

# COVID-19 screening tool for employees and essential visitors in schools and child care settings

Version 2: September 27, 2021

Date (mm-dd-yyyy) \_\_\_\_\_

## Screening questions

### 1. Are you currently experiencing any of these symptoms?

The symptoms listed here are the symptoms most commonly associated with COVID-19.

If you have these symptoms, you should isolate and seek testing. Please note that rapid antigen testing is not to be used for those with symptoms of COVID-19 or for contacts of known COVID-19 cases.

Anyone who is sick or has any symptoms of illness, including those not listed below, should stay home and seek assessment from their health care provider if needed.

Choose any/all that are new, worsening, and not related to other known causes or conditions you already have.

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<b>Fever and/or chills</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Temperature of 37.8 degrees Celsius/100 degrees Fahrenheit or higher and/or chills.		

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<b>Cough or barking cough (croup)</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Continuous, more than usual, making a whistling noise when breathing (not related to asthma, post-infectious reactive airways, or other known causes or conditions you already have)		

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<b>Shortness of breath</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Out of breath, unable to breathe deeply (not related to asthma or other known causes or conditions you already have)		

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<b>Decrease or loss of taste or smell</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Not related to seasonal allergies, neurological disorders, or other known causes or conditions you already have		

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<b>Tiredness</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Unusual, fatigue, lack of energy (not related to depression, insomnia, thyroid dysfunction, or other known causes or conditions you already have)		

If you received a COVID-19 vaccination in the last 48 hours and are experiencing mild fatigue that only began after vaccination, select "No."

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<b>Muscle aches</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Unexplained, unusual, or long-lasting (not related to sudden injury, fibromyalgia, or other known causes or conditions)		

If you received a COVID-19 vaccination in the last 48 hours and are experiencing mild muscle aches/joint pain that only began after vaccination, select "No."

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**2. Do any of the following apply?**

- You are fully vaccinated against COVID-19 (it has been 14 days or more since your final dose of either a two-dose or a one-dose vaccine series)
- You have tested positive for COVID-19 in the last 90 days (and since been cleared)

If YES, skip questions 3, 4, 5

Personal health information is not collected when you complete this screening tool. The purpose of this question is to provide accurate isolation instructions, which are based on vaccination status and previous infection history.

**3. Is anyone you live with currently experiencing any new COVID-19 symptoms and/or waiting for test results after experiencing symptoms?**  Yes  No

**Children (<18 years old):** fever and/or chills, cough or barking cough, shortness of breath, decrease or loss of taste or smell, nausea, vomiting and/or diarrhea

**Adults: (≥18 years old):** fever and/or chills, cough or barking cough, shortness of breath, decrease or loss of taste or smell, tiredness, muscle aches

If the individual experiencing symptoms received a COVID-19 vaccination in the last 48 hours and is experiencing only mild fatigue, muscle aches, and/or joint pain that only began after vaccination, select "No."

**4. In the last 10 days, have you been identified as a "close contact" of someone who currently has COVID-19?**  Yes  No

If public health has advised you that you do not need to self-isolate, select "No."

**5. In the last 10 days, have you received a COVID Alert exposure notification on your cell phone?**  Yes  No

If you have since tested negative on a lab-based PCR test, select "No."

**6. In the last 14 days, have you travelled outside of Canada and been advised to quarantine as per the federal quarantine requirements?**  Yes  No

**7. Has a doctor, health care provider, or public health unit told you that you should currently be isolating (staying at home)?**  Yes  No

This can be because of an outbreak or contact tracing.

**8. In the last 10 days, have you tested positive on a rapid antigen test or a home-based self-testing kit?**  Yes  No

If you have since tested negative on a lab-based PCR test, select "No."

## Results of screening questions

**!** If you answered "YES" to any of the symptoms included under question 1, do not go to school or child care.

- You must isolate (stay home) and should not leave except to get tested or for a medical emergency.
- Talk with a doctor/health care provider to get advice or an assessment, including if you need a COVID-19 test.
  - Other people in your household must stay at home until you test negative, or are cleared by your public health unit, or are diagnosed with another illness. Household members who are fully immunized or previously positive for COVID-19 in the last 90 days and have since been cleared are not required to stay home.
- Contact your school/child care provider to let them know about this result.

**!** If you answered "YES" to question 3, do not go to school or child care.

- You must isolate (stay home) and should not leave except to get tested or for a medical emergency.
- You can return to school or child care after the individual with symptoms tests negative and is cleared by your local public health unit, or is diagnosed with another illness.
- Contact your school/child care provider to let them know about this result.



**If you answered “YES” to question 4, do not go to school or child care.**

- You must isolate (stay home) for 10 days and not leave except to get tested or for a medical emergency.
- Follow the advice of your local public health unit or a health care provider, including which symptoms to monitor for and when to get a COVID-19 PCR test. Please note that rapid antigen testing is not to be used for contacts of known COVID-19 cases.
- You can only return to school/child care after 10 days, even if you get a negative test result, as long as you do not develop any symptoms.
  - Other people in your household can go to school, child care or work, but must not leave the home for other non-essential reasons. Household members who are fully immunized or previously positive for COVID-19 in the last 90 days and have since been cleared are not required to stay home.
- If you develop any of the symptoms listed above or test positive, contact your local public health unit or doctor/health care provider for more advice.
- Contact your school/child care provider to let them know about this result.



**If you answered “YES” to question 5, do not go to school or child care.**

- You must isolate (stay home) and should not leave except to get tested or for a medical emergency.
- Visit an assessment centre to get a COVID-19 test.
  - If you test negative on a PCR test (you do not have the virus), you can return to school/child care.
  - If you test positive on a PCR test (you have the virus), you need to continue isolating and can return only after you are cleared by your local public health unit.
- If you develop symptoms, contact your local public health unit or doctor/health care provider for more advice.
  - Other people in your household can go to school, child care or work, but must not leave the home for other, non-essential reasons until the individual who got the COVID alert tests negative on a PCR test, or is cleared by your local public health unit. Household members who are fully immunized or previously positive for COVID-19 in the last 90 days and have since been cleared are not required to stay home.
- Contact your school/child care provider to let them know about this result.





**If you answered “YES” to question 6, do not go to school or child care.**

- You must isolate (stay home) for 14 days and not leave except to get tested or for a medical emergency.
- Follow the advice of public health. You can return to school/child care after you have completed your federal quarantine requirement.
- If you develop symptoms and/or test positive, contact your local public health unit or doctor/health care provider for more advice.
- Contact your school/child care provider to let them know about this result.



**If you answered “YES” to question 7, do not go to school or child care.**

- You must isolate (stay home) and should not leave except to get tested or for a medical emergency.
- Follow the advice of public health. You can return to school/child care after you are cleared by your local public health unit.
- If you develop symptoms, contact your local public health unit or doctor/health care provider for more advice.
  - Other people in your household must stay at home until you test negative, or are cleared by your public health unit. Household members who are fully immunized or previously positive for COVID-19 in the last 90 days and have since been cleared are not required to stay home.
- Contact your school/child care provider to let them know about this result.

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**If you answered “YES” to question 8, do not go to school or child care.**
  - You must isolate (stay home) and should not leave except to get tested or for a medical emergency.
  - Visit an assessment centre to get a COVID-19 test.
    - If you test negative on a PCR test (you do not have the virus), you can return to school/child care.
    - If you test positive on a PCR test (you have the virus), you need to continue isolating and can return only after you are cleared by your local public health unit.
  - If you develop symptoms, contact your local public health unit or doctor/health care provider for more advice.
  - Other people in your household must isolate until you test negative on a PCR test or are cleared by your local public health unit. Household members who are fully immunized or previously positive for COVID-19 in the last 90 days and have since been cleared are not required to isolate.
  - Contact your school/child care provider to let them know about this result
  
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**If you answered “NO” to all questions, you may go to school/child care. Follow your school/child care provider’s established process for letting them know about this result.**
  - As per regular protocols, all sick individuals with any symptoms of illness should stay home and seek assessment from their regular health care provider if required.
  - Individuals with severe symptoms requiring emergency care should go to their nearest emergency department.
  - If an individual develops symptoms outside of the list above, the Public Health Unit may recommend other measures including testing based on an assessment of the individual's symptoms and exposure history.

**Note: post immunization symptoms**

- If you have received a COVID-19 vaccination in the last 48 hours and have mild fatigue, muscle aches and/or joint pain that only began after immunization, and no other symptoms, you are to wear a surgical/procedure mask for your entire time at work (indoors and outdoors).
- Your mask may only be removed to consume food or drink and you must remain at least two metres away from others when your mask has been removed. If the symptoms worsen, continue past 48 hours, or if you develop other symptoms, you should leave work immediately to self-isolate and seek COVID-19 testing.

**Public Health Ontario – Contact Tracing**

**Answering these questions is optional.** This information will only be used by Public Health officials for contact tracing. All information will be deleted in 28 days.

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Phone or Email: \_\_\_\_\_