**Community Living Services, Inc., in accordance with Wayne County Department of Public Health Order 20-02 and the State of Michigan, Governor Whitmer’s Executive Order, 2020-96, Stay Home, Stay Safe, is required to daily screen employees entering the building to prevent the spread of the Coronavirus (“COVID-19”).**

***Effective immediately and until further notice, please answer the following questions prior to entering the CLS Wayne office building:***

1. What is your Name?
2. What date did you complete this screening?     /     /     ***Must be completed on the day of entry prior to entering the building.***
3. What date are you entering the building?     /     /
4. **Do you have** a cough, shortness of breath or other respiratory symptoms that you cannot attribute to allergies, asthma, or other known medical condition that is unrelated to COVID-19?

 Yes [ ]  No [ ]

1. **Do you have** a fever, sore throat, diarrhea, chills, repeated shaking with chills, headache, or new loss of taste or smell?

 Yes [ ]  No [ ]

1. **Do you have** new muscle aches (myalgias) that you cannot attribute to another health condition, or a specific activity (such as physical exercise)? Yes [ ]  No [ ]
2. **Does anyone in your household** have symptoms of COVID-19 including fever, cough, sore throat, shortness of breath, diarrhea, chills, repeated shaking with chills, headache, muscle pain not attributable to another health condition, or new loss of taste or smell?

 Yes [ ]  No [ ]

1. **Have you or anyone in your household** traveled via airplane internationally or domestically in the last 14 days?

 Yes [ ]  No [ ]

1. **Have you or anyone** **in your household** been in close contact with others who have symptoms, are being assessed/monitored for, or diagnosed with COVID-19 in the past 14 days?

 Yes [ ]  No [ ]

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| --- | --- |
| If you answered **NO** to **ALL** of these questions,**Proceed****Proceed** | **On the day you are scheduled to work in the office** ***AND prior to entering the building***, complete this COVID- 19 Screening. Non-essential employees must submit this form to Marge Werabelski via email prior to entry. Essential employees required to work onsite must submit this form to the worksite supervisor prior to proceeding through the building. You may proceed with entering the building through the rear alarm door off Elizabeth St. Upon entry, you must sign in and out on the attendance log found on the table near the alarm box. Please be sure to sanitize your hands before and after signing in and out on the attendance log. Purell or other equivalent hand sanitizers will be available at building entrance and throughout the building. While working in the office, remember to continue to observe CDC guidelines including wearing a mask or face covering while in common areas of the building, social distancing (stay 6 feet away from others), washing and/or sanitizing hands frequently and following good health hygiene practices. CLS will provide you with a mask, however, we ask you to consider using your own, reusable cloth masks or face coverings that may be washed after each use. This will help ensure that we have an adequate supply of disposable masks to meet critical needs |
|  **If you answered YES to ANY of these questions,****Proceed****Proceed** | **If you answer YES to any of the questions, please email this form with your responses to** JOANNE NICHOLSON, SR. DIRECTOR OF HUMAN RESOURCES and MARY PIERRARD, HUMAN RESOURCES GENERALIST**. Do *NOT enter the* *building the building. HR will notify your supervisor that you are unable to enter the building*. If you are an essential employee doing onsite screening, i*nform the worksite supervisor that you are unable to proceed through building and submit this form to the worksite supervisor.*** The worksite supervisor will send your completed form to HR. **If you are feeling sick please take precautions and call your health care provider immediately.** |

COVID SCREENING -F- 6/2/2020 - Replaces Previous Versions