ATTACHMENT A-1: Personnel Screening Form
(November 2, 2020)

Any business or entity that is allowed to operate in San Francisco during the COVID-19 pandemic MUST screen Personnel with the questions below on a daily basis as part of its Social Distancing Protocol compliance and provide this information to Personnel. Go to www.sfcdcp.org/screen for more information or a copy of this form. Do not use this form to screen customers, visitors, or guests. The screening form for Non-Personnel is available at www.sfcdcp.org/screen. Health Officer orders or directives may provide additional screening requirements.

PART 1 – You must answer the following questions before starting your work every day that you work.
You may be required to provide the answers in person or via phone or other electronic means to the Business before the start of each shift. If any answers change while you are at work, notify the Business by phone and leave the workplace.

1. In the last 10 days, have you been diagnosed with COVID-19 or had a test confirming you have the virus?

2. In the past 14 days, have you had “Close Contact” with someone who was diagnosed with COVID-19 or had a test confirming they have the virus while they were contagious?‡
   ‡ “Close Contact” means you had any of the following types of contact with the person with COVID-19 (regardless of whether you or the person with COVID-19 were masked) while they were contagious‡:
   • Were within 6 feet of them for a total of 15 minutes or more in a 24 hour period
   • Lived or stayed overnight with them
   • Were their intimate sex partner, including only kissing
   • Took care of them or they took care of you
   • Had direct contact with their body fluids or secretions (e.g., they coughed or sneezed on you or you shared eating or drinking utensils with them)

3. In the past 24 hours, including today, have you had one or more of these symptoms that is new or not explained by another condition?
   • Fever (100.4°F/38.0°C or greater), chills, repeated shaking/shivering
   • Cough
   • Sore throat
   • Shortness of breath, difficulty breathing
   • Feeling unusually weak or fatigued
   • Loss of taste or smell
   • Muscle or body aches
   • Headache
   • Runny or congested nose
   • Diarrhea
   • Nausea or vomiting

If you answer “YES” to ANY of these 3 questions, do not enter any business or facility and follow the steps listed in Part 2 below.

PART 2 –

• If you answered YES to Question 1 or Question 2. DO NOT GO TO WORK. And:
  o Follow Isolation/Quarantine Steps at: www.sfcdcp.org/Home-Isolation-Quarantine-Guidelines
    You MUST follow these isolation/quarantine rules, as mandated by the Health Directive No 2020-03c/02c.
  o Do not return to work until the Isolation or Quarantine Steps tell you it is safe to return!

• If you answered YES to Question 3: You may have COVID-19 and must be tested for the virus before returning to work. Without a test, the Business must treat you as being positive for COVID-19 and require you to stay out of work for at least 10 calendar days. To return to work sooner and protect others, follow these steps:
  1. GET TESTED! If you have insurance, contact your healthcare provider to get tested for COVID-19. If you do not have insurance, you can sign up for free testing at CityTestSF (https://sf.gov/citytestsf). If you live outside the City, check with the county where you live, get tested by your usual healthcare provider, or use CityTestSF.
  2. Wait for your results at home and follow the instructions at www.sfcdcp.org/Home-Isolation-Quarantine-Guidelines to determine next steps. Only return to work when those guidelines say it is safe.

Your health on the job is important! To report a violation of San Francisco COVID-19 health orders and directives (www.sfdph.org/healthorders), including requirements to screen and exclude sick personnel from work as well as social distancing and facial covering requirements, call: 311 or 415-701-2311 (English) or 415-701-2322 (Español,中文,TTY). You can request for your identity to remain confidential.