



Talking
therapies



Client Ref:

Date:

Covid19 Screening Questions

As part of our robust and thorough risk assessment to mitigate the risk of covid19 transmission I would appreciate if you would complete the following screening questions before each therapy session.

Client 1		Client 2	
Yes	No	Yes	No

1. Have you test positive for Covid19 in the past 7 days?
2. Are you waiting for Covid19 test or the results of a test?
3. Do you have any of the following symptoms:
 - A new continuous cough
 - A high temperature
 - A loss or change in taste or smell
4. Do you live with someone who has either tested positive For Covid19 or had symptoms linked to Covid19 in the Last 14 days?
5. During the past 14 days, have you been notified by the NHS Test & Trace team that you have been in contact With someone who has tested positive for Covid19 (and you don't live with that person)?
6. Have you been advised to quarantine or self isolate (for example: if you have just arrived in the country Or have a serious underlying condition)?

Any additional comments