

**Coronavirus Pre Visit Questionnaire**

**What we will do with your Personal Information**

Shropshire Council is collecting your personal information for the purpose of meeting the statutory requirement of the Health & Safety at Work etc Act 1974.Shropshire Council will not share any of your personal data collected with external organisations unless required to do so by law when your data may be shared with other organisations for example the Health and Safety Executive (HSE) or the council’s insurers. For further details on the council’s privacy arrangements please view the privacy page on the council’s Website.

We are following current government advice on a day-to-day basis. Please see website https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance/stay-at-home-guidance-for-households-with-possible-coronavirus-covid-19-infection#ending-isolation

**Please answer all of the questions.**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Parent/carer name |  | | | |
| Parent/carer address |  | | | |
| Date |  | | | |
| Reason for visit |  | | | |
| Service area provision/provider |  | | | |
| Level of support needed  Is this s47 |  | | | |
| Access to running water and soap | **Yes/no** | Comments |  | |
| Home visit needed | **Yes/no** | Telephone call support needed | **Yes/no** | |
| **1.** Has the parent/carer had close contact with, or helped care for, anyone suspected or diagnosed as having Coronavirus, or who is subject to health monitoring for possible exposure to Coronavirus? | | | | **YES/ NO** |
| **2.** Within the last 15 days, has the parent/carer suffered from flu-like symptoms such as:   * dry-cough, * onset of fever * intense weakness * Shortness of breath * headache * sore throat * loss of taste and/or smell | | | | **YES/ NO** |
| If **YES** to any of the above **3** questions have they contacted NHS 111? | | | | **YES/ NO** |
| **3.** If they have contacted NHS 111, what advice was given? | | | | |
| **4.** Is that an impact in regard to localised restrictions in relation to the government Tier system? | | | | **YES/ NO** |
| If yes, please detail what that is: | | | | |
| 5. Have your travelled back from a country on the government’s quarantine list within the last 14 days? | | | | **Yes/ No** |
| If yes please specify whereabouts you have travelled from and when you arrived back in the UK | | | |  |
| I declare that the above information is correct to the best of my knowledge. | | | | *Visitor Signature* |
| Visit Authorised? | | | |  |
| If **NO**, state reason | | | | |
| Authorisation  Name | | | | *Signature* |