

## Instructions to Complete Telework Pack in Writing

All employees seeking to work remotely for MSDH must **read and sign** the following three (3) documents in the Telework Packet:

### 1. TELEWORK AGREEMENT

- Page 1: Write date and Employee (“Workforce Member”) name in blanks near the top.
- Page 4: “Designation of Telework Workspace”: provide the description and address of where you will work remotely.
- Page 5: “Equipment, Supplies, and Department Assets”: Provide the types of *MSDH* items you wish to use while working remotely. **This can include any tech equipment and devices such as computers, laptops, cell phones, jump/thumb drives, etc. This can also include other MSDH property with an inventory number.**
  - Provide as much information in the table as possible for each item.
    - NOTE: Leave blank the “Date Returned” column
- Page 5: “Special Conditions and Additional Agreements”: Provide the types of *personal* tech equipment and devices you wish to use while working remotely. *Provide as much information to describe as possible, such as type of device, manufacturer, serial number, service provider, and model.*
  - Initials required from:
    - Employee (Workforce Member)
    - Office/Program Director or Regional Admin
    - OHIT Member (**designated by primary office location – See list below**)
- Page 7: Signatures required from:
  - Employee (Workforce Member)
  - Office/Program Director or Regional Admin
  - OHIT Member

**2. HAND RECEIPT OF STATE PROPERTY FORM 1134**

- NOTE: This is an official documentation required by the Office of the State Auditor.
- Fill in blanks for Workforce Member Name, Unit/Department, and Date
- Provide as much information as possible in the table for the same items listed in the “*Equipment, Supplies, and Department Assets*” Section on page 5 of the Agreement.
  - NOTE: Leave the “Date Returned” and “Responsible Person” columns blank.
- Signatures required:
  - Employee (Workforce Member)
  - Office/Program Director or Regional Admin
  - Responsible Person (same as Office/Program Director or Regional Admin)
  - *If using tech equipment or devices:* OHIT Member (designated by primary office location)

**3. ACKNOWLEDGMENT OF PRIVACY POLICY AND PROCEDURES MANUAL**

- Employee signature required.

**Assigned Office of Health Information Technology (OHIT) Members by Location**

<b>Location</b>	<b>OHIT Member</b>
Airport	Robin Butler
Atrium	Keith Junkin
County Health Departments/WIC	N/A – Normal operations
Highland Colony	Marcus Conway
Jackson Medical Mall	Albert Brown
Lefleur’s Square	Marcus Conway
Osborne Building	Jarrett Simmons and Dorthy Young
Plaza 1	Keith Junkin
Plaza 2	Keith Junkin
Rad Health/Pharmacy	Albert Brown
Regional Offices	Stephanie Hedgepeth
Starkville	Robin Butler
Thompson Lab	Charles Jackson
Underwood – Floor 1	Nick Creel
Underwood – Floor 2	Robin Butler
All Others	Dorthy Young