**[TITLE]**

**[DATE]**

*No planned patient contact. No probable chickenpox infection (contact w/in 48 hrs), no D&V, ideally no coughs/colds. Please ensure to include local risk assessment advice as you enter different areas / situations, and prepare students for anything they might see before entering an area.*

**Photography:** We will be taking photos throughout the day, therefore if you have not consented to photography you will need to let us know and we will ensure not to have you in any shots. Consent will have covered our use of photos both externally and internally.

**Main Contact:**

**Event Manager:**

**Volunteers**:

**Proposed Schedule**

|  |  |  |  |
| --- | --- | --- | --- |
| **Time** | **Agenda Item** | **Location** | **Lead** |
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# Key Contacts

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| --- | --- |
| Communications  | *Phone number (extension / mobile)* |
| Estates (if power problems) | *Phone number (extension / mobile)* |
| Facilities (rubbish collection ) | *Phone number (extension / mobile)* |
| Welcome Desk | *Phone number (extension / mobile)* |
| Patient Experience (*insert name*) | *Phone number (extension / mobile)* |
| Security  | *Phone number (extension / mobile)* |
| Catering | *Phone number (extension / mobile)* |
| [*Event manager*] | *Phone number (extension / mobile)* |
| [S*taff lead*] | *Phone number (extension / mobile)* |
| Volunteers | *Phone numbers (mobiles)* |