## Hamilton COVID-19 SELF-SCREENING ASSESSMENT TOOL

All staff reporting to a physical work location (not working from home) will complete this assessment tool. It is recommended that you complete this tool one hour before attending work.

At any point that an employee is tested and advised that they are positive for COVID 19 they must advise Occupational Health at ext. 4726 or <u>covid19occhealth@hamilton.ca</u>

## **RISK ASSESSMENT: SCREENING QUESTIONS**

2.	<ul> <li>Fever and/or chills (Temperature of 37.8 C/100 F or higher)</li> <li>Cough or barking cough (croup) (Not related to asthma, post-infectious reactive airways, COPD, or other known causes or conditions you already have)</li> <li>Shortness of breath (Not related to asthma or other known causes or conditions you already have)</li> <li>Decrease or loss of smell or taste (Not related to seasonal allergies, neurological disorders, or other known causes or conditions you already have)</li> <li><u>Those 18 years or older</u></li> <li>Fatigue. lethargy, malaise and/or myalgias (Unusual tiredness, lack of energy (not related to depression, insomnia, thyroid dysfunction, or other known causes or conditions you already have)</li> <li>"If you received a COVID-19 vaccination in the last 48 hours and are experiencing mild fatigue that only began after vaccination, select "No."</li> <li><u>Those less than 18 years old</u></li> <li>Nausea, vomiting and/or diarrhea (Not related to irritable bowel syndrome, anxiety, menstrual cramps, or other known causes or conditions you already have)</li> </ul>	YES	NO
۷.	In the last 14 days, have you travelled outside of Canada AND been advised to quarantine (as per the federal quarantine requirements)?	TES	NO
3.	Has a doctor, health care provider, or public health unit told you that you should currently be isolating (staying at home)? This can be because of an outbreak or contact tracing	YES	NO
4.	In the last 10 days, have you been identified as a "close contact" of someone who currently has COVID-19? If public health has advised you that you do not need to self-isolate (e.g., you are fully immunized* or have tested positive for COVID-19 in the last 90 days and since been cleared), select "No."	YES	NO
5.	In the last 10 days, have you received a COVID Alert exposure notification on your cell phone? If you are have already gone for a test and got a negative result, select "No." If you are fully immunized or have tested positive for COVID-19 in the last 90 days and since been cleared, select "No."	YES	NO

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(	In the last 10 days, have you tested positive on a rapid antigen test or a home-based self-testing kit? If you have since tested negative on a lab-based PCR test, select "No."	YES	NO
7	Is anyone you live with currently experiencing any new COVID-19 symptoms and/or waiting for test results after experiencing symptoms? If the individual experiencing symptoms received a COVID-19 vaccination in the last 48 hours and is experiencing mild fatigue, muscle aches, and/or joint pain that only began after vaccination, select "No." If you are fully immunized* or have tested positive for COVID-19 in the last 90 days and since been cleared, select "No."	YES	NO

\***Fully immunized** individual is defined as any individual >14 days after receiving their second dose of a two-dose COVID-19 vaccine series or their first dose of a one-dose COVID-19 vaccine series (i.e., Johnson and Johnson).

No to all	<ul> <li>Attend work</li> <li>Practice physical distancing</li> <li>Monitor your health</li> <li>If you begin to feel unwell while at work, you should immediately notify your manager and the Occupational Health Nurse (covid19occhealth@hamilton.ca or (905) 546- 2424 ext. 4726)</li> </ul>
Yes to Question 1 OR 5 OR 6	<ul> <li>Do not attend work onsite, advise your manager that you are ill</li> <li><u>Book a test online</u> in Hamilton or through your <u>local public health unit</u></li> <li>Advise Occupational Health (<u>covid19occhealth@hamilton.ca</u> or (905) 546-2424 ext. 4726) of your test date and time</li> <li>After booking, you must:         <ul> <li>Stay at home unless told to leave by a doctor or nurse</li> <li>Monitor your health</li> <li>Follow any directions provided by your local public health</li> </ul> </li> </ul>
Yes to Question 2 OR 3 OR 4 OR 7	<ul> <li>Do not attend work onsite</li> <li>Contact Occupational Health (<u>covid19occhealth@hamilton.ca</u> or (905) 546-2424 ext. 4726) to determine your return to work date</li> <li>Notify your manager of your return to work date</li> <li>Stay at home for the isolation period unless told to leave by a doctor or nurse</li> <li>Monitor your health</li> <li>Call your local public health and Occupational Health if symptoms develop</li> </ul>