

TRI-COUNTY COMMUNITY COUNCIL, INC.

COVID-19 Employee Health-Screening Form

Employee name: _____

Job title: _____

Employees answering yes to any of the Self-Declaration questions will not be permitted access to Tri-County Community Council, Inc. facilities.

1. Have you traveled to affected geographic area with sustained community transmission or been in close contact with anyone who has traveled to those areas within the last 10 days?
2. Have you had close contact with or cared for someone diagnosed with COVID-19 within the last 10 days? (Close contact is within 6 feet of someone for 15 minutes or more)
3. Have you experienced any cold or flu-like symptoms in the last 10 days (fever, cough, shortness of breath or other respiratory problem)?

Month	Self-Declaration Questions (Check if NO to All)	Temperature (Record Daily)	Access Permitted Yes or No
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TRI-COUNTY COMMUNITY COUNCIL, INC.

COVID-19 Employee Health-Screening Form

If an employee’s body temperature is at or above 100.4 degrees Fahrenheit, employee is exhibiting COVID-19 related symptoms, or has been in close contact with COVID-19 positive person, the employee must be sent home immediately and the following completed:

Date the employee was sent home: _____

Reason: _____

Supervisor / Designee making determination): _____

An employee with symptoms sent home can return to work when:

- He or she has had no fever for at least three days without taking medication to reduce fever during that time; AND
- Any respiratory symptoms (cough and shortness of breath) have improved; AND
- At least ten days have passed since symptoms began and/or date of test.

The employee may return to work earlier if:

- A doctor confirms the cause of the employee’s fever or other symptoms is not COVID-19 and provides a written release for the employee to return to work.
- Employee produces a COVID-19 negative test result and symptoms have improved with no fever.

An employee that has been in close contact with a COVID-19 positive person can return to work when:

- At least ten days have passed since exposure with no further contact and no symptoms develop after that date. If quarantine begins at noon on day one, it will end at noon on day ten.
- If symptoms develop, follow the procedures for symptomatic conditions listed above.
- If you live with someone who has COVID-19 and cannot avoid close contact, quarantine for 10 days after the person with COVID-19 meets criteria to end home isolation.

Employee shall provide documentation of test results, doctor’s notes or medical treatment related to COVID-19 illness to substantiate leave.

Date the employee returned to work: _____

Supervisor (or Designee) Signature: _____