Maryland
DEPARTMENT OF
JUVENILE SERVICES

Facility Entry Screening Questionnaire for Staff & Visitors

Any person wanting entry to this building must answer the following questions.
For DJS Residential Facilities, no visitors are currently allowed, and all employees, vendors, or contractors on official business must also submit to a temperature check in order to gain entry.
Staff conducting the screening and temperature checks on others shall wear personal protective equipment.

Check off *Yes* or *No* for the questions below:

QUESTIONS	Yes	No
1. Have you had a fever in the past 7 days? (Fever may be subjective or temperature 100 degrees or above)	❑	❑
2. Have you had any of the following <u>new or worsening</u> symptoms <u>in the past 7 days</u>: **❑chills, ❑cough, ❑shortness of breath, ❑sore throat, ❑vomiting, ❑diarrhea, ❑loss of taste or smell, or ❑other flu-like symptoms?**	❑	❑
3. Do you feel ill now?	❑	❑
4. Have you been outside of Maryland in the past 14 days? (This does not include travel for work over the border to Maryland from home in a neighboring jurisdiction) If yes, where? _____ *(If yes, consult with Ms. Jackson or Dr. Maehr)	❑	❑
5. Have you been diagnosed with Coronavirus (COVID-19) in the past 14 days or the flu (influenza) in the past 5 days?	❑	❑
6. In the past 14 days, have you had physical contact with or been in close proximity (within 6 feet for more than 2-3 minutes) to someone with suspected or confirmed COVID-19 without the use of personal protective equipment?	❑	❑
FOR DJS RESIDENTIAL FACILITIES: Check individual's temperature 7. **Is temperature 100 degrees or above?** Record temperature check here: _____ Temperature done by: ❑Forehead scanner ❑Oral/Mouth thermometer ❑Ear thermometer	❑	❑

If the answer to <u>any</u> of the above questions is yes OR the individual refuses to complete the screening process, then the person may not enter the building.

*For questions, clarifications, or exceptions, call Keva Jackson (DJS Health Administrator) at 410-230-3256, Dr. Jennifer Maehr (DJS Medical Director) at 410-262-0623, or Laura White (DJS Acting Director of Nursing) at 240-675-4208 and notify the Superintendent or designee for denied access.

Name of Individual Seeking Access (Print):_____

Access Determination: ❑Approved ❑Denied

Document if further consultation obtained in determination:

Name of Staff performing the screening (Print): _____

Date:_____ **Time:**_____ **Facility:**_____

Rev 4/7/20