

The most important thing businesses can do to help decrease the spread of COVID-19 is to adhere to social distancing and disinfecting guidelines.

Social Distancing & Work Practices

- Maintain six (6') feet or more between employee work stations, unless separated by a wall or partition.
- The number of employees in a common area (break or lunch room) should be limited to ensure a minimum of six (6') feet between employees.
- Offer work from home options, as much as possible.
- Stagger shifts, breaks, and lunch schedules.
- Conduct phone/email/virtual meetings instead of in person meetings, even when at office. If meeting in person, ensure six (6') feet of distance between employees.
- Discourage nonessential vendors and deliveries from entering facility.
- Discourage nonessential travel of employees.
- Post internal signage that can be used to alert or remind employees about guidance and expectations.

Cleanliness

- Pre-screen employees before their shift.
- Offer plenty of hand sanitizer in various locations and encourage usage.
- Keep restrooms stocked with soap and/or hand sanitizer.
- Routinely clean and disinfect restrooms daily or more if possible. You may want to increase cleaning of high-touched surfaces such as faucets, toilets, doorknobs, and light switches.
- Provide wipes, sanitizer, and cleaning products throughout workplaces to allow for frequent sanitation of frequently touched surfaces.

COVID-19 EMPLOYEE ENTRY SCREENING QUESTIONNAIRE

In order to be allowed to work, the following questions should be asked of an employee prior to their entry into the facilities. If the employee answers that they exhibit symptoms or are at risk of exposure due to travel or proximity to an infected person, they should be denied entry. For your protection it is suggested that you retain this form, should an employee begin to show symptoms.

SYMPTOM & RISK CHECKLIST

- | YES | NO | |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | Do you have or have you had a fever of over 100.4 in the last 72 hours? |
| <input type="checkbox"/> | <input type="checkbox"/> | Do you have a cough that is not normal for you? |
| <input type="checkbox"/> | <input type="checkbox"/> | Are you experiencing shortness of breath or difficulty breathing? |
| <input type="checkbox"/> | <input type="checkbox"/> | Are you experiencing body aches or chills? |
| <input type="checkbox"/> | <input type="checkbox"/> | Do you have a sore throat? |
| <input type="checkbox"/> | <input type="checkbox"/> | Are you experiencing a loss of smell? |
| <input type="checkbox"/> | <input type="checkbox"/> | Have you traveled outside of Central Missouri in the last two weeks? |
| <input type="checkbox"/> | <input type="checkbox"/> | Have you been exposed to someone diagnosed with COVID-19 in the last two weeks? |

EMPLOYEE NAME AND DATE

EMPLOYEE SIGNATURE

Entry will be denied to any individual who refuses to complete the questionnaire in its entirety, any individual who is positive for any three (3) screening questions, and/or with new onset of the following symptoms: 1) Fever \geq 100.4 in past 72 hours. 2) Persistent cough, that is not normal for you. 3) Shortness of breath.