COVID-19 INFORMATION COVID-19 VISITOR SCREENING TOOL¹

For residential addiction treatment services facilities

Overview

If an individual answers **YES** to any of the questions, they **must not** be allowed to enter.

*Individuals with fever, cough, shortness of breath, runny nose, or sore throat, are required to isolate for 10 days per <u>CMOH Order 05-2020.</u>

Use the <u>AHS Online Assessment Tool</u> to determine if testing is recommended and follow information on <u>isolation requirements</u>.

As the COVID-19 pandemic continues to evolve, this screening tool will be updated as required.

Screening Questions

1.	Do you have any new onset (or worsening) of any of the following symptoms:	CIRCLE	ONE			
	• Fever*	YES	NO			
	Cough [*]	YES	NO			
	 Shortness of breath / difficulty breathing[*] 	YES	NO			
	Runny nose [*]	YES	NO			
	Sore throat [*]	YES	NO			
	Chills	YES	NO			
	Painful swallowing	YES	NO			
	Nasal congestion	YES	NO			
	Feeling unwell / fatigued	YES	NO			
	Nausea / vomiting / diarrhea	YES	NO			
	Unexplained loss of appetite	YES	NO			
	Loss of sense of taste or smell	YES	NO			
	Muscle/ joint aches	YES	NO			
	Headache	YES	NO			
	 Conjunctivitis (commonly known as pink eye) 	YES	NO			
2.	Have you travelled outside Canada in the last 14 days?	YES	NO			
3.	Have you had close contact ² with a case ³ of COVID-19 in the last 14 days?	YES	NO			
Ensure you understand <i>Safe Visiting Practices</i> and related site policies (refer to <u>CMOH Order 07-2021 Appendix A</u>)						
Assess your personal risk of unknown exposure based on your last two weeks of activity						

¹Operators are <u>not required</u> to store the completed COVID-19 screening documents from any person who enters. Operators are <u>required</u> to record and store name, contact information and date/time of entry/exit for a minimum of 4 weeks but not longer than 8 weeks.

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²**Face-to-face contact within 2 metres**. A worker in an occupational setting wearing recommended personal protective equipment is not considered to be a close contact.

³COVID cases include those with a positive lab test in the past 10 days, or someone with symptoms who was in close contact with a lab-confirmed COVID case in the 14 days before symptoms started.

COVID-19 INFORMATION COVID-19 STAFF SCREENING TOOL⁴ For residential addiction treatment services facilities

Overview

If an individual answers **YES** to any of the questions, they **must not** be allowed to enter.

*Individuals with fever, cough, shortness of breath, runny nose, or sore throat, are required to isolate for 10 days per <u>CMOH Order 05-2020</u>.

Use the <u>AHS Online Assessment Tool</u> to determine if testing is recommended and follow information on <u>isolation requirements</u>.

As the COVID-19 pandemic continues to evolve, this screening tool will be updated as required.

Screening Questions

1.	Do you have any new onset (or worsening) of any of the following symptoms:	CIRCLE ONE			
	• Fever*	YES	NO		
	Cough*	YES	NO		
	 Shortness of breath / difficulty breathing* 	YES	NO		
	Runny nose*	YES	NO		
	Sore throat*	YES	NO		
	Chills	YES	NO		
	Painful swallowing	YES	NO		
	Nasal congestion	YES	NO		
	 Feeling unwell / fatigued 	YES	NO		
	Nausea / vomiting / diarrhea	YES	NO		
	Unexplained loss of appetite	YES	NO		
	Loss of sense of taste or smell	YES	NO		
	Muscle/ joint aches	YES	NO		
	Headache	YES	NO		
	 Conjunctivitis (commonly known as pink eye) 	YES	NO		
2.	Have you travelled outside Canada in the last 14 days?	YES	NO		
3.	Have you had close contact ⁵ with a case ⁶ of COVID-19 in the last 14 days?	YES	NO		
Assess your personal risk of unknown exposure based on your last two weeks of activity					

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⁴Operators are **not required** to store the completed COVID-19 screening documents from any person who enters. Operators are **required** to record and store name, contact information and date/time of entry/exit for a minimum of 4 weeks but not longer than 8 weeks.

⁵**Face-to-face contact within 2 metres**. A worker in an occupational setting wearing recommended personal protective equipment is not considered to be a close contact.

⁶COVID cases include those with a positive lab test in the past 10 days, or someone with symptoms who was in close contact with a lab-confirmed COVID case in the 14 days before symptoms started.

COVID-19 INFORMATION COVID-19 RESIDENT SCREENING TOOL⁷

For residential addiction treatment services facilities

Overview

If a resident answers **YES** to any of the questions, the resident must immediately be given a **procedure/surgical mask, isolated** in their room and should be asked to consent for testing for COVID-19.

*Individuals with fever, cough, shortness of breath, runny nose, or sore throat, are required to isolate for 10 days per <u>CMOH Order 05-2020</u>.

Use the <u>AHS Online Assessment Tool</u> to determine if testing is recommended and follow information on <u>isolation requirements</u>.

As the COVID-19 pandemic continues to evolve, this screening tool will be updated as required.

Screening Questions

1.	Do you have any new onset (or worsening) of any of the following symptoms:		CIRCLE ONE	
	• Fever*	YES	NO	
	Cough*	YES	NO	
	 Shortness of breath / difficulty breathing[*] 	YES	NO	
	Runny nose [*]	YES	NO	
	Sore throat*	YES	NO	
	Loss of sense of taste or smell	YES	NO	
	 Conjunctivitis (commonly known as pink eye) 	YES	NO	
2.	Have you travelled outside Canada in the last 14 days?	YES	NO	
3.	Have you had close contact ⁸ with a case ⁹ of COVID-19 in the last 14 days?	YES	NO	

Albertan

⁷Operators are **not required** to store the completed COVID-19 screening documents from any person who enters. Operators are **required** to record and store name, contact information and date/time of entry/exit for a minimum of 4 weeks but not longer than 8 weeks.

⁸**Face-to-face contact within 2 metres**. A worker in an occupational setting wearing recommended personal protective equipment is not considered to be a close contact.

⁹COVID cases include those with a positive lab test in the past 10 days, or someone with symptoms who was in close contact with a lab-confirmed COVID case in the 14 days before symptoms started.