

Stockbridge Primary & Pre-School

Visitor Record

The easing of social and economic lockdown measures following the COVID-19 outbreak is being supported by NHS Test & Trace. In line with guidance issued by the government, we will keep your details for 21 days. We will only share them with NHS Test & Trace, if asked, in the event of a potential outbreak linked to the school. After 21 days we will delete/destroy your details. We will need your name and a contact, preferably mobile phone number – to ensure everyone’s safety before you enter the building. Your email will also be helpful to support NHS information gathering on potential Covid-19 Clusters.

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| --- | --- |
| The following information will be kept in a locked, secured location and will only be shared with NHS Test & Trace in the event of a linked confirmed COVID-19 case. You will be notified if your information is to be shared with NHS Test & Trace. | |
| Name |  |
| Date of Visit |  |
| Designation/Role |  |
| Contact telephone number |  |
| Email Address |  |

Before your visit

Please complete the following COVID-19 Risk Assessment.

|  |  |  |
| --- | --- | --- |
| Have you experienced the following in the past 14 days:   * Altered or loss of taste/smell; * High temperature * New or persistent cough | Yes | No |
| Are you in contact with anyone who is in isolation or has been sick and or confirmed to be COVID-19 positive? | Yes | No |

|  |  |
| --- | --- |
| I agree to inform the school if any of the above occur in the next 14 days | |
| Signed: | Date: |

Test & Trace

The information provided on this form will be used to respond to any infection that occurs within the school or if you yourself report an infection to the school. The school is expected to work with the local public health team when dealing with any infections or outbreaks and will provide all contacts that children, staff or visitors have had where it is relevant.

Signed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please complete and bring along on your visit or complete with a digital signature and email to: [adminoffice@stockbridge.hants.sch.uk](mailto:adminoffice@stockbridge.hants.sch.uk).

Contact during your visit - Office Use Only

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| --- | --- |
| Name | Designation |
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