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| **COVID-19 track and trace sheet for students displaying symptoms and awaiting a COVID-19 test result** **Version 2** |

This document is to help the school identify who your child has been in close contact with during the last two days in school. This will allow the school to have an informed discussion with the Local Authority and the local Health Protection Team (HPT) about what actions we need to take to stop the spread of virus if your child has a positive test result. The school will not reveal the identity of those members of The Priory School community who have tested positive for COVID-19.

The definition of contact is:

1. Face-to-face contact (within 1 metre) with someone including:
* Being coughed on;
* Having a face-to-face conversation within 1 metre;
* Having skin-to-skin contact;
* Contact within 1 metre for one minute or longer without face-to-face contact.
1. A person who has been within 2 metres of someone for more than 15 minutes.
2. A person who has travelled in a small vehicle with someone who has tested positive for COVID-19.

**What do I need to do?**

1. As a family sit down and work through the questions below.
2. Your child will need to try to remember who they had ‘contact’ with on the last day they were in school and whether this was different from the day before.
3. Do not worry if you cannot remember names of students or if you only know their first names.
4. Please email this document to COVID19@priory.herts.sch.uk within 12 hours of your child being off school with COVID-19 symptoms.

**What will the school do?**

1. Once we have received the information from this document we will cross-reference the names you have given against our own information.
2. We will draw a conclusion on who we feel you have been in close contact with and discuss this with the Local Authority and / or the local Health Protection Team.
3. Once we have agreed our approach, staff, parents and students will be notified.

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| **Name of the student with COVID-19 symptoms**  | **Date of birth** | **Year group**  | **Form**  | **Contact details – telephone / home address / email address**  | **Number of people living in the house**  |
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| **Sibling(s) (name)** | **Date of birth** | **School and year group** | **Any COVID-19 symptoms** |
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| **What date did you first notice that you had COVID-19 symptoms?** |  |
| **What was your last day in school?**  |  |
| **What date did you have your test?** |  |
| **What date did you get your result?** |  |

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| **Who are the 6 friends you spend the most time with at school?** |
| **Friend 1**  | **Friend 3** | **Friend 5** |
| **Friend 2** | **Friend 4** | **Friend 6**  |

**What contacts did you have with people on the last day you were in school?**

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| **How did you arrive at school?**  |
| How did you come to school?  |  |
| Did you wear a mask coming to school? |  |
| If you caught a bus to school which one was it? |  |
| If you came to school by bus who:* sat next to you?
* was in front of you?
* was behind you?
* was across from you?
 | Student name 1Form group  |  | Student name 4Form group  |  |
| Student name 2From group  |  | Student name 5Form group  |  |
| Student name 3From group  |  | Student name 6Form group  |  |
| Where did you get the bus from and at what time did you get on the bus?  |  |
| How long was the journey?  |  |
| If you walked to school who did you walk with (less than 2 metres apart) | Student name 1 Form group  |  | Student name 3From group  |  |
| Student name 2 Form group  |  | Student name 4Form group  |  |
| How long did it take for you to walk to school? |  |
| If you came by car who did you travel with and where did you sit?  | Person 1 in the car  |  | Person 4 in the car  |  |
| Person 2 in the car  |  | Person 5 in the car  |  |
| Person 3 in the car  |  | Person 6 in the car |  |
| If you cycled to school who did you cycle in with? | Student name 1Form group  |  | Student name 3Form group  |  |
| Student name 2Form group  |  | Student name 4Form group  |  |
| On the way to school did you stop anywhere for food or go into another person’s house? For example, the BP garage outside school. |  |
| Based on the above questions did you have close contact with anybody different (adult or student) when you came to school the previous day. If so, please record their names and form groups. |  |

**The school has seating plans for form time but we need to cross-reference the names of students you record down who were sitting near you**

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| **What did you do before registration and during registration?**  |
| What time did you enter the school site? |  |
| Who did you enter the school site with? (names of the students and form groups) |  |
| Did you go straight to your ‘zone’? |  |
| In your zone who were you talking to (less than 2 metres apart)? | Student name 1 Form group |  | Student name 3Form group  |  |
| Student name 2Form group  |  | Student name 4Form group  |  |
| When lining up to go to your classroom who was in front of you and who was behind you? | Student name 1 |  | n/a | n/a |
| Student name 2 |  | n/a | n/a |
| Who sat next to you, who sat in front of you and who sat behind you during registration?  | Student name 1 |  | Student name 4 |  |
| Student name 2 |  | Student name 5 |  |
| Student name 3 |  | Student name 6 |  |
| Based on the above questions did you have close contact with anybody different (adult or student) the previous day before and during registration? If so, please record their names and form groups. |  |

**The school has seating plans for all your lessons but we need to cross-reference the names of students you record down who were sitting near you**

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| **Who were you sitting next to in your lessons?**  |
| Period 1 | * Who was in front of and behind you when lining up outside?
* Who sat next to you, who sat in front of you and who sat behind you?
 | Student name 1  |  | Student name 4 |  |
| Student name 2 |  | Student name 5 |  |
| Student name 3 |  | Student name 6 |  |
| Period 2 | * Who was in front of and behind you when lining up outside?
* Who sat next to you, who sat in front of you and who sat behind you?
 | Student name 1  |  | Student name 4 |  |
| Student name 2 |  | Student name 5 |  |
| Student name 3 |  | Student name 6 |  |
| Period 3 | * Who was in front of and behind you when lining up outside?
* Who sat next to you, who sat in front of you and who sat behind you?
 | Student name 1  |  | Student name 4 |  |
| Student name 2 |  | Student name 5 |  |
| Student name 3 |  | Student name 6 |  |
| Period 4 | * Who was in front of and behind you when lining up outside?
* Who sat next to you, who sat in front of you and who sat behind you?
 | Student name 1 |  | Student name 4 |  |
| Student name 2 |  | Student name 5 |  |
| Student name 3 |  | Student name 6 |  |
| Period 5 | * Who was in front of and behind you when lining up outside?
* Who sat next to you, who sat in front of you and who sat behind you?
 | Student name 1 |  | Student name 4 |  |
| Student name 2 |  | Student name 5 |  |
| Student name 3 |  | Student name 6 |  |
| During the day did you visit any of the following areas:First Aid room, Pastoral base, Learning Support (C1 or B3). If you did, did you have contact with anyone (student or member of staff) closer than 2 metres?  |  |
| **What happened in your lessons?** Please answer these questions for each lesson you had. |
| * Did the teacher teach from the front?
* Did you move out of your seat and work with other students?
* Did the teacher or TA work closely with you if you needed support (less than 1 metre). Did they have a face mask on?
* Did you work with a different ‘group of students’ outside your form bubble? (PE /DT)
 | Period 1 |
| Period 2 |
| Period 3 |
| Period 4 |
| Period 5 |

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| **Break time – 15 minutes** |
| Did you go into the Café? |  |
| Did you stay in your identified year group zone? |  |
| Did you have any close contact with anyone during break time – less than 2 metres?  | Student name 1Form group  |  | Student name 3Form group  |  |
| Student name 2Form group  |  | Student name 4Form group  |  |
| Based on the above questions did you have close contact with anybody different (adult or student) the previous day during break time? If so, please record their names and form groups. |  |

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| **Lunchtime** |
| Did you go into the Café? |  |
| Did you stay in your identified year group zone? |  |
| Where were you in your year group zone? Please describe your location as it will help when checking CCTV for close contacts.  |  |
| Did you have any close contact with anyone during break time – less than 2 metres?  | Student name 1Form group |  | Student name 3Form group |  |
| Student name 2Form group  |  | Student name 4Form group  |  |
| Based on the above questions did you have close contact with anybody different (adult or student) the previous day during lunchtime. If so, please record their names and form group. |  |

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| **How did you leave school?**  |
| How did you leave school?  |  |
| Did you wear a mask leaving school? |  |
| If you caught a bus home which one was it? |  |
| If you went home by bus who:* sat next to you?
* was in front of you?
* was behind you?
* was across from you?
 | Student name 1Form group  |  | Student name 4Form group  |  |
| Student name 2Form group  |  | Student name 5Form group  |  |
| Student name 3Form group  |  | Student name 6Form group  |  |
| Where did you get the bus from and at what time did you get on the bus? |  |
| If you walked home who did you walk with (less than 2 metres apart) | Student name 1 From group  |  | Student name 3Form group  |  |
| Student name 2 Form group  |  | Student name 4Form group  |  |
| If you went home by car who did you travel with and where did you sit?  | Person 1 in the car  |  | Person 4 in the car  |  |
| Person 2 in the car  |  | Person 5 in the car  |  |
| Person 3 in the car  |  | Person 6 in the car |  |
| If you cycled home who did you cycle with? | Student name 1Form group  |  | Student name 3Form group |  |
| Student name 2Form group  |  | Student name 4Form group  |  |
| On the way home did you stop anywhere for food or go into another person’s house? |  |
| Based on the above questions did you have close contact with anybody different (adult or student) the previous day when you left school. If so, please record their names and form groups.  |  |

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| **Any additional information regarding contacts in school or outside school over the last 48 hours**In the last 48 hours which friends have you had close contact with outside school and what schools and year groups are they in?(Friends coming over to the house, meeting up to go and do outside activities, organised club events – sports, drama, dance, scouts etc.) |
| Name:School: Year group:  |  | Name:School: Year group:  |  | Name: School: Year group:  |  |
| Name: School: Year group: |  | Name: School: Year group: |  | Name:School: Year group: |  |
| Name:School: Year group:  |  | Name:School: Year group:  |  | Name:School: Year group:  |  |
| Name:School: Year group:  |  | Name:School: Year group:  |  | Name:School: Year group:  |  |

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| **Organised clubs – can you record down the outside clubs that your child has attended in the 48 hours since the COVID-19 positive test** |
| Club name  | Contact name  | Mobile number  | Email address  |
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Wednesday, 16 September 2020 (GE)