

Consent form for COVID-19 testing in secondary schools and colleges – Meadowhead School Academy Trust – Terms of Consent - STAFF

Introduction

This consent form is for participation in tests designed to detect asymptomatic coronavirus cases. Anyone experiencing symptoms should follow [government guidelines to self-isolate](#), 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 aged 16 and over and 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** should complete this consent form electronically from themselves using the following link: <https://mhsch.uk/covid19testingstaffconsent>

Terms of consent

1	I have had the opportunity to consider the information provided by the school about the testing, ask questions and have had these answered satisfactorily, based on the information presented in the letter dated 12 th January 2021 and the attached Privacy Notice.
2	I consent to having a nose and throat swab for lateral flow tests. I will self-swab if I am able to otherwise I understand that assistance is available.
3	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on the day of testing I do not wish to take part, then I understand I will not be made to do so and that consent can be withdrawn at any time ahead of the test.
4	I consent that my sample(s) will be tested for the presence of COVID-19.
5	I understand that if my result(s) are negative on the lateral flow test I will not be contacted by the school except where I am a close contact of a confirmed positive.
6	If the lateral flow test indicates the presence of COVID-19, I consent to having a nose and throat swab for confirmatory PCR testing. I will follow the instructions on the PCR Kit to return the test the same day to an NHS Test & Trace laboratory.
7	If the lateral flow test indicates the presence of COVID-19, I commit to ensuring that I leave school premises as promptly as possible, bearing in mind I may have some anxiety following a positive test result.
8	I consent that I will need to self-isolate following a positive lateral flow test result, until the results of the confirmatory PCR have been received.
9	I agree that if my test results are confirmed to be positive from this PCR test, I will report this to the school and I understand that I will be required to self-isolate following public health advice.
10	I consent that if one of my close contacts tests positive but I have tested negative, I will self-isolate until the outcome of the PCR test for the positive case is known. If the PCR test is negative, I will be informed and I can return to school. If the PCR test is positive, I will self-isolate for a period of 10 days after the last date of contact with the positive case.