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Lessons Unlearnt

Privatisation, outsourcing, packed classrooms and a total government failure to make them safe expose schools to deadly levels of infection.

Does anyone in power care? Shocking revelations about the government's handling of the pandemic are either ignored or dismissed. The vast human cost of its failure to protect us seems to leave its ministers unfazed. However badly the model of privatised, outsourced provision¹ falls over, the programme persists.

After last week's article revealing that unqualified teenage call handlers working, through *Serco*, on the government's test and trace system had been suddenly "upskilled"² – obliged to take on the role of experienced health workers and to make crucial clinical decisions – I've been inundated with messages from two groups of people. One consists of call-centre workers telling the same grim story: breaking down in tears as they have to handle situations for which they have no preparation and no skills. The other consists of retired or furloughed clinicians who say they have been repeatedly rebuffed when they have offered their services to the government. It seems that experienced and qualified health workers are being turned away in favour of 18-year-olds on the minimum wage.

But I've also been told a separate story, about a parallel disaster unfolding along similar lines. While the Department of Health has flushed £12bn down the toilet, in the form of its failed test and trace system³, the *Department for Education* (DfE) seems to be making a horrible mess of its own pandemic response. Here too roles once occupied by experienced clinicians have been handed to call-centre workers employed by *Serco*. To judge by what I've learned so far, the result is likely to be another public health catastrophe.

Over the past week, I've been talking to staff at schools and colleges across England. The story they tell me is consistent and chilling. For the first two weeks of term, schools in which Covid-19 was detected received, they say, excellent help and advice from local teams reporting to *Public Health England* (PHE). Skilled clinicians worked closely with school staff to devise the best responses, then followed up with checks and further advice.

But on 17 September everything changed. The system was suddenly replaced with the DfE's privatised helpline. Bespoke advice from local clinicians was replaced with call-centre workers reading mechanically from a script. One teacher tells me he was instructed, before he was able to explain the nature of the outbreak, to send 32 children home. Why 32? The handler couldn't tell him. Yet 32 was the answer, regardless of the school's circumstances.

¹ <https://www.theguardian.com/commentisfree/2020/oct/14/conservatives-state-money-privilege-boris-johnson-power>

² <https://www.theguardian.com/commentisfree/2020/oct/28/england-coronavirus-covid-test-and-trace-teenagers>

³ <https://www.theguardian.com/commentisfree/2020/oct/14/conservatives-state-money-privilege-boris-johnson-power>

The DfE confirmed to me that the call handlers are making clinical decisions. They are responsible for carrying out “a rapid risk assessment”⁴. They must decide whether cases should be “escalated”, “following a triaging of each school’s circumstances during the call”. Yet they are not required to have any clinical qualifications.

This radical shift in the quality of advice was accompanied by a radical shift in the content. While in the first half of September some schools were advised to send the whole year group home, now the universal, automatic advice seems to be to send home only the “close contacts” of infected students. This appears to mean their nearest neighbours in class. But schoolchildren mingle during break, at lunch, in the toilets and in the corridors.

Aside from the public health implications, this advice is causing pandemonium for teachers. If part of the year group is sent home and has to be taught remotely but the rest remains in school, how does one teacher do both jobs? A headteacher explained that he had spent weeks trying to persuade worried parents that it was safe to send their children back.

“So what do I tell them, now we have infections? ‘Don’t worry – I spoke to someone in a call centre, reading from a script?’”

Some schools are in danger of descending into chaos, as parents unilaterally decide they aren’t safe.

The DfE recommends that neither teachers nor pupils wear face masks in the classroom⁵. Teachers are perhaps the only workers who have to engage closely with a large number of people without protective equipment. There may be good reasons for this, as some pupils need to see the teacher’s face to understand what they are saying. But if masks can’t be used, a lower threshold for infection should surely be assumed.

Reading the department’s advice for making schools safe, I feel a creeping despair. It states that if they “maintain distance from pupils and other staff as much as possible”, “avoid creating busy corridors, entrances and exits” and keep “occupied spaces well ventilated”, “they can be confident they are managing risk effectively”⁶.

Thanks to decades of underfunding, many schools are overcrowded at any time. I know of classrooms designed for 20 pupils in which 34 children are shoved together. Teachers I’ve spoken to complain of rooms with no windows, or windows that won’t open. I spoke to one who is currently recovering from the coronavirus, contracted during an “inevitable” outbreak at school, who told me that the only way he could have sustained the recommended 2-metre distance from his pupils would have been to stand behind the whiteboard.

In June, the National Education Union wrote to the government, asking it to set up “Nightingale schools”: classrooms in churches, libraries and leisure centres. It received no reply. While the government gave £500m to restaurants and pubs, and billions to private companies in the form of untendered contracts, it refuses to provide any money for schools⁷ seeking to make their buildings safe. If they

⁴ https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/928841/Symptomatic_children_action_list_SCHOOLS_FINAL_22-10.pdf

⁵ <https://www.gov.uk/government/publications/face-coverings-in-education/face-coverings-in-education>

⁶ <https://www.gov.uk/government/publications/actions-for-schools-during-the-coronavirus-outbreak/guidance-for-full-opening-schools>

⁷ <https://www.gov.uk/government/publications/actions-for-schools-during-the-coronavirus-outbreak/guidance-for-full-opening-schools>

want ventilation systems, windows that open, extra classrooms or even marquees for outdoor learning, they'll have to dig into their own, maxed-out budgets.

The long-term funding crisis in schools has collided with the long-term funding crisis in public health⁸. As PHE was overwhelmed in mid-September, the sensible policy would have been to expand its teams by drafting in retired or furloughed clinicians. But the government had already announced that PHE was to be closed down, and that its semi-privatised successor would be run by the person who had presided so disastrously over test and trace: Dido Harding⁹. The government appears to have used the opportunity offered by the pandemic to complete the demolition of our public health system that the then health secretary, Andrew Lansley, began 10 years ago.

Now infection is raging among secondary-school and college students¹⁰. In August, researchers warned that without a major improvement in test and trace the reopening of schools could lead to a second peak¹¹. The major improvement didn't happen, and the forecast proved correct. But, though the rest of the country is in lockdown as a result, no sensible measures have been taken to prevent schools from becoming new reservoirs of infection.

I understand the arguments for keeping schools open. But it will lead to disaster without a massive, emergency programme to refurbish them, find extra premises, and give them instant access to professional advice and help. But the government has other priorities: it seems to care more about handing contracts to favoured corporations than about the health of the nation.

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⁸ <https://www.theguardian.com/commentisfree/2020/nov/02/lockdown-2-england-public-health-track-and-trace-covid-pandemic>

⁹ <https://www.bmj.com/content/370/bmj.m3332>

¹⁰ <https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/conditionsanddiseases/bulletins/coronaviruscovid19infection-survey-pilot/30october2020>

¹¹ [https://www.thelancet.com/journals/lanchi/article/PIIS2352-4642\(20\)30250-9/fulltext](https://www.thelancet.com/journals/lanchi/article/PIIS2352-4642(20)30250-9/fulltext)