



COVID – 19 Screening Questions for the Hard of Hearing or Deaf

Are you deaf or hard of hearing?

If deaf, do you need an interpreter?

If deaf or hard of hearing, do you read lips?

- Ask the person if they are deaf or hard of hearing showing them the questions above.
- If the person identifies as hard of hearing or deaf, provide these questions for the person to read and answer.
- iPads are available in many facilities with “Ava Voice to Text” to assist with communication. Follow local process for obtaining.
- Staff - document responses on the applicable screening tool.
- * Current outbreak list can be found [here](#) – consult/print ONLY Section 1: COVID-19 Outbreaks in Saskatchewan.

Have you had ANY of the following in the past 14 days?

1. Have you had a fever? YES No
2. NEW or worsening symptoms **NOT CAUSED BY** to seasonal or environmental allergies. Example: cough, shortness of breath or difficulty breathing, sore throat, runny nose? YES No
3. New onset of symptoms not usual to you including chills, aches and pains, headache, loss of sense of smell or taste, diarrhea, nausea/vomiting, loss of appetite (difficult feeding for children), fatigue or weakness? If elderly/frail: decreased ability to function (including falls) or sudden confusion? YES No

Within the last 14 days, have you done ANY of the following?

1. Travel outside of Canada? YES No
2. Identified by Public Health as a close contact? OR Close (within 2 meters) or prolonged contact with confirmed or probable person with COVID-19? YES No
3. Lived in, worked in, or visited a location or event on the current outbreak list? * YES No

**Have you had the
INFLUENZA VACCINATION
since October 2020?**

Yes – Date: _____

No – Would you like to receive the influenza vaccine? Yes No