**Education Settings COVID-19 CONFIRMED Case Report**

Please complete the following and send to [phnotifications@cornwall.gov.uk](mailto:phnotifications@cornwall.gov.uk).

|  |  |
| --- | --- |
| **Setting Information** |  |
| Name of setting |  |
| Postcode |  |
| Name of person reporting |  |
| Role |  |
| Contact telephone/email |  |
| **Case Information** |  |
| Name |  |
| Date of Birth |  |
| Home postcode |  |
| Is the case a child/student or staff? |  |
| Year group |  |
| Bubble/class |  |
| **Test Information** |  |
| Type of test being reported *(please select one)* | Positive LFD (rapid test)  Positive PCR  Positive Confirmatory PCR (after + LFD)  Negative Confirmatory PCR (after + LFD) |
| Date of test |  |
| Date last in the setting |  |
| Date of symptom onset *(if applicable)* |  |
| Symptoms *(if applicable)* |  |
| No. of children/students isolating |  |
| No. of staff isolating |  |
| Summary of actions *(please select all that apply)* | Contacts identified & isolated  Letters sent/parents contacted  Deep clean of affected areas  Contacted DfE (optional)  Contacted PHE (5+ cases only) |
| Is there any additional useful information? E.g.:   * *Contact with confirmed case* * *Clinically vulnerable/extremely vulnerable* * *Child in care/care leaver* * *SEND* * *Uses school or public transport* * *Additional actions taken* |  |
| Do you require further advice/follow up from Cornwall Public Health team? |  |