

#### NORTH SOUND BEHAVIORAL HEALTH ADMINISTRATIVE SERVICES ORGANIZATION

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# North Sound BH-ASO Employee and Visitor COVID-19 Self-Screening Checklist

The safety of our employees and visitors are our primary concern. As the coronavirus (COVID-19) outbreak continues to evolve and spread globally, North Sound BH-ASO is monitoring the situation closely and will periodically update company guidance on current recommendations from the Center for Disease Control and the World Health Organization. To help prevent the spread of COVID-19 and reduce the potential risk of exposure to our employees and visitors we are conducting a simple screening questionnaire. Your participation is important to help us take precautionary measures to protect you and everyone in the building. *Thank you for your time and cooperation*.

Employee/Visitor Name:	
Phone Number:	
Company/Organization: (if you are not	
a North Sound BH-ASO employee)	

### If the answer is yes to one or more of the following questions, do not visit the North sound BH-ASO office.

#### Self-Declaration by Employee/Visitor

Have you had close contact with or cared for anyone diagnosed with COVID-19 within the last 14 days?	Yes	No
Are you showing any signs of one or more of the following symptoms or have you been exposed to anyone showing these signs: • temperature 100.4 °F or higher* • cough • shortness of breath or difficulty breathing • extreme tiredness • Muscle or body aches • Headache • New loss of taste of smell • Sore throat • Congestion or runny nose • Nausea, vomiting, diarrhea	Yes	No

\*take your temperature immediately before completing this form

Signed:

Date:

Typing your signature indicates you have electronically signed this document.

Click to automatically email form to North Sound BH-ASO HR or email directly to: hr@nsbhaso.org

## SUBMIT FORM