



DAILY HEALTH SCREENING

To be completed by staff, members, visitors, contractors daily upon arrival at any YMCA of Owen Sound Grey Bruce facility.

Individual being screened: _____ Date: _____

Organization (i.e. contractor business name, school name) _____

Screeener Name: _____

1.	Do you or anyone in your household, including your child(ren), spouse or any other individuals residing with you, have any of the below symptoms:	Circle One
	-Fever (or signs of a fever, such as chills, sweats, muscle aches, and lightheadedness); or	Yes / No
	-new onset of cough or difficulty breathing;	Yes / No
2.	Do you or anyone in your household, including your child(ren), spouse or any other individuals residing with you, have new or worsening of the below symptoms:	
	-Fatigue/sluggishness; or	Yes / No
	-Headache (in absence of underlying reason e.g weather related); OR	Yes / No
	-Sore throat; or	Yes / No
	-Runny nose (in absence of underlying reason e.g allergies); OR	Yes / No
	-Stuffy or congested nose (in absence of underlying reason e.g allergies);	Yes / No
	-Hoarse voice;	Yes / No
	-Unexplained loss of appetite;	Yes / No
	-Digestive issues (diarrhea, nausea/vomiting, stomach pain in the absence of underlying reason);	Yes / No
	-Loss of sense of smell or taste;	Yes / No
	-Small red or purples spots on your hand and/or feet	Yes / No
3.	Have you travelled outside of Canada or had close contact with anyone that has travelled outside of Canada in the past 14 days?	Yes / No
4.	Have you had close contact with anyone with respiratory illness or a confirmed or probable case of COVID-19 in the past 14 days?	Yes / No
<u>If the answer is YES to ONE or more of these screening questions the individual is not permitted to access YMCA of Owen Sound Grey Bruce facilities.</u>		
5.	Do you consent to having your temperature taken?	Yes / No

If the individual's temperature reading is above 37.5°C (99.5°F) the individual is not permitted to access YMCA of Owen Sound Grey Bruce facilities. Inform the individual that they are not permitted to enter the YMCA facility and are to contact 811 HealthLine for further instructions.

FOR STAFF: After speaking with HealthLine, the employee is responsible for contacting their immediate supervisor right away for further instruction on next steps.