

Tel: 01903 233835 / 231512 E-mail: info@davison.w-sussex.sch.uk www.davison.w-sussex.sch.uk

5<sup>th</sup> January 2021

Dear Parent/Carer,

Please read the information below and fill out the consent form here (even if you have already expressed your permission in the previous survey):

### **COVID-19 TEST CONSENT FORM HERE**

## Information re: consent form for COVID-19 testing in secondary schools and colleges

#### Introduction

This consent form is for participation in tests designed to detect asymptomatic coronavirus cases. Anyone experiencing symptoms should follow government guidelines to selfisolate even if they have had a recent negative lateral flow test.

# Consent relates to the following groups of students/pupils and staff as follows:

- For pupils and students younger than 16 years this form must be completed by the parent or legal guardian. Please complete one consent form for each child you wish to participate in testing.
- Pupils and students over 16 who are able to provide informed consent can complete
  this form themselves, having discussed participation with their parent / guardian if under
  18.
- For any pupil or student who does not have the capacity to provide informed consent

   this form must be completed by the parent or legal guardian. Please complete one
   consent form for each child you wish to participate in testing.
- Staff will complete this form themselves.

## Terms of consent

- 1. I have had the opportunity to consider the information provided by the school/college about the testing, ask questions and have had these answered satisfactorily, based on the information presented in the COVID-19 area of the school website (the privacy notice from the DFE and the Leaflet- How to do your Covid-19 test.).
- 2. In the case of under 16s, I have discussed the testing with my child and my child is happy to participate. If on the day of testing they do not wish to take part, then they will not be made to do so and consent can be withdrawn at any time ahead of the test.
- 3. <u>I consent to having / my child having</u> a nose swab for lateral flow tests. <u>I / my child</u> will self-swab if <u>I / my child</u> is able to otherwise I understand that assistance is available. In the case of under 16s or pupils who are not able to provide informed consent, I have discussed the testing with my child and they are happy to participate and self-swab (with assistance if required).
- 4. I understand that there may be multiple tests required and this consent covers all tests for the below named person. If, on the day of testing <u>I / they</u> do not wish to take part, then I

- understand <u>I / they</u> will not be made to do so and that consent can be withdrawn at any time ahead of the test.
- 5. I consent that my / my child's sample(s) will be tested for the presence of COVID-19.
- 6. I understand that if my /my child's result(s) are negative on the lateral flow test I will not be contacted by the school/college except where I am / they are a close contact of a confirmed positive.
- 7. If the lateral flow test indicates the presence of COVID-19, I consent to <a href="having">having</a> a nose and throat swab for confirmatory PCR testing. I/they will follow the instructions on the PCR Kit to return the test the same day to an NHS Test & Trace laboratory.
- 8. If the lateral flow test indicates the presence of COVID-19, I commit to ensuring that <u>I / my child</u> is removed from school premises as promptly as possible, bearing in mind <u>I / they</u> may have some anxiety following a positive test result.
- 9. I consent that I / they will need to self-isolate following a positive lateral flow test result, until the results of the confirmatory PCR have been received.
- 10. I agree that if my / my child's test results are confirmed to be positive from this PCR test, I will report this to the school / college and I understand that I/ my child will be required to self-isolate following public health advice.
- 11. I consent that if a close contact of my child tests positive but I / my child has tested negative, I / they will continue to attend school / college but will be tested every day at school / college for 7 days\*

\*Please note that your daughter will be expected to self-isolate, at home, over any weekend until lateral flow testing can continue at school.

Kind regards

Tony Davies
Deputy Headteacher