Coronavirus (COVID-19) – Health Briefing & Employee Questionnaire

*The watch commander/supervisor shall provide the current DPH/CDC health briefing, and employee questionnaire at the beginning of each shift or if an employee reports symptoms.*

Health Briefing
In an effort to keep one another healthy, all employees are encouraged to carry sanitary wipes or cleaner (with 60% or more alcohol content). At the beginning and end of each shift and as needed, remember to wipe down all surface areas commonly touched in your work area, patrol cars, steering wheel, radio microphone, computer, phones and equipment. If you cough/sneeze, please cover your mouth and nose with a tissue, handkerchief, upper sleeve, paper towels, or towel. **DO NOT** cough/sneeze into your hands. Wash your hands often with soap and water for 20 seconds or more and refrain from touching your face or eyes as much as possible. If you are required to respond to a location where there is a person with known or suspected COVID-19 infection, utilize available personal protective equipment (PPE). If at any time you begin to experience any of the symptoms associated with COVID-19, please notify your immediate supervisor.

Health Questionnaire
How are you feeling today? Good  Fair  Poor
Do you have a fever? Yes  No
Do you have a cough? Yes  No
Are you experiencing shortness of breath? Yes  No
Temperature Reading Taken? Yes  No  Results: ___________
(Thermal scanners are available for all LASD units through EOB)

Employee Name _________________________ Employee #_________
Supervisor Name_________________________ Employee #_________
Date____________ Time__________

**Attention Shift Supervisor:** If an employee reports any of the COVID-19 symptoms, direct them to receive medical attention, complete this form, and report the results of their medical assessment to the Department Operations Center. If an employee was exposed to COVID-19, units will be required to follow-up and monitor their personnel to limit/prevent further exposure.