

Starlings Recommended Screening Questions

Starlings Volleyball, USA recommends all Starlings Clubs use this guidance to help prevent the spread of COVID-19 by screening staff, players and visitors daily or before any practice/event:

1. Have you or anyone in your household been tested for COVID-19?
2. Have you or anyone in your household had any of the following symptoms in the last 14 days?
 - a. Sore throat, cough, chills, body aches for unknown reasons, shortness of breath for unknown reasons, loss of smell, loss of taste, fever at or greater than 100 degrees fahrenheit?
3. Have you or anyone in your household visited or received treatment in a hospital, nursing home, long-term care, or other healthcare facility in the past 30 days?
4. Have you or anyone in your household cared for an individual who is in quarantine or is a presumptive positive or has tested positive for COVID-19?
5. Do you have any reason to believe you or anyone in your household has been exposed to or acquired COVID-19?
6. To the best of your knowledge have you been in close proximity to any individual who tested positive for COVID-19?
7. Have you or anyone in your household participated in any mass gatherings or protests in the last 14 days?

If the answer is YES to any of these questions, that person has not passed and cannot enter the facility. They should be instructed to go home to self-isolate immediately. The screener should notify the player's parent/guardian right away and contact the Club Director.

If the individual answers NO to all of these questions:

- Take their temperature using a no-touch thermometer.
- Record the result HERE: _____
- Any temperature 100.4 F or greater is considered a fever. Anyone with a fever should be instructed to go home to self-isolate immediately. The screener should notify the player's parent/guardian right away and contact the Club Director.

If the individual answers NO to all questions, and their temperature is 100.3 or below:

- They have passed and can enter the facility.
- Remind the individual to:
 - Use hand sanitizer throughout their time in the facility.
 - Any additional rules/guidelines you'd like to reinforce.

Player Name: _____

Date/Time: _____