



## HOLIDAY LEAVE RETURN RISK ASSESSMENT

COMMUNITY \_\_\_\_\_

To ensure the safety of our Residents, please complete the holiday leave questionnaire below upon Resident's return to the community:

1. Where did you travel? \_\_\_\_\_
2. What mode of transportation was used? \_\_\_\_\_
3. Length of leave? \_\_\_\_\_
4. How many people attended the gathering? \_\_\_\_\_
5. Did you maintain social distancing and mask usage while not eating or drinking? \_\_\_\_\_

**COMMUNITY USE ONLY:** Please complete the Risk Assessment upon any Resident's return to the community:

1. Indoor activity:  Yes
2. Unable to maintain social distancing:  Yes
3. >5 people at activity:  Yes
4. Duration of activity >1 hour:  Yes
5. Unable to wear a mask during the entirety of the outing (except when eating or drinking):  Yes

Assign 1 point to each "yes":

**Total score** \_\_\_\_\_

0-1 = Low Risk Activity

2-3 = Medium Risk Activity

4-5 = High Risk Activity

Please email completed form to [COVID@validusseniorliving.com](mailto:COVID@validusseniorliving.com)