## **Health Screening Questionnaire**

We care about the safety and wellbeing of all our employees, contractor partners and visitors who work or travel to Rio Tinto sites and office. As part of our response to the evolving coronavirus situation, we are taking steps across the business to minimize potential transmission and mitigate the impact of the outbreak.

All employees, contractors or visitors to any Rio Tinto facilities are required to respond to the following questions if:

- 1. New to site.
- 2. Returning from extended absence beyond normally scheduled days away, including travel from another country or working remotely.

	3. Recently have felt unwell w	ith COVID-19 sympton	ıs.	
Or, as o	determined by security or manag	ement.		
Entry w	vill be denied if the person refuse	s to respond to the qu	iestionnaire.	
	ny:			
	esponses must be honest to help		thers.	
	have, or have you had in past th	-		otoms?
1)	Fever ≥ 99.1°F (37.3°C)	YES / NO		
-	Cough	YES /	NO	
3)	Shortness of breath	YES /	NO	
4)	Muscle pain or fatigue	YES /	NO	
5)	Sputum	YES /	NO	
6)	Headache	YES /	NO	
7)	Diarrhea	YES /	NO	
8)	Other flu-like symptoms	YES /	NO	
Have y	ou been exposed to the COVID-19	9 via:		
9)	Close Contact (within about six (COVID-19)	feet) with a confirmed	or suspected case of C	Coronavirus
	,	YES /	NO	
10)	Have you visited an area where an outbreak of COVID-19 has occurred? For example international travel to an area with CDC level 3 travel notice, cruise ship travel, or to an area within the US with community spread.			
		YES /	NO	
	If YES, where:			

Please refer to the list of countries with <u>a CDC level 3 travel notice</u>, where a COVID-19 outbreak has occurred.

For example: Mainland China, Hong Kong, Taiwan, South Korea, Europe.

## If the answer to question 9 is YES or the individual has been to one of the countries with a CDC level 3 travel notice, please do the following:

	On-Site	Off-Site
Employees	Make arrangements for the employee to leave site and advise them to contact their health care provider.	Inform the employee not to come to work and advise them to contact their health care provider.
	Inform Kellie Moss (801 599- 0322) or Dan Cummings (801 419-4137) and send them scanned copy of this form.	Inform Kellie Moss (801 599- 0322) or Dan Cummings (801 419-4137) and send them scanned copy of this form.
Contractors / Visitors / Vendors	Make arrangements for the person to leave site and inform the RTK site contact. Advise them to follow their company protocols.	Inform the person not to come to site and advise them to follow their company protocols.

<u>Please take a statement of any persons the individual might have been in close contact with and the locations visited onsite.</u>

<u>IF the person answered YES to any of questions 1 through 8 and NO to questions 9 and they have</u> not visited any of the countries on the CDC level 3 travel notice list, please advise them not to return to site until they have been symptom free for 24 hrs.

<sup>\*</sup>The above list might change based on CDC guidelines