



# Staff Daily Health Checklist



**We are asking all employees who come on site to self-screen for COVID-19 symptoms. In an effort to observe critical safety measures we are taking an abundance of caution to be sure you, your family, and co-workers are safe. Please screen yourself by using the following checklist before you come into an MRSD building each day.**

I have no signs or symptoms of ANY of the following within the last 24 hours: fever above 100.0 degrees, shortness of breath or difficulty breathing, persistent cough, chills, sore throat, muscle pain, or new loss of taste or smell. (As more symptoms are updated by the CDC or other public health agencies, please include those symptoms as well.)

I will take my temperature before coming into work to ensure that I am not running a fever above 100.0 degrees.

If I develop any of the above-mentioned symptoms, I will 1.) self-isolate and contact my supervisor immediately 2.) avoid contact with others 3.) remain at home until the symptoms subside or am medically cleared by a health professional and 4.) seek appropriate medical attention.

If any one of the symptoms manifests while I am at work, I must self-isolate and inform my supervisor immediately. If it is safe for me to leave the premises on my own, then I will do so without delay. Otherwise, arrangements will be made for my safe departure.

I have not had close contact with an individual diagnosed or suspected positive of COVID-19 within the past 14 days. A close contact is someone who was within 6 feet of an infected person for a cumulative total of 15 minutes or more over a 24-hour period starting from 2 days before illness onset (or, for asymptomatic patients, 2 days prior to test specimen collection) until the time the patient is isolated.

I have not been asked to self-isolate or quarantine by a doctor or health official.

I have not recently traveled outside of Massachusetts. If I do, I will not return to work until I have satisfied the Massachusetts Governor's COVID-19 Travel Order including completing the [Massachusetts Travel Form](#) and either producing a negative COVID test (if required) or quarantining for 14 days upon return to Massachusetts.

**NOTE: INDIVIDUALS EXHIBITING SYMPTOMS WILL BE DIRECTED TO LEAVE THE WORK SITE AND SEEK MEDICAL ATTENTION AND APPLICABLE TESTING BY THEIR HEALTH CARE PROVIDER. THEY ARE NOT TO RETURN TO WORK UNTIL THEY ARE CLEARED BY A HEALTH PROFESSIONAL TO DO SO. WE WANT TO BE SURE WE ARE FOLLOWING THE GUIDANCE FROM LOCAL, STATE, AND FEDERAL AGENCIES FOR THE SAFETY OF ALL.**

