

Schedule I

Financial Services Tribunal

25 Sheppard Ave. W.
Suite 100
Toronto ON M2N 6S6

Telephone: (416) 590-7294
Facsimile: (416) 226-7750
Toll Free: 1-800-668-0128
Email: contact@fstontario.ca

Tribunal des services financiers

25 avenue Sheppard oust
bureau 100
Toronto ON M2N 6S6

Téléphone: (416) 590-7294
Télécopieur: (416) 226-7750
Sans Frais: 1-800-668-0128
Courriel: contact@fstontario.ca



COVID-19 Screening Questionnaire

The Financial Services Tribunal (the “Tribunal”) may order that in-person hearing participants be screened for COVID – 19 to determine their eligibility to attend in-person hearings at the Tribunal’s offices.¹ In this regard, the Tribunal has developed this COVID-19 Screening Questionnaire (the “COVID Questionnaire”) to be completed by in-person participants and filed with the Registrar in advance of the commencement of the hearing. In addition, the Tribunal has developed an Attendance Day Screening Form (the “ADS Form”) for use by the Registrar, following receipt of the COVID Questionnaire, to screen/re-screen in-person participants on the days such participants attend the hearing.

Both this Covid Questionnaire and the ADS Form are based on advice, recommendations and instructions originally issued by the Office of the Chief Medical Officer of Health in accordance with [O. Reg. 364/20, as amended by O. Reg. 645/21: Rules for Areas at Step 3²](#) made under the [Reopening Ontario \(A Flexible Response to COVID-19\) Act, 2020](#) (ROA). The COVID Questionnaire/ADS Form are subject to change based upon future provincial, municipal or public health guidelines or requirements and Tribunal orders.

Neither this COVID Questionnaire nor the ADS Form are to be used as a clinical assessment tool or intended to take the place of medical advice, diagnosis, treatment, or legal advice. In the event of any conflict between this document and any applicable legislation, order or directive issued by the Minister of Health or the Chief Medical Officer of Health or the Tribunal, the legislation, order or directive prevails.

If ordered by the Tribunal, this COVID Questionnaire and the ADS Form must be completed and filed with the Registrar³ by all participants in a proceeding (including panel members, parties, witnesses, and legal counsel) in advance of any in-person attendance at the Tribunal’s offices. The results of the COVID Questionnaire/ADS Form will be used by the Tribunal to determine whether a participant will be eligible to attend in-person at the Tribunal’s offices in connection with the proceeding.

Anyone who does not complete and file the COVID Questionnaire/ADS Form with the Registrar as required will not be eligible to enter the Tribunal’s offices. Anyone who completes and files the COVID Questionnaire/ADS Form as ordered may be eligible to attend the Tribunal’s offices as determined by the Tribunal or the Registrar based on the answers to the COVID Questionnaire/ADS Form .

If ordered by the Tribunal, participants seeking in-person attendance at the Tribunal offices must first complete and file this COVID Questionnaire in advance of the hearing in accordance with directions from the Tribunal or the Registrar. If determined eligible to attend in-person based on the COVID Questionnaire, the participant will be asked to screen/re-screen by completing/confirming the ADS Form

¹ Note – The determination of hearing format (in-person, electronic or written or some combination) is made by order of the Tribunal during the pre-hearing process in accordance with the Tribunal’s Rules and Practice Directions.

² Revoked April 27, 2022

³ Note - screening is not required for emergency services or other first responders entering a business or organization for emergency purposes.

Schedule I

Financial Services Tribunal

25 Sheppard Ave. W.
Suite 100
Toronto ON M2N 6S6

Telephone: (416) 590-7294
Facsimile: (416) 226-7750
Toll Free: 1-800-668-0128
Email: contact@fstontario.ca

Tribunal des services financiers

25 avenue Sheppard oust
bureau 100
Toronto ON M2N 6S6

Téléphone: (416) 590-7294
Télécopieur: (416) 226-7750
Sans Frais: 1-800-668-0128
Courriel: contact@fstontario.ca



and filing it with the Registrar at the start of each day of their in-person attendance before entering the Tribunal's offices.

The Ontario Office of the Chief Medical Officer of Health recommends individuals with COVID-19 like symptoms self-isolate, ideally at home, and call their health care provider or Telehealth Ontario ([1-866-797-0000](tel:1-866-797-0000)) for advice or an assessment, including whether they need a COVID-19 test.

Schedule I

Financial Services Tribunal

25 Sheppard Ave. W.
Suite 100
Toronto ON M2N 6S6

Telephone: (416) 590-7294
Facsimile: (416) 226-7750
Toll Free: 1-800-668-0128
Email: contact@fstontario.ca

Tribunal des services financiers

25 avenue Sheppard oust
bureau 100
Toronto ON M2N 6S6

Téléphone: (416) 590-7294
Télécopieur: (416) 226-7750
Sans Frais: 1-800-668-0128
Courriel: contact@fstontario.ca



A. Required Screening Questions

1. Are you currently experiencing one or more of the symptoms below that are new or worsening? These questions are not related to chronic conditions or symptoms related to other known causes or conditions.

Do you have <u>one or more</u> of the following symptoms?	Yes No
Fever and/or chills	Temperature of 37.8°C / 100°F or higher Yes <input type="checkbox"/> No
Cough or barking cough (croup)	Not related to asthma, post-infectious reactive airways, COPD, or other know causes or conditions you already have Yes No
Shortness of breath	Not related to asthma or other known causes or conditions you already have Yes <input type="checkbox"/> No
Decrease or loss of smell or taste	Not related to seasonal allergies, neurological disorders, or other known causes or conditions you already have Yes No
(For adults age 18 years or over) Fatigue, lethargy, malaise and/or myalgia	If you <u>have not</u> received a COVID-19 vaccination in the last 72 hours and are experiencing unusual tiredness, lack of energy (not related to depression, insomnia, thyroid dysfunction, to other know causes or conditions you already have) muscle pains, aches, and pain associated with ligaments, tendons, and the soft tissues that connect bones, organs, and muscles your answer for this item should be "Yes" If you <u>have</u> received a COVID-19 vaccination in the last 72 hours and are experiencing mild fatigue that only began after vaccination, but not the unusual symptoms referred to in the questions above, your answer for this item should be "No". Yes No

Schedule I

**Financial Services
Tribunal**

25 Sheppard Ave. W.
Suite 100
Toronto ON M2N 6S6

Telephone: (416) 590-7294
Facsimile: (416) 226-7750
Toll Free: 1-800-668-0128
Email: contact@fstontario.ca

**Tribunal des services
financiers**

25 avenue Sheppard oust
bureau 100
Toronto ON M2N 6S6

Téléphone: (416) 590-7294
Télécopieur: (416) 226-7750
Sans Frais: 1-800-668-0128
Courriel: contact@fstontario.ca



(For children under age 18 years) Nausea, vomiting and/or diarrhea	Not related to irritable bowel syndrome, anxiety, menstrual cramps, or other known causes or conditions you already have	
	Yes	No

2. In the last 14 days, have you travelled outside of Canada AND been advised to quarantine (as per the federal quarantine requirements)?

Yes No

3. Has a doctor, health care provider, or public health unit told you that you should currently be isolating (staying at home)? This can be because of an outbreak or contact tracing.

Yes No

4. In the last 10 days, have you been in in close contact with someone who currently has COVID-19?

If public health has advised you that you do not need to self-isolate (e.g., you are “fully immunized”⁴ or have tested positive for COVID-19 in the last 90 days and since been cleared), select “No.”

Yes No

If you have already gone for a test in response to the Alert and got a negative result, select "No."

If you are fully immunized or have tested positive for COVID-19 in the last 90 days and since been cleared, select "No."

Yes No

5. In the last 10 days, have you tested positive on a rapid antigen test or a home- based self-testing kit?

If you have since tested negative on a lab-based PCR test, select “No.”

Yes No

⁴ An individual qualifies as fully immunized upon having received at least their second dose of a two-dose COVID-19 vaccine series or their first dose of a one-dose COVID-19 vaccine series (e.g., Johnson and Johnson) more than 14 days previously.

Schedule I

Financial Services Tribunal

25 Sheppard Ave. W.
Suite 100
Toronto ON M2N 6S6

Telephone: (416) 590-7294
Facsimile: (416) 226-7750
Toll Free: 1-800-668-0128
Email: contact@fstontario.ca

Tribunal des services financiers

25 avenue Sheppard oust
bureau 100
Toronto ON M2N 6S6

Téléphone: (416) 590-7294
Télécopieur: (416) 226-7750
Sans Frais: 1-800-668-0128
Courriel: contact@fstontario.ca



6. In the last 14 days, has someone in your household (someone you live with) travelled outside of Canada AND been advised to quarantine (as per the federal quarantine requirements)?

If you are fully immunized or have tested positive for COVID-19 in the last 90 days and since been cleared, select "No."

Yes

No

7. In the last 10 days, has someone you live with been identified as a "close contact" of someone who currently has COVID-19 AND advised by a doctor, healthcare provider or public health unit to self-isolate?

If you are fully immunized or have tested positive for COVID-19 in the last 90 days and since been cleared, select "No."

Yes

No

8. Is anyone you live with currently experiencing any new COVID-19 symptoms and/or waiting for test results after experiencing symptoms?

If the individual experiencing symptoms received a COVID-19 vaccination in the last 48 hours and is experiencing mild fatigue, muscle aches, and/or joint pain that only began after vaccination, select "No."

If you are fully immunized or have tested positive for COVID-19 in the last 90 days and since been cleared, select "No."

Yes

No

9. Are you fully immunized?

If you are fully immunized, select "Yes". If not, select "No". If you are unwilling to respond select "Unwilling to Respond".

Yes

No

Unwilling to Respond

Schedule I

Financial Services Tribunal

25 Sheppard Ave. W.
Suite 100
Toronto ON M2N 6S6

Telephone: (416) 590-7294
Facsimile: (416) 226-7750
Toll Free: 1-800-668-0128
Email: contact@fstontario.ca

Tribunal des services financiers

25 avenue Sheppard oust
bureau 100
Toronto ON M2N 6S6

Téléphone: (416) 590-7294
Télécopieur: (416) 226-7750
Sans Frais: 1-800-668-0128
Courriel: contact@fstontario.ca



B. Results of Screening Questions

1. Eligible to Attend In-Person at the Tribunal Offices

- a. If the participant answers **“NO” to all questions from 1 through 8 and “YES” to question 9**, then subject to the orders of the Tribunal, the results of any re-screening, and compliance with the following requirements, the participant will be eligible to attend in-person at the Tribunal’s offices on the dates scheduled by the Tribunal for such attendance. The participant must file with the Registrar acceptable proof of full immunization in accordance with Ministry of Health guidance⁵ prior to the participant’s attendance and present to the Registrar government-issued photo identification upon entering the Tribunal’s offices. While present in the Tribunal offices, the participant must continue to follow all public health measures, including masking, maintaining physical distance and hand hygiene, where applicable, and as directed by the Registrar or the Tribunal.
- b. If the participant answers **“NO” to all questions from 1 through 8 and either “NO” or “Unwilling to Respond” to question 9**, then subject to the orders of the Tribunal and the results of any re-screening, the participant will only be eligible to attend in-person at the Tribunal’s offices on the dates scheduled by the Tribunal for such attendance, if
 - i. the participant files with the Registrar, prior to the participant’s attendance, acceptable written confirmation completed and supplied by a physician or a registered nurse in the extended class⁶ that sets out, in accordance with the Ministry of Health’s guidance⁷, a documented medical reason for not being fully immunized and the effective time period for the medical reason; and
 - ii. the Tribunal determines, following consultation with all parties and other in-person participants, that it is reasonable to permit such attendance; and
 - iii. the participant presents to the Registrar government-issued photo identification upon entering the Tribunal’s offices; and
 - iv. while present in the Tribunal offices, the participant continues to follow all public health measures, including masking, maintaining physical distance and hand hygiene, as directed by the Registrar or the Tribunal; and
 - v. the participant provides evidence of a negative COVID-19 test result and is

⁵https://www.health.gov.on.ca/en/pro/programs/publichealth/coronavirus/docs/guidance_proof_of_vaccination_for_businesses_and_organizations.pdf

⁶ The Extended Class is for registered nurses who have additional education and clinical experience that allows them to practise as Nurse Practitioners.

⁷ See footnote 3

Schedule I

Financial Services Tribunal

25 Sheppard Ave. W.
Suite 100
Toronto ON M2N 6S6

Telephone: (416) 590-7294
Facsimile: (416) 226-7750
Toll Free: 1-800-668-0128
Email: contact@fstontario.ca

Tribunal des services financiers

25 avenue Sheppard ouest
bureau 100
Toronto ON M2N 6S6

Téléphone: (416) 590-7294
Télécopieur: (416) 226-7750
Sans Frais: 1-800-668-0128
Courriel: contact@fstontario.ca



determined to be eligible under paragraph 3 below.

2. Ineligible to Attend In-Person at the Tribunal Offices

- a. If the participant fails to complete and file the COVID Questionnaire/ADS Form with the Registrar as ordered by the Tribunal, or answers **“YES” to any questions from 1 through 8**, then, subject to paragraph 3 below, the participant, even if fully vaccinated, **will not be eligible** to attend in-person at the Tribunal's offices. The Ontario Office of the Chief Medical Officer of Health recommends that participants who have answered **“YES” to any questions from 1 through 8** go home to self-isolate immediately and contact their health care provider or Telehealth Ontario ([1-866-797-0000](tel:1-866-797-0000)) to get advice or an assessment, including whether they need a COVID-19 test.
- b. A participant described above in clause a. may attend in-person at the Tribunal's offices if such participant is determined to be eligible for attendance under paragraph 3 below.

3. Negative COVID-19 Test – If ordered by the Tribunal, any participant who is not otherwise eligible to attend the Tribunal's offices in-person under paragraphs 1 or 2 above, may be considered by the Tribunal for such eligibility if, after completion and submission of the COVID Questionnaire/ADS Form to the Registrar, such participant provides the Registrar with suitable written evidence of a negative COVID-19 test taken within the previous 72 hours, or within such other period as the Tribunal considers acceptable in the circumstances.

4. Attendance Day Screening/Re-Screening – If ordered by the Tribunal, the Registrar will email a copy of the ADS Form to all in-person participants on the day prior to the first day of their attendance at the Tribunal's offices. In-person participants must complete and sign the ADS Form and return it to the Registrar by reply email on the morning of their attendance, unless other acceptable arrangements are made with the Registrar. For consecutive multiple day hearings, at the end of each day the Registrar will email in-person participants a request to confirm that the ADS Form they submitted on the first day remains accurate and unchanged. This confirmation must be emailed to the Registrar by the participant on the day of the subsequent attendance prior to arrival at the Tribunal's offices. If such confirmation is not received by the Registrar, the participant will be asked to provide the confirmation or complete a new ADS Form upon arrival at the Tribunal's offices. The Registrar will inform the Tribunal of any non-compliance with these requirements or if the participant appears to be ineligible for in-person attendance as a result of their ADS Form answers. The Tribunal will then determine next steps.

In addition to the above, upon arrival at the Tribunal's offices on each day, in-person participants shall present their government-issued photo identification to the Registrar and confirm the Registrar's receipt of their completed and signed ADS Form/email confirmation, as applicable. The Registrars and Tribunal members in attendance will also be required to complete and submit the ADS Form/email confirmations, as applicable, on a daily basis. The Registrars' ADS Form/email confirmations will be submitted to the Tribunal panel chair.

5. Changing Circumstances - If any of the answers to the COVID Questionnaire/ADS Form change during the day, the COVID Questionnaire/ADS Form results are no longer valid and the participant

Schedule I

Financial Services Tribunal

25 Sheppard Ave. W.
Suite 100
Toronto ON M2N 6S6

Telephone: (416) 590-7294
Facsimile: (416) 226-7750
Toll Free: 1-800-668-0128
Email: contact@fstontario.ca

Tribunal des services financiers

25 avenue Sheppard oust
bureau 100
Toronto ON M2N 6S6

Téléphone: (416) 590-7294
Télécopieur: (416) 226-7750
Sans Frais: 1-800-668-0128
Courriel: contact@fstontario.ca



may need to re-screen again as the Tribunal determines necessary – see above.

- 6. Electronic Attendance at the Tribunal's Offices Permitted** - Any participant who is not eligible to attend in-person at the Tribunal's offices may attend electronically in accordance with the orders of the Tribunal and the instructions of the Registrar applicable to their proceeding and as provided in the Tribunal's rules, practice directions and guidelines.
- 7. Confidential Record** - Any record created as part of participant screening will be kept confidential and may only be disclosed as required by law.

C. Resources

[COVID-19 \(coronavirus\) in Ontario](#) webpage (find a testing location, check your results, how to stop the spread of the virus.

I HEREBY CONFIRM MY UNDERSTANDING OF THE ABOVE REQUIREMENTS AND INFORMATION AND FURTHER CONFIRM THAT THE ABOVE ANSWERS IN THIS COVID QUESTIONNAIRE ARE TRUE AND CORRECT AS AT THE DATE WRITTEN BELOW.

Date - _____

Name of Participant (print) - _____

Signature of Participant - _____

Participant's Phone Number - _____