



COVID-19 Health Screening

WHEREAS employers are required by section 21 (2) (c) of the *Workers Compensation Act* to establish occupational health and safety policies and programs in accordance with the Occupational Health and Safety Regulation and have been directed by WorkSafeBC to develop a plan to ensure that the risk of transmission of SARS-CoV-2 at workplaces is minimized (hereinafter referred to as the “COVID-19 Safety Plan” for the purposes of this Order), ***all employees and customers MUST be able to answer “No” to all of the following questions:***

1. Do you have any of the following symptoms which are not associated with allergies, chronic or pre-existing conditions: fever, cough, shortness of breath, difficulty breathing, sore throat, and/or runny nose?
2. Have you, or a member of your household, returned to Canada from outside the country (including USA) in the past 14 days?
3. In the past 14 days, have you had close contact with a person who has a probable or confirmed case of COVID-19?
4. In the past 14 days, have you had close contact with a person who had an acute respiratory illness that started within 14 days of their close contact with someone with a probable or confirmed case of COVID-19?
5. In the past 14 days, have you had close contact with a person who has returned from travel outside of Canada within 14 days of you having contact with that person?
6. In the past 14 days, have you had laboratory exposure to biological material known to contain coronavirus?

If you answer “Yes” to any of the questions above, you are not permitted to attend any of the premises of Cowichan Canine.