



[CAC'S NAME] Health Screening Protocol Effective [DATE]

[CAC'S NAME] will implement the following health screening protocol effective immediately.

Phone

When scheduling and confirming appointments via phone, the [CAC'S NAME] team member will ask the caregiver the following questions:

1. Has your child or anyone who will accompany your child to [CAC'S NAME] traveled outside of the United States within the last 14 days?
2. Has your child or anyone who will accompany your child to [CAC'S NAME] had contact with anyone with a suspected case of coronavirus (COVID-19) within the last 14 days, or with anyone with known coronavirus (COVID-19)?
3. Has your child or anyone who will accompany your child to [CAC'S NAME] have any symptoms of a respiratory infection (e.g., cough, sore throat, fever, or shortness of breath)?
4. Has your child or anyone who will accompany your child to [CAC'S NAME] is taking any medications to treat flu-like symptoms?

If the individual answers "yes" to questions 1. or 2., the [CAC'S NAME] team member will inform the caregiver that they will call back with more information about scheduling. The [CAC'S NAME] team member will then immediately inform their supervisor who will determine how to proceed.

If the individual answers "yes" to questions 3. or 4., the [CAC'S NAME] team member will inform the caregiver that they must reschedule for at least 14 days later. The [CAC'S NAME] team member will then immediately inform their supervisor who will determine how to proceed.

In-Person

[CAC'S NAME] has a sign on its entrance that indicates a person should not enter the facility if they have certain health symptoms and inform the first [CAC'S NAME] team member they encounter if they are taking certain medication (which might mask symptoms). Not everyone may read this sign, and because of that we are implementing additional screening measures.

When EVERY caregiver enters the building, the greeting [CAC'S NAME] team member will ask the caregiver the following questions (the same as above):

1. Has your child or anyone who will accompany your child to [CAC'S NAME] traveled outside of the United States within the last 14 days?
2. Has your child or anyone who will accompany your child to [CAC'S NAME] had contact with anyone with a suspected case of coronavirus (COVID-19) within the last 14 days, or with anyone with known coronavirus (COVID-19)?
3. Has your child or anyone who will accompany your child to [CAC'S NAME] have any symptoms of a respiratory infection (e.g., cough, sore throat, fever, or shortness of breath)?
4. Has your child or anyone who will accompany your child to [CAC'S NAME] child taking any medications to treat flu-like symptoms?

If the individual answers "yes" to any of these questions, the [CAC'S NAME] team member will inform the caregiver that they must reschedule for at least 14 days later and that the [CAC'S NAME] team member will call them to reschedule. If the caregiver refuses to leave, the [CAC'S NAME] team member will then immediately inform their supervisor, who will decide on how to proceed with rescheduling, either in-person or by phone at a later time.