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Dear Parent/Guardian,

As you may be aware the Government has today (Thursday 28th May) launched it’s NHS Coronavirus Test and Trace system. The guidance for this can be read here <https://www.gov.uk/guidance/nhs-test-and-trace-how-it-works>

This system involves those with possible Covid-19 symptoms being asked to undertake a test which, if positive, then implements the tracing element. This is completed via a dedicated NHS website and will result contact tracers contacting everyone that you may have been in contact with, in previous days.

As a setting there is always the possibility that we may be contacted by a contact tracer if someone within the setting has been in contact, either directly or indirectly, with someone who has tested positive for the virus. The detail of the scheme is still rather patchy but it may be that if we are contacted we will be asked to provide details of those others that the person or child may have been in contact with.

This is a concern for us as it would be a breach of our strict data protection policies to give out any personally identifiable information without your prior consent. Therefore we are asking you, by way of this letter and the slip below, to provide us with your explicit permission to share your name, telephone number and email address if we are contacted by a contact tracer. In line with our sharing of information policy we will check the identity of anyone asking for this information following the procedures already in place. It is worth pointing out that this Test and Trace system is not mandatory and therefore we are under no legal obligation to provide your information if you do no wish us to do so. Details of how the NHS will use your data is detailed in the guidance above.

Even with the Test and Trace system in place we will obviously inform you ourselves if someone within the setting tests positive and will take the appropriate actions as detailed in our risk assessments.

Please complete the form below with your preference and permission for supplying your information if it is required and if you have any questions please don’t hesitate to come and speak to us.

Kind Regards

Please tick the boxes which apply below:

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| I [Enter name}………………………………………………… give permission for my name to be given to an NHS contact tracer if required.  Signature …………………………………… |  |
| I [Enter name}………………………………………………… give permission for my telephone number to be given to an NHS contact tracer if required.  Signature …………………………………… |  |
| I [Enter name}………………………………………………… give permission for my email address to be given to an NHS contact tracer if required.  Signature …………………………………… |  |
| I [Enter name}………………………………………………… do not give permission for my personal details to be given to an NHS contact tracer.  Signature …………………………………… |  |