

Ministry of Health

# COVID-19 Screening Tool for Long-Term Care Homes and Retirement Homes

Version 2 - April 24, 2020

This tool provides basic information only and contains recommendations for COVID-19 screening. It is not intended to take the place of medical advice, diagnosis or treatment. Where the document includes references to legal requirements, it is not to be construed as legal advice.

At a minimum, the following questions should be used to screen individuals for COVID-19 and can be adapted based on need and the specific setting. In order to ensure a safe and secure environment for vulnerable individuals, only staff (e.g., employees, volunteers, agency staff) and essential visitors (see definition below) should be permitted entry into the long-term care home (LTCH) or retirement home (RH).

LTCHs/RHs must immediately implement active screening of all staff, essential visitors and anyone else entering the home for COVID-19. Screening must occur twice daily and include symptom screening and temperature checks (i.e., at the beginning and end of the day/shift for staff and when essential visitors enter and leave the home).

Anyone who does not pass the screening should not be allowed to enter the LTCH/RH. Staff responsible for occupational health at the LTCH/RH must follow up on all staff (i.e., phone calls, further screening, etc.) who have been advised to self-isolate based on exposure risk.

Once an individual has passed the screening questions below and is able to enter the home, they should use hand sanitizer and be provided with a mask and the appropriate personal protective equipment (PPE). They also should be advised to self-monitor while in the home and report any symptoms immediately and remind them that they will need to be re-screened a second time when leaving the LTCH/RH or at the end of the day/shift.

**In emergency situations, emergency first responders should be permitted entry without screening (refer to Directive #3).**

## Essential Visitors

Essential visitors include a person:

- performing essential support services (e.g., food delivery, phlebotomy testing, maintenance, family providing care and other health care services required to maintain good health); or
- visiting a very ill or palliative resident.

## Screening Questions

1. Do you have a fever? (take temperature; fever is a temperature of 37.8 °C or greater)  
 Yes  No
  
2. Do you have any of the following symptoms or signs?

New or worsening cough	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Shortness of breath	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Sore throat	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Runny nose or sneezing	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Nasal congestion	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Hoarse voice	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Difficulty swallowing	<input type="checkbox"/> Yes	<input type="checkbox"/> No
New smell or taste disorder(s)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Nausea/vomiting, diarrhea, abdominal pain	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Unexplained fatigue/malaise	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Chills	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Headache	<input type="checkbox"/> Yes	<input type="checkbox"/> No
  
3. Have you travelled or had close contact with anyone that has travelled in the past 14 days?  
 Yes  No
  
4. Have you had close contact with anyone with respiratory illness or a confirmed or probable case of COVID-19?  
 Yes – go to question 5  No – screening complete
  
5. Did you wear the required and/or recommended PPE according to the type of duties you were performing (e.g., goggles, gloves, mask and gown or N95 with aerosol generating medical procedures (AGMPs)) when you had close contact with a suspected or confirmed case of COVID-19?  
 Yes  No

## Results of Screening Questions:

- If the individual answers **NO to all questions from 1 through 4**, they have passed and can enter the home. They should be told to self-monitor for symptoms and be reminded about required re-screening at the end of their day/shift or when they leave the home.
- If the individual answers **YES to any question from 1 through 3**, they have not passed and **cannot** enter the home. They should go home to self-isolate immediately. Staff should contact their manager/immediate supervisor. Essential visitors should be told to contact a primary care provider, local public health unit or Telehealth to discuss their symptoms and/or exposure and seek testing.
- If the individual answers **YES to question 4 and YES to question 5**, they have passed and can enter the home. They should be told to self-monitor for symptoms and be reminded about required re-screening at the end of their day/shift or when they leave the home.
- If the individual answers **YES to question 4 and NO to question 5**, they have not passed and **cannot** enter the home. They should go home to self-isolate immediately. Staff should contact their manager/immediate supervisor. Essential visitors should be told to contact a primary care provider, local public health unit or Telehealth to discuss their symptoms and/or exposure and seek testing.

### Note:

- As per Directive #3 staff of LTCHs and RHs are not able to work in multiple locations and should be screen appropriately.