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**COVID-19: Screening Checklist for Contractors**

Due to the coronavirus (COVID-19) pandemic, all visitors and contractors are required to complete this screening checklist. This is to help prevent the spread of COVID-19 and protect our staff and pupils. You must answer all questions.

*N.B This should be attached to the school Contractors Sign IN/OUT Form*

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| **HAND WASHING** | | | | |
| Have you washed your hands or used hand sanitiser on entry? (Tick)  (THIS IS MANDATORY) | **Y** | | **N** | |
|  | |  | |
| **SYMPTOMS** | | | | |
| Have you or anyone in your household had any of the following symptoms? (Tick)  1)A high temperature - this means you feel hot to touch on your chest or back  2) a new, continuous cough - this means coughing a lot for more than an hour, or 3 or more coughing episodes in 24 hours (if you usually have a cough, it may be worse than usual) | | **Y** | | **N** |
|  | |  |
|  | |  |

**If YES to any, restrict from entering the building.**

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| **CONTACT WITH CASES** | | |
| Have you worked in facilities or locations with confirmed COVID-19 cases? | **Y** | **N** |
|  |  |

**If YES, restrict from entering the building.**

**If NO, grant access to building and direct to signature below**

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| **SOCIAL DISTANCING** |
| **ALL CONTACTORS MUST FOLLOW THE BELOW RULES WHERE POSSIBLE**  **Maintain a 2-metre distance when talking to site contacts**  **Wash hands and/or apply hand sanitiser REGULARLY** |

|  |  |
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| **DECLARATION: I confirm the above is true to the best of my knowledge** | |
| **Date:** |  |
| **Time:** |  |
| **Signature** |  |