

# Martha's Vineyard Back to Work Guidelines

## Back to Work Checklist

THIS FORM MUST BE COMPLETED AND SUBMITTED TO THE BUILDING INSPECTOR TO REQUEST AN INSPECTION. NO WORK CAN BEGIN UNTIL AN INSPECTION IS CONDUCTED OR 48 HOURS PASSES.

Construction Site Address: \_\_\_\_\_

Permit Number: \_\_\_\_\_

General Contractor Name: \_\_\_\_\_

Site Supervisor Name: \_\_\_\_\_

Site Supervisor Phone Number: \_\_\_\_\_

Site Supervisor Email: \_\_\_\_\_

- I informed all employees and subcontractors that no more than two workers may be on the site at one time.
- I informed all employees and subcontractors that they must stay home if they are sick, they must go home if they feel sick, and they must ask someone to go home if they appear sick.
- I informed all employees and subcontractors that they must travel to work by single occupant vehicle, on bike, or by foot.
- I informed all employees and subcontractors about the importance of maintaining 6 feet of distance at all times.
- I informed all employees and subcontractors that they cannot undertake a job if they do not have personal protective equipment to complete the job safely.
- The construction site has a hand washing station with running water, pump soap, paper towels mounted on a holder or in a dispenser, and a trash bin.
- I informed all employees and subcontractors that all supplies at the hand washing station must always be present.
- The site has one bathroom, porta-potty, or an equivalent rest room facility approved by the Board of health
- The wellness questionnaire sign in/sign out sheet is posted and I instructed all employees and subcontractors to complete it each day.
- All employees and subcontractors are instructed to wear work gloves at all times, except when not technically feasible.
- I informed all employees and subcontractors about the need to disinfect shared surfaces and complete the daily cleaning log.
- I informed all employees and subcontractors that breaks must be taken on the site.
- Guidelines for stopping the spread of COVID-19 and proper social distancing are posted at the following locations:
  - Entrance of the structure.
  - On each floor of the structure.
  - In each bathroom/porta-potty.
  - Inside each office/storage/equipment trailer.
- Guidelines for proper hand washing technique are posted at all hand washing sinks.
- The site supervisor will complete the Daily Report.

*I attest that I have met all the requirements of the Back to Work Checklist and I hereby request an inspection of the above addressed Construction Site and an authorization to begin work.*

\_\_\_\_\_  
Name Signature Date

# Martha's Vineyard Back to Work Guidelines

## Daily Cleaning Log

All high contact surfaces must be disinfected at the end of each day and whenever there is a crew change at the site. High contact surfaces include, but are not limited to, the items listed below. Use the blank boxes to list any additional locations or equipment cleaned. All cleanings must be recorded on this log by the cleaner. The log must be signed by the supervisor each day and kept with the Daily Report.

Item Cleaned	Time Cleaned	Name of Cleaner	Signature
Door Knobs			
Porta Potty			
Handwashing Station			
Site Office			
Storage Trailer			
On Site Vehicles			
Power Tools			
Hand Tools			
Delivered Items			

Date: \_\_\_\_\_

Site Address: \_\_\_\_\_

Supervisor Name: \_\_\_\_\_

Supervisor Signature: \_\_\_\_\_

# Martha's Vineyard Back to Work Guidelines

## Daily Report Template

Company Name: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_

Contact Email: \_\_\_\_\_

Work Site or Construction Site Address: \_\_\_\_\_  
\_\_\_\_\_

Date: \_\_\_\_\_

Is a cleaning log attached to this report?

Yes  No (Check One)

Is a wellness questionnaire sign in/sign out report attached to this report?

Yes  No (Check One)

How many employees or subcontractors were not able to complete the wellness questionnaire and were directed to leave work? \_\_\_\_\_

Supervisor Name: \_\_\_\_\_

Supervisor Signature: \_\_\_\_\_

Date: \_\_\_\_\_

# COVID – 19 Wellness Questionnaire

**In light of the situation regarding COVID-19, please do not enter this jobsite or report to work if you answer yes to any of the following questions:**

1. Are you experiencing flu-like symptoms including: nasal congestion, sore throat, achiness, nausea, vomiting, diarrhea, signs of a fever or a measured temperature above 100.3 degrees or greater, and cough or shortness of breath within the past 72 hours?
2. Have had close contact with an individual diagnosed with COVID-19 or exhibiting flu-like symptoms in the past 14 days?
3. Have you been asked to self-isolate or quarantine by their doctor or a local public health official?
4. Have you been asked to stay home by a Medical Professional or Board of Health because COVID-19 symptoms were experienced, and you have not been cleared to return to work?
5. Have traveled to work with other people in a passenger vehicle, ferry or bus?

By reporting work and signing below I attest that I answered NO to all the above questions:

<u>Printed Name</u>	<u>Signature</u>	<u>Sign in Time</u>	<u>Sign out Time</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Supervisor Name: \_\_\_\_\_

Supervisor Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## Questionário sobre COVID 19

**Em relação ao COVID-19, não entre nesta obra e nem vá ao trabalho se responder sim a qualquer uma das seguintes perguntas:**

1. Você está tendo sintomas semelhantes aos da gripe, incluindo: congestão nasal, dor de garganta, dor no corpo, náusea, vômito, diarreia, sinais de febre ou temperatura medida acima de 37.9°C, e tosse ou falta de ar nas últimas 72 horas?
2. Teve contato próximo com um indivíduo diagnosticado com COVID-19 ou exibindo sintomas semelhantes aos da gripe nos últimos 14 dias?
3. Você foi solicitado a se auto-isolar ou colocado em quarentena pelo médico ou por um funcionário local de saúde pública?
4. Você foi solicitado a ficar em casa por um profissional médico ou pelo conselho de saúde porque teve sintomas do COVID-19 e você ainda não foi liberado para voltar ao trabalho?
5. Você tem viajado à trabalho com outras pessoas em um veículo, balsa ou ônibus?

Ao relatar o trabalho e assinar abaixo, atesto que respondi NÃO a todas as perguntas acima:

<u>Nome</u>	<u>Assinatura</u>	<u>Horário de chegada</u>	<u>Horário de saída</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Nome do supervisor: \_\_\_\_\_

Assinatura do supervisor: \_\_\_\_\_

Data: \_\_\_\_\_

# Stop the Spread of Germs

Help prevent the spread of respiratory diseases like COVID-19.

Avoid close contact with people who are sick.



Cover your cough or sneeze with a tissue, then throw the tissue in the trash.



Avoid touching your eyes, nose, and mouth.



When in public, wear a cloth face covering over your nose and mouth.

Clean and disinfect frequently touched objects and surfaces.



Stay home when you are sick, except to get medical care.



Wash your hands often with soap and water for at least 20 seconds.



[cdc.gov/coronavirus](https://www.cdc.gov/coronavirus)

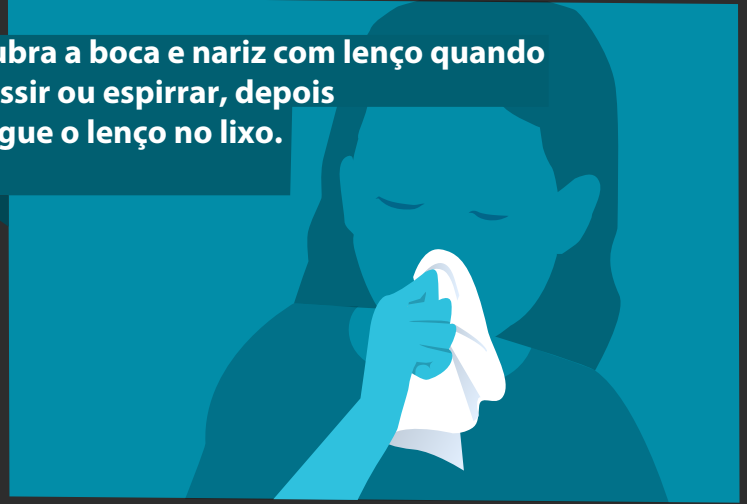
# PARE DE ESPALHAR GERMES

Ajude a prevenir à propagação de doenças respiratórias como o COVID-19

Evite contato próximo com pessoas doentes.



Cubra a boca e nariz com lenço quando tossir ou espirrar, depois jogue o lenço no lixo.



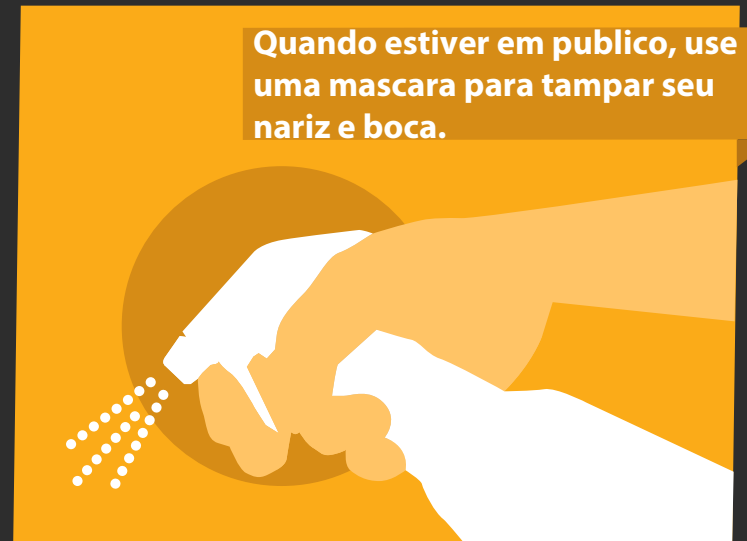
Evite tocar seus olhos, nariz e boca.



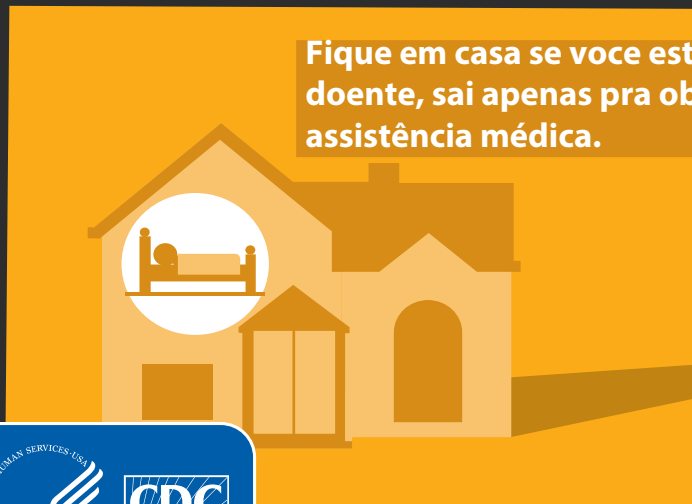
Limpar e desinfetar objetos e superfícies frequentemente tocados.



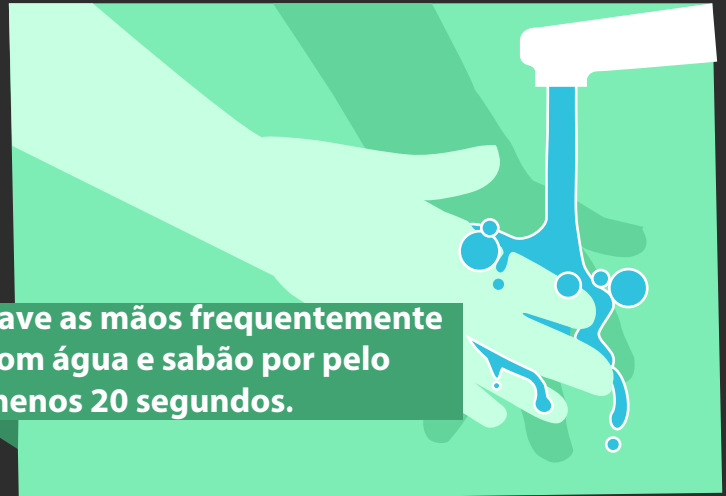
Quando estiver em publico, use uma mascara para tampar seu nariz e boca.



Fique em casa se voce estiver doente, sai apenas pra obter assistência médica.



Lave as mãos frequentemente com água e sabão por pelo menos 20 segundos.



[cdc.gov/coronavirus](https://www.cdc.gov/coronavirus)



Hands that look clean can still have icky germs!



# WASH YOUR HANDS!



U.S. Department of Health and Human Services  
Centers for Disease Control and Prevention

This material was developed by CDC. The Life is Better with Clean Hands campaign is made possible by a partnership between the CDC Foundation, GOJO, and Staples. HHS/CDC does not endorse commercial products, services, or companies.

POST AT EACH HANDWASHING STATION





Mãos que parecem limpas podem ter germes nojentos!

# Lave as suas Mãos!



U.S. Department of Health and Human Services  
Centers for Disease Control and Prevention

Este documento foi desenvolvido pela CDC. A campanha Life is Better with Clean Hands foi possível através de uma parceria entre a fundação CDC, GOJO, e Staples. A HHS/CDC não recomenda produtos, serviços ou empresas comerciais.

Colocar em cada estação de lavagem das mãos

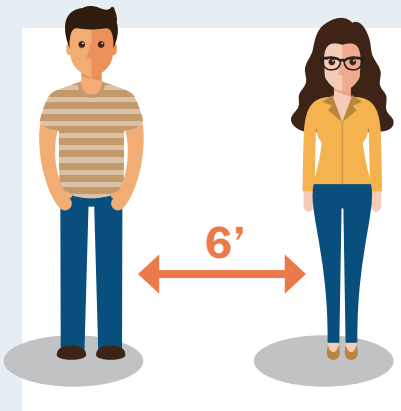
# Help Prevent COVID-19 with Social Distancing



**Call/Facetime/online chat  
with friends and family.**



**Stay home  
as much as  
you can.**



**If you must go out:**

- **Don't gather in groups**
- **Stay 6 feet away from others**
- **Don't shake hands or hug**



**And please continue  
to wash your hands  
frequently.**

POST AT THE OFFICE, AT THE ENTRANCE AND ON EACH FLOOR OF THE STRUCTURE, AND INSIDE THE BATHROOM

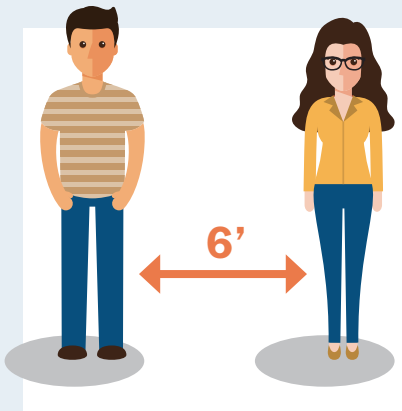
# Ajude prevenir o COVID 19 com distanciamento social



**Ligar / Facetime / conversar  
online com amigos e  
familiares.**



**Fique em casa o  
máximo possível.**



**Caso precise sair:**

- Não se reunir em grupos
- Manter 2m de distância um do outro
- Não se cumprimentarem dando as mãos, nem se abraçando



**E por favor continue  
lavando as mãos  
frequentemente.**

POST AT THE OFFICE, AT THE ENTRANCE AND ON EACH FLOOR OF THE STRUCTURE, AND INSIDE THE BATHROOM