# Covid-19 Confirmed Cases in Early Years Provisions: Form to complete for confirmed cases

## Please complete one form for each positive case

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| **Name of Setting / Childminder:** | |
| **Question** | **Answer** |
| Who tested positive (staff or child)? |  |
| Date of symptom onset (if symptomatic)? |  |
| When were they last in the provision? |  |
| When did they take a Covid-19 test? |  |
| When did they get their test result? |  |
| Who and how many is/are self-isolating (breakdown of staff/children and any bubbles) as a result? Please include those who tested positive in your figures. | Staff:  Children / Bubbles: |
| When does the self-isolation end (last day of isolation) for the close contacts? |  |
| Have there been any other cases within the provision in the last 14 days? |  |
| Date that the provider called the DfE for advice? Please provide any reference number given. |  |
| Date that the LCRC has been contacted (if there is more than two cases in a 14 day period)? Please provide any reference number given. |  |
| Date that case was reported to Ofsted or the provider plans to report to Ofsted (this should be within 14 days). |  |
| If the whole setting is closed please give planned date of re-opening. |  |
| Would you like an early years consultant to call you back for support / advice |  |

**Please send this completed form to: Please copy in your allocated Early Years Consultant:**

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