Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Completed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ABC Program: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ABC Staff and Individual Served Health Questionnaire**

*This questionnaire must be completed by all ABC staff working at ABC before shift work begins. ABC staff will be required to complete this for each individual served in their cohort/area. Please immediately notify your Supervisor/Coordinator or Program Manager/Program Director or Director of HR/Safety/Facilities or Safety Coordinator if you have any questions or concerns.*

1. Are you feeling sick today?
   1. If yes, please ensure proper placement of your face mask and notify your supervisor.  You will be required to isolate in ABC’s designated isolation space.
   2. If no, continue to next question.
2. Do you currently have any of the following (circle if yes, ex out if no):

* cough
* shortness of breath or difficulty breathing
* fever
* chills
* muscle pain/body aches
* sore throat
* recent loss of taste or smell
* nausea/vomiting/diarrhea
  1. If **YES** to any of the above, please ensure proper placement of your face mask and notify your supervisor. You will be required to isolate in ABC’s designated isolation space.
  2. If no, continue to next question.

1. Have you been in contact with someone that has tested positive or is awaiting test results within the last 14 days?
   1. If **YES**, please ensure proper placement of your face mask and notify your supervisor. You will be required to isolate in ABC’s designated isolation space.
   2. If no, please proceed to work.

End of Shift

1. Did you make it through your full shift today without symptoms?
   1. Yes (skip next question)
   2. No (answer next question)
2. If you answered no to the above question:
   1. What time did you leave work?
   2. What symptoms were you experiencing?
   3. Who did you have contact with during your shift? (Direct contact/close contact is defined as being indoors within 6 feet for 15 minutes or more, or being indoors with someone unmasked, within 6 feet, for more than 5 minutes).