COVID-19 WEN/Facility Outbreak Intake Form											
Work Exposure Notification (skip the manila sections)							Outbreak Intake				
Completed by:						Completed by:					
Date:						Date:					
Facility Inform	mation				·						
Facility Name					Facility Phone:						
Facility Address:											
POC	Name			Position		Phone Email					
Initial											
Outbreak											
Employees							•	tion of Buildi	ng		
# of Employees sick							# of Buildings				
Total # of Employees						# of Bathrooms					
% of Staff Vaccinated						# of Work Areas					
When were you notified?						Description:					
Ill Staff excluded from work			☐Y ☐N (10d+24 hr no sx)								
			⊔Υ	$\square$ Y $\square$ N							
# of Staff Tested/Pending											
Staff from Age	· · · · · · · · · · · · · · · · · · ·				F:+ O			D.4 + F	)t Ot		
Case/ Employee Information					First Onse			IVIOST	Most Recent Onset:		
Name /			Onset Last Day ate Worked		Date Notified		unty of sidence	DOB	Location in Facility	Shift	
				Worked	Hotilica	1100	JIGOTIOC		1 denity		
Safety Precautions: (WEN items highlighted)					Notes	ļ					
Supporting staf			sick								
	tom Monitoring										
Educating Staff about Coronavirus  Educational Signature  The section of Signature  The sec											
<ul> <li>Educational Signs</li> <li>Paid sick leave, PTO outside sick time</li> </ul>											
Increased Sani	o outon	<del>40 01010</del>	· ciiiio								
<ul> <li>Frequence</li> </ul>	<mark>surfaces</mark>										
Hand hygiene: frequent and adequate											
handw	.:::::										
Adequate handwashing facilities  Droplet Precautions											
	ng. (can still b	e requi	red)								
<ul> <li>Cough</li> </ul>											
	aining 6 ft. soc		•								
Plexig											
Increa      Deducing Eyes											
Reducing Exposures  Vaccinating staff.											
Discou											
	t staff/ reducir		•	p.							
	Lunchroom distancing, eat outside.										
Concerns or limitations around safety/ precautions?											

WEN Notes/ Reco	mmendations	Outbreak Notes/ Recommendations			
Progress Notes/ 0	Call Logg:				
	· · · · · · · · · · · · · · · · · · ·				
Date	Action		Completed By		

Updated 6/25/2021



