

COVID-19 Self-Assessment Form



Clough is concerned for the safety and health of its employees and contractors and is following the development of the Coronavirus disease (COVID-19) closely. In line with section 2 Pandemic Influenza Planning Checklist (CORP-HSE-CHK-G-0007) and maintaining a safe and healthy environment for everyone, attending a Clough Building or Project Site we ask that you carefully complete this self-assessment.

Name:		
Company:		
Where have you travelled to / or visited in last 14 days?		
Applicant Signature:		Date
		Yes / No
1	<ul style="list-style-type: none"> Is it less than 14 days since you were in a High-Risk region, as deemed by International SOS, or; Had close personal contact* with a confirmed COVID-19 case or Personally, have flu like symptoms (fever, cough, sore throat, nausea, vomiting or difficulty breathing)? 	
2	<ul style="list-style-type: none"> Is it less than 14 days since you travelled internationally or to a High-Risk region, and; Have flu like symptoms (fever, cough, sore throat, nausea, vomiting or difficulty breathing) 	
3	Are personally suffering from flu like symptoms (fever, cough, sore throat, nausea, vomiting or difficulty breathing) AND have not had contact with confirmed COVID-19 Case?	

*Note: Close personal contact is defined as conversing with someone for more than 15 minutes at a distance of 1m (or less).

** Note: High risk region means where there is active community transmission of COVID-19, including exposure through domestic travel or local clusters.

What to do next?

- A. If you answered **YES** to question 1 and are a Clough employee or employed by a Clough owned company or a Visitor you cannot attend a Clough office or site until 14 days have elapsed from the date you departed the specified regions and / or the date you last had close personal contact with anyone from the specified regions or you undergo and receive a medical clearance (*this can take up to 4 days*) and provide that to your Supervisor. (High)
- B. If you have answered **YES** to question 2 and are a Clough employee or employed by a Clough owned company or a Visitor you will need to seek COVID-19 advice and potential screening prior to returning to work. You must keep your Supervisor informed of your health condition and seek medical attention. (High)
- C. If you answered **YES** to question 3 and are a Clough employee or employed by a Clough owned company or a Visitor you must keep your Supervisor informed of your health condition and seek medical attention. (High)
- D. If you answer **NO** to all the above, no preventative actions is required from you, please forward form to your line Supervisor and copy to HSE@clough.com.au. (Low)
- E. If you are an employee of; a subcontractor to Clough, a Clough Joint Venture or a Visitor to a Clough Building or Project Site you must provide this completed form prior to access being granted, to your Clough sponsor and your employer who will issue you with any appropriate instructions.

By signing this form, you confirm the information is to the best of your knowledge true and correct at the time of signing. If you answered YES to any of the above, please inform and forward this form to your Clough Line Manager / Supervisor.

You are required to assess one of your team who has conducted a COVID-19 self-assessment with results noted above.

Based on the results please take the appropriate action as described above and confirm the action taken (circle):

- 1) High Risk - person to be self-isolated for 14 days from date of exposure: _____
- 2) Low / no Risk - person can return to site

Signed:

Date:

Note to Supervisor: Following appropriate action being taken please forward the completed form to HSE@clough.com.au

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