

Screening Tool – Of Staff – All Purposes

Any BABH staff that is providing a face to face visit with a consumer or entering into any BABH facility must complete reporting to the BCHD:

<https://tinyurl.com/bchd-covid19-hcw-forms>.

If the employee answers yes to any screening questions using the BCHD screening tool, the employee must complete the “follow up to positive screening” below.

Employees should complete the screening below daily.

1. In the last 24 hours have you experienced any new onset of the following symptoms?
 - Fever > 100.4 or feeling like you have a fever? ☐ Yes ☐ No
 - New or worsening cough? ☐ Yes ☐ No
 - Shortness of breath/breathing difficulties? ☐ Yes ☐ No
 - Diarrhea without known medical cause? ☐ Yes ☐ No
 - Or two (2) or more of the following:
 - Sore throat ☐ Yes ☐ No
 - Chills ☐ Yes ☐ No
 - Muscle aches ☐ Yes ☐ No
 - Headache ☐ Yes ☐ No
 - Loss of taste or smell ☐ Yes ☐ No
 - Fatigue ☐ Yes ☐ No
 - Runny nose or congestion ☐ Yes ☐ No
 - Nausea or vomiting ☐ Yes ☐ No
2. In the last 14 days, have you been in close contact (face-to-face contact within 6 feet) with someone who has tested positive for COVID-19? ☐ Yes ☐ No
3. In the last 14 days, have you traveled to an area identified as having a significant outbreak*? ☐ Yes ☐ No

Follow up to positive screening:

If **YES** to any of the above screening questions, the employee must be excluded from working in person at the worksite, but may continue to work remotely if remote work is an option. (Per Bay County Emergency Order 2020-3)

- *Significant outbreak areas include: any area/state with a positive test rate higher than 10 per 100,000 residents (i.e. 10% test positivity rate) over a seven day rolling average, as specified by Johns Hopkins University; (b) any country subject to an applicable CDC level 3 Travel Health Notice, with widespread ongoing transmission; and/or other areas of restricted travel identified by MDHHS or BCHD.

