

THE WATERS

Screening for Essential Health and Medical Providers – COVID-19

The Waters is restricting visitors to those who provide health-related, medical-related, or business essential functions. At the Waters, our first priority is the safety, health, and wellbeing of our Residents and Team Members. In light of the public health concerns related to the Coronavirus, we are asking that you help us remain socially responsible in order to minimize risk to our Residents and Team Members. The CDC has put out guidance to limit visitors to senior living communities.

Is your visit related to assisting a Resident or Team Member with health-related or medical care, and/or is your visit related to business essential functions?

- YES (Please fill have your temperature checked and proceed to Next Steps)
- NO (If NO, we ask that you return for a visit at a later date, when visitor restrictions are lifted)

Community Name: _____

Date: _____

Your name: _____

Next Steps:

- Complete the screening form below
- Participate in a temperature check. Record Temperature here: _____
- Sanitize your hands
- Talk with a Waters Team Member following completion of the screen **and before** you visit a Resident or Team Member
- Screening forms are kept on file in a confidential location

1. Are you experiencing any of the following?

	Yes	No	Onset Date
Colds/flu?			
Fever? (>100.4F)			
Chills?			
Cough?			
Shortness of Breath?			
Sore Throat?			

2. In the last 14 days, have you had exposure (that you are aware of) to a person(s) with a confirmed case of COVID-19, under suspicion for COVID-19, or has had respiratory illness?

- a. YES**
- b. NO**

If you answered **YES**, please be specific: _____

THE WATERS

3. Have you traveled within the last 14 days to any of the following locations where confirmed ‘sustained community transmission’ is occurring? (CDC)

	<i>Yes</i>	<i>No</i>
US: California, Washington, New York, Colorado		
China, Egypt, South Korea, Iran, Italy, South Korea, Japan, Europe		

If yes, what country or state (s)? _____

NEXT STEPS: NO SYMPTOMS (Internal Use)

- ✓ If Visitor is free of symptoms, temperature check completed, and answers NO to questions 1-3, make sure Visitor has connected with ED or designee to discuss specifics of the visit
- ✓ As long as Visitor makes subsequent visits, and responses to 1-3 remain NO, then Visitor can use same tracking form (see below)

NEXT STEPS: SYMPTOMS or SUSPECT EXPOSURE

- ✓ If Visitor answered YES to 2 or more symptoms on question 1, or has a fever greater than 100.4, please request that Visitor leaves the premises for the safety and wellbeing of Residents and Team Members
- ✓ If Visitor answered YES to questions 2 or 3, please request Visitor leaves the premises for the safety and wellbeing of the Residents and Team Members

Daily Tracker for Visitors who are Symptom Free and Answer “No” for Questions 2-3 (Reminder, this is only for Visitors here for health, medical, or business essential functions):

<i>DATE</i>	<i>TEMP CHECK</i>	<i>SYMPTOM FREE AND NO CHANGES TO QUESTIONS 2,3 (INITIAL HERE)</i>	<i>DATE</i>	<i>TEMP CHECK</i>	<i>SYMPTOM FREE AND NO CHANGES TO QUESTIONS 2,3 (INITIAL HERE)</i>

Should any of the answers to questions 1-3 change, please contact Health and Wellbeing or Executive Director.