

IV. Job Aids and Checklists

A. Health Screening Questionnaire

Name (Print):

Department:

In-Person (Yes/No):

Telephone Call(Yes/No):

Date:

Time In:

IF YOU OR ANY MEMBERS OF YOUR HOUSEHOLD HAVE TRAVELLED OUTSIDE OF CANADA WITHIN THE PAST 14 DAYS YOU ARE NOT PERMITTED TO ENTER THE FACILITY.

Are you experiencing any of the following symptoms with unknown causes?

Fever	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Cough	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Shortness of Breath	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Difficulty Breathing	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Chills	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Have you had contact with any person with, or under investigation for, COVID-19 in the last 14 days?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Have you or anyone from your household travelled outside of Canada?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

Office Use Only – To Use if “Yes” Was Answered to Any Question Above

In person, the person being screened was:				
Unfit for work and sent home	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Sent back to work	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Referred to a doctor or Public Health with benefit forms (if applicable)	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
On the telephone, the person being screened was:				
Instructed to remain at home	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Referred to go see a doctor or Public Health and send benefit forms (if applicable)	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Advised they can come to work	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

Comments:

**IF YOU ARE BEING REFERRED TO PUBLIC HEALTH FROM THIS SCREENING, CONTACT
THE PUBLIC HEALTH DEPARTMENT FOR YOUR AREA**

Facility Representative or Designate: _____

Date: _____

**Please call Facilities Manager, Health & Safety Manager, or Human Resources Manager
for assistance.**

For further information on COVID-19, refer to the Public Health Agency of Canada
<https://www.canada.ca/coronavirus>