Instructions: Employees of the Zeeland Board of Public Works are encouraged to perform this Voluntary Health Questionnaire on a daily basis prior to reporting to the workplace. Performance of this questionnaire is voluntary and is being recommended for use to help mitigate the spread of the COVID-19 virus. This document is to be used as a guide for self-evaluation and not submitted. No official record of this information is to be retained by the City of Zeeland or the Zeeland Board of Public Works.

We encourage employees to inform their direct supervisor if an affirmative (yes) response is necessary and/or a temperature reading is indicated in excess of 100.4°F (37°C). This information will remain confidential, but will be shared with the General Manager and, on a need-to-know basis only, any potentially affected employees.

The Zeeland Board of Public Works will provide non-contact thermometers for employee use which will be strategically located throughout the workplace. Employees are also encouraged to answer the Voluntary Health Questionnaire questions and self-perform temperature checks at home.

1. Have you traveled to a country for which the Center for Disease Control (CDC) has issued a Level 2 or Level 3 travel designation within the last 14 days? Level 2 means the destination is practicing enhanced precautions. Level 3 means the destination is avoiding non-essential travel.
   
   Yes ________  No ________

2. Have you had contact with any Persons Under Investigation (PUI) for COVID-19 within the last 14 days, or with anyone known to have COVID-19?

   Yes ________  No ________

3. Do you have any of the following symptoms?

   Cough
   Yes ________  No ________

   Sore Throat
   Yes ________  No ________

   Shortness of Breath
   Yes ________  No ________

   Fever
   Yes ________  No ________

4. What is your temperature now? ________________ (°F)

   (Take temperature using temporal or non-contact thermometer. Wipe thermometer down before and after use with disinfecting wipes.)

If the answer to question 1 is “yes”, it is requested that you not enter the workplace for 14 days.

If the answer to question 2 is “yes”, you may enter the workplace. However, continued self-monitoring for the symptoms of cough, sore throat, and/or shortness of breath, along with more frequent temperature checking is strongly recommended.

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1 A PUI is a person who has been contacted by the Ottawa County Health Department
If the answer to question 3 is “yes” for cough, sore throat, and/or shortness of breath, and you believe this is due to allergies, you may enter the workplace.

If the answer to question 3 is “yes” for cough, sore throat, and/or shortness of breath, and the conditions are a new illness, it is requested that you not enter the workplace and consult your primary care physician or other medical professional.

If your temperature in question 4 is in excess of 100.4°F (37°C), it is requested that you not enter the workplace until you have been fever-free for at least 24 hours without the use of fever-reducing medicine.