



## INFLUENZA-LIKE INFECTION (ILI) STAFF/VISITOR ASSESSMENT FORM

It is Brantwood's duty to protect the health of individuals supported, employees and anyone else who visits Brantwood Group Homes or the Centre. Leading up to and during a pandemic, this means that an employer has the responsibility to take all reasonable steps to ensure that the workplace is free from infection, and to prevent the spread of infection.

An employee's or visitor's fitness to be in the workplace is determined by his or her responses to the questions below. Please ask yourself the following questions:

### **Symptoms:**

- |  |     |    |
|--|-----|----|
| 1. Do you have a fever?                      | Yes | No |
| 2. Do you have a cough?                      | Yes | No |
| 3. Do you have shortness of breath?          | Yes | No |
| 4. Are you experiencing significant fatigue? | Yes | No |
| 5. Do you have a sore throat?                | Yes | No |
| 6. Do you have muscle aches?                 | Yes | No |
| 7. Do you have a lack of appetite?           | Yes | No |
| 8. Are you experiencing chills?              | Yes | No |
| 9. Are you experiencing eye pain?            | Yes | No |

### **If you have flu-like symptoms (Answered 'Yes' to #1 and two or more symptoms, as described above):**

- Leave or do not enter the workplace. Stay home until 24 hours after the fever is gone (without the use of fever reducing medication).
- Contact your health care professionals and explain your symptoms.