

# Staff and Visitor Screening Tool for Residential Aged Care Facilities

To be completed by **everyone** entering this facility, every time (except for repeat entries on the same day and people entering for emergency or law enforcement reasons).

Staff Visitor Other 

Name: .....

Phone: ..... Temperature on arrival: (*Optional*) .....

	Yes	No	If yes
1. Do you have <i>any</i> of the following symptoms: <ul style="list-style-type: none"> <li>• fever (high temperature, or chills, night sweats)</li> <li>• a cough</li> <li>• sore throat</li> <li>• runny nose</li> <li>• loss of taste or smell</li> <li>• unexplained shortness of breath?</li> </ul>			<b>You cannot visit.</b> If you have not had a throat/nasal swab for COVID-19 since getting these symptoms, book a test (phone 1800 671 738). Stay at home except to get tested, until you get the result. Do not visit until you have the result and your symptoms have stopped.
2. In the last 14 days, have you had contact with someone known or suspected to have COVID-19, (except through your work, while wearing appropriate personal protective equipment)?			<b>Go home.</b> If Public Health has not contacted you about being a contact of someone with COVID-19, phone 1800 671 738.
3. In the last 14 days, have you been outside Tasmania at any areas or premises declared high or medium risk for COVID-19? The list changes frequently. Check <a href="http://www.coronavirus.tas.gov.au/travellers-and-visitors/coming-to-Tasmania">www.coronavirus.tas.gov.au/travellers-and-visitors/coming-to-Tasmania</a> or phone 1800 671 738.			<b>Go home,</b> unless you have written exemption from the Director of Public Health or their delegate, to enter the facility, in addition to your G2G Pass and any exemption you received to leave quarantine.
4. Have you been instructed by Public Health to be in quarantine or isolation at this time?			
5. Has everyone in your group used the Check-in Tas app (or similar) or provided their contact details for this visit?			<b>If no,</b> do this now. Ask for help if you need it.

I declare the information I have provided is accurate and correct to the best of my knowledge.

Signature: \_\_\_\_\_

Date: / / 2021