should use bathrooms in their allocated accommodation.
- 3.4. Reduce the number of surfaces touched by customers, wherever possible.
- 3.5. Do not supply self-serve buffet style food service areas, communal snacks, communal condiments, or self-service options (e.g. beverages or toast).
- 3.6. If condiments are offered they should be single-serve items.
- 3.7. Ensure food is served by staff in a controlled environment if buffet style food service is provided.
- 3.8. Design food service areas to be protected from cross-contamination, including through implementing measures such as sneeze guards.
- 3.9. All meals prepared for offsite activities (e.g. packed lunches) must be provided in single-use packaging for each person (there should be no shared meals or cutlery).
- 3.10. Ensure cutlery and tableware is cleaned with detergent and hot water, or with a commercial grade dishwasher.
- 3.11. Maintain disinfectant solutions at an appropriate strength.
- 3.12. Use disinfectant solutions in accordance with manufacturer instructions.
- 3.13. Ensure staff wash hands thoroughly with soap and water before and after cleaning.
- 3.14. Clean frequently used indoor hard surface areas at least daily with detergent/disinfectant.
- 3.15. Clean frequently touched areas and surfaces several times per day.
- 3.16. Clean tables, chairs, and any table settings between each cohort.

# Attractions

## 1. COVID-19 Safety Plans

- 1.1. An attraction's COVID-19 Safety Plan should outline how it will:
  - 1.1.1. manage public entry and exit points
  - 1.1.2. ensure movement of visitors in a single direction
  - 1.1.3. ensure physical distancing requirements are met
  - 1.1.4. develop and deploy appropriate signage
  - 1.1.5. maintain hygiene and infection control measures, including the management and cleaning of high-touch surfaces.

## 2. Physical Distancing & Hygiene Requirements

- 2.1. Monitor hand hygiene and cough etiquette
- 2.2. Monitor physical distancing of children transported as a cohort by coach from other cohort groups (e.g. another school group) and members of the public.
- 2.3. Monitor physical distancing of 1.5 metres between adults and children during excursions.
- 2.4. Monitor wearing of face masks If physical distancing measures cannot be guaranteed at all times, as recommended by the CDC and Health Direct Australia.<sup>10</sup>

## 3. Scheduling of Excursions

- 3.1. Where possible stagger session times.
- 3.2. Arrival and dropoff times for different cohorts should be considered, to limit mixing between different cohort groups, including educators and other adults accompanying school excursions.
- 3.3. Carefully control the entry, exit and flow of patrons or visitors to avoid people congregating in large groups outside their cohort – patrons should leave a venue expeditiously and not mingle.
- 3.4. Obtain the details of a primary contact person (an educator travelling with the cohort) from each cohort group for contact tracing purposes.
- 3.5. Consider giving an introductory talk to each school group cohort before they enter a venue, to avoid potential mixing with other groups and the public in communal areas.
- 3.6. Maintain a unidirectional flow through a venue to minimise the risk of a cohort encountering another cohort group.
- 3.7. Increase the frequency of cleaning in high-touch areas and restroom facilities.
- 3.8. Allow additional time between cohort groups for environmental cleaning of an area, recommended by the Australian Government Department of Health.<sup>11</sup>

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<sup>10</sup> <https://www.healthdirect.gov.au/coronavirus-covid-19-how-to-avoid-infection-faqs>

<sup>11</sup> <https://www.health.gov.au/sites/default/files/documents/2020/03/environmental-cleaning-and-disinfection-principles-for-covid-19.pdf>

## Management of Suspected & Confirmed Cases on Excursions

1. Schools are encouraged to develop their own management plan for a sick child or positive case, in line with State/Territory health department guidance.
  - If a Teacher, Parent/Guardian/Carer or child becomes a suspected COVID-19 case during a school excursion, or is experiencing symptoms consistent with COVID-19 (fever, cough, sore throat or lethargy), they should be isolated from the cohort in an appropriate space – if the person quarantined separately is a child they must be supervised by a Teacher.
  - Standard precautions should be adopted when providing care / first aid to a person suspected of having COVID-19.
  - Gloves, masks and, if available, a protective gown or apron should be used, including when dealing with blood or body fluids/substances.
  - Personal Protection Equipment (PPE) used should be double bagged and disposed of.
  - Wash hands with soap and water or use a hand sanitiser before and after providing care / first aid.
2. Teachers should contact the Australian Capital Territory COVID-19 Helpline (ACT COVID-19 Helpline) and the National Coronavirus Helpline for advice and comply with all directives given by the ACT COVID-19 Helpline, then contact the NCETP.
  - ACT COVID-19 Helpline directives may include advice that children in their cohort should be tested for COVID-19 and remain quarantined at the accommodation where they are staying until results are known.
3. Teachers should not conduct COVID-19 testing themselves.
4. If tests are positive the ACT COVID-19 Helpline will advise on quarantine options.
  - Teachers will remain with their cohort and maintain duty of care in contact with Parents/Guardians/Carers.
  - Teachers should create a list of potential close contacts.
  - A Parent/Guardian/Carer will be able to come to Canberra and isolate with their child.
5. All venues visited will be notified, under the direction of the ACT COVID-19 Helpline, with the support of the NCETP.
6. Schools returning home must contact their State or Territory health department before travel and heed advice provided to them.
7. If a cohort has travelled by coach it may return home by coach (if the destination can be reached without stopping), and then isolate for 14 days.
8. Drivers will be encouraged to wear PPE and must isolate on return.
9. Schools that have used mixed transport must liaise with the ACT COVID-19 Helpline to quarantine in Canberra.
10. A deep clean of the cohort's accommodation must occur, under the supervision of the ACT COVID-19 Helpline.
11. Where tests are negative a cohort can resume its excursion itinerary.
12. A child with symptoms should remain separate to avoid passing on illnesses, and should be collected by a Parent/Guardian/Carer as soon as possible.