



EMPLOYEE COVID-19 COMPLIANCE CERTIFICATION

COMMUNITY: _____

EMPLOYEE NAME _____

COVID-19 HEALTH AND SAFETY PROTOCOLS WHILE AT THE WORKPLACE

By my signature below I certify that I understand the workplace protocols described below, that I have been complying with them, and that I will use my best efforts to continue complying with these protocols:

- I shall not report to, or be at, the workplace if I am presenting any symptom(s). I understand the Community does not want me to compromise my health or the health of others by being at the workplace if I am exhibiting symptoms.
- I will wash my hands thoroughly upon entering **and** upon leaving any resident unit.
- I will use hand sanitizer frequently in between hand washing, especially when entering and leaving Community common areas, employee break room, and workspaces.
- I will cover my mouth and nose with a flexed elbow or tissue when coughing and sneezing. I will discard the used tissue immediately and wash my hands with soap and water or use an alcohol-based hand rub.
- I will maintain social distance – Whenever possible, I will keep a minimum distance of 6 feet between myself and any other person.
- I will use appropriate Personal Protective Equipment (“**PPE**”) when in proximity of residents and around others in the Community -- gloves, masks, as well as gowns and eye protection when required.
- I will take my temperature upon arriving for every shift, reporting any abnormal temperatures, and will report any potential symptom I may be experiencing.
- If I have questions or concerns I will inform management immediately.

COVID-19 HEALTH AND SAFETY PROTOCOLS OUTSIDE OF THE WORKPLACE

As an employee of a DSS Licensed RCFE Community, I understand and pledge to adhere to the responsibilities to comply with all legal orders relating to “Shelter in Place” outside of the workplace. I shall employ “Best Practices” while not at the workplace and use my best efforts:

- To comply with and maintain recommended social distancing standards.
- To avoid unnecessary socialization and gatherings that may result in exposing myself and ultimately Community Residents.
- To avoid sharing of any item that might serve to spread the COVID-19 virus.
- To wash my hands and sanitize very frequently.

EMPLOYEE SIGNATURE _____

DATE _____