



## Covid-19 Information

### Return to Work : Newark Office

1. I understand that I am not to attend the office if I, or any persons with whom I cohabit, are displaying any symptoms of Covid-19, and that I must self-isolate immediately 
  - New Continuous Cough
  - Temperature over 37.8 Degrees
  - Loss or Change to Taste or Smell
  
2. I understand that if I, or any persons with which I cohabit, are displaying any of the symptoms above that I am to report it immediately to a Director or Amanda Henson
  
3. I have a medical condition which defines my health status as '*Clinically Vulnerable*' or '*Clinically Extremely Vulnerable*' in relation to Covid-19 and have declared this.   
Please enter N/A if this does not apply to you.
  
4. I understand that I must use my swipe card to access / exit the office and that I must report into the following on a daily basis; 
  - Office Admin - General Attendance WhereaboutsI understand that if I am Working from Home / on Site on any day then I must also report into the following on each day that I am not in the office;
  - Amanda Henson - Covid-19 Health QuestionnaireThis will help us manage contact tracing should there be any Covid-19 cases within our workforce
  
5. I understand that I am to use the ..... door only in order to access and exit the building
  
6. I understand that I am to use the ..... toilet facilities only
  
7. I understand that I am to use the ..... kitchen facilities only
  
8. I understand which workstation I am to utilise whilst working within the office
  
9. I understand that DBS will be operating a 'Clear Desk Policy' and that all items are to be removed from my desk before I leave each evening to allow my desk to be cleaned
  
10. I understand that hand sanitiser, soap and antibacterial wipes are available throughout the building for my use
  
11. I understand that movement around the office should be restricted to essential purposes only
  
12. I understand that all internal doors are to be left open during working hours but should be closed upon exit if there is a fire
  
13. I understand that meeting rooms should only be used if booked and authorised in advance, and must not be used for adhoc purposes



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14. I understand that visitors are wholly discouraged until further notice. However, if there is a valid reason that a visitor must attend, I understand that I must gain permission from a Director in advance.

**All Visitors Must;**

- Confirm that neither they, or anyone with whom they cohabit, are displaying any symptoms of Covid-19 **before** entering the office
- Sign in / out with Reception
- Adhere to all office procedures including, but not limited to, handwashing, hand sanitiser, and social distancing

15. I confirm that I have viewed, and understand, the Covid-19 B+K Offices and Premises Induction - <https://vimeo.com/425942936/3cda2fcaa0>

16. I confirm that I have been provided with the DBS Covid-19 Pocket card and have read and understood the contents.

17. I understand the cleanliness of the office, and the welfare of those working within it, is the responsibility of us all and I agree that if I have any concerns I will raise them immediately with my Line Manager or a Director

18. Any other comments:  
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By signing below I agree that I understand the protocols and procedures that have been put in place and I am happy to work from the Newark Office.

Name: ..... Signed: .....

Date: .....

**Line Managers Signature:**

Name: ..... Signed: .....

\*Please note that Covid-19 is an ever-changing situation therefore updates to this induction will be issued when available.