MERC

Health practices: Office spaces

April 24th, 2020

Executive summary

Common set of practices for offices

- Will be scalable for small business and large spaces (flexibility on how employers achieve 'core practices')
- Will be easy to communicate and executable
- Will not be cost prohibitive

Supporting documentation to be aligned with CDC guidelines. In case of any conflict between any of the foregoing guidance or requirements, the strictest shall apply.

There are a couple important considerations for office spaces

- The ability to work remotely is more likely for employees in offices and can be leveraged to help with phasing
- Unlike facility types with different shifts, many people will be entering the building at the same time in the morning so
 practices around staggering start times and spacing out entrance points will be important
- Offices do not have as many pre-existing strict safety precautions engrained in the culture (e.g., food safety, factory safety), so they may need to provide more signage and guidance to promote a healthy working environment

Across facility types, health practices fall into the following eight categories



Response owners and plan

Establish virus response team



2 Facility entry and health check protocols

Conduct health screenings, temperature checks, send sick employees home, restrict visitors/contractors



3 PPE requirements

What PPE is necessary in this environment? (Provide guidelines and PPE for different settings and roles)



4 Distancing

How do we ensure we are maintaining appropriate distance across the facility?



5 Cleaning

What are the cleaning protocols and how to we communicate these effectively to employees?



6 Case monitoring protocols

How do we ensure we can respond quickly to a potential case?



7 Facility/space temporary closure

What is our response plan? (e.g., Block off areas of exposure to allow appropriate deep cleaning)



8 Travel restrictions

How do we handle employee essential and personal travel?

Core practices ("must-haves"): Practices that can be implemented more broadly across different sized organizations

Next level implementation: Recommended additional practices that provide better risk mitigation (for better equipped facilities)

Offices can safeguard their facilities with health practices in the following focus areas

gories	Health practice overview		
Response owners	Establish team or roles		
and plan	Define scope of team (e.g., manage implementation of practices and protocols)		
	Communicate role of team and expectations to employees		
Facility entry and	Reduce congestion at start times and entry point(s)		
nealth check	Screen employee health/exposure		
protocols	Screen all essential visitors with similar protocol		
PPE requirements	Ensure PPE (face cover, hand sanitizer) is stocked		
•	Establish standard PPE protocol and distribution methods		
	Require facial coverings (follow public health specifications)		
	Provide guidance for PPE usage and reasoning		
Distancing	Increase general distancing between people		
	Limit common space use and operations		
	Stagger timing of movement within the building		
	Provide physical reinforcements (e.g., barriers, X's, one-way traffic flow) for distancing expectations		
	Response owners and plan Facility entry and nealth check protocols PPE requirements		

Categories	Health practice overview
5 Cleaning	Conduct frequent daily cleaning of all high touch areas and post protocols publicly
	Establish employee cleaning protocols
	Elevate daily and deep cleaning by 3rd parties
	Conduct routine checks for cleaning procedures
6 Case monitoring	Define protocol for symptomatic employees
protocols	Provide symptom checking and guidance to exposed employees
	Mark off and clean spaces identified in tracing
7 Facility pause/	Enforce appropriate shut down/ pause and cleaning protocol
	Communicate shut down protocol to employees
Travel restrictions	Restrict business and personal travel and have
	employees work from home if possible after travel

1: Response owners and plan (health practices)

Health practice overview	Core practices	Next level implementation for better equipped facilities		
Establish team or roles	Form team for ongoing COVID-19 safety preparedness management using a consistent set of protocols (note: small offices are still working to develop and will not be able to have people solely focused)	Assign employees to ongoing virus response team to ensure clear decision-making and accountability (sole primary focus)		
Define scope of team (e.g., manage implementation of practices and protocols)	Create and guide execution of health and safety plan that includes protocols and/or checklist for offices	Leverage a digital tool or dashboard to track success of protocols and opportunities for improvement		
	Build phased approach to return dates (if you can work from home, remain at home) – enables distancing, PPE management			
	Ensure adherence to safety protocols – conduct training, clarify protocols, informed by CDC, deploy personnel to necessary checkpoints (e.g., temperature recording)			
Communicate role of team and expectations to employees	Send notice (e.g., digital) to employees of team formation and who will be point of contact for questions	Conduct periodic (e.g., weekly, monthly) Q&A with representative of team to supply employees with updates in policy and operations		

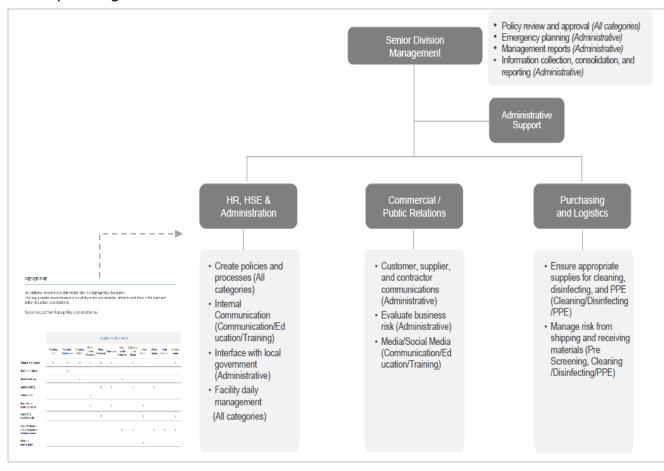
1: Response owners and plan (examples)

Establish team or roles

Decision Authority and Approvals Owner: [Insert owner] DRAFT APPROVAL & DECISION-MAKING OVERVIEW COVID-19 CRISIS PLANNING1 Decision Needed Primary Supporting Notes Map to Scenario Approver Approvers Planning Closure of 1 or more CEO CHRO + LT Follow Scenarios 1 – 4 Locations Lead for government (Impacted a. [Insert location] President Impacted Site (local, state, or Employee or 3rd [Insert location] federal) direction party), 10 (loss c. [Insert location] where provided of critical infrastructure) 2. Initiate CEO Emergency Scenario 5 (CEO Board Follow approved Succession Plan Members + CEO Emergency Impacted by CHRO/GC Succession Plan Virus) 3. Emergency Succession Scenario 5 Leverage existing Plan for LT Member succession plans to identify backup leaders by function 4. Mandatory or Voluntary CEO CHRO + LT Work with local Scenario 12, 13 Quarantine of Employees Lead for public health (Gov't Mandate to Impacted officials WFH) Site(s) Initiate Deep Cleaning of LT Lead for VP of Real Will follow Scenarios 1-4, 6, Potentially Impacted Site(s) Impacted Estate established Site(s) or their template and delegate protocol 6. Key Vendor Impact(s) LT Ops Lead Operations business continuity plans development 7. Public Disclosures re: GC CFO TBD based on Impact of CV (e.g., SEC disclosure re: risk factors, 8-K filings for material events) Changes to Crisis GC & SVP Updates to Compliance & Protocols will be published in Employee Relations Manager Toolkit and Communicated to Managers via HR Reps Symptomatic Employee Manager Follow Representative Symptomatic Employee Protocol in Manager Toolkit

Define scope of team (e.g., manage implementation of practices and protocols)

Example: Large/medium plan



2: Facility entry and health check protocols (e.g., pre-work, who is involved, check-in upon arrival) (health practices)

Health practice overview	Core practices	Next level implementation for better equipped facilities
Reduce congestion at start times and entry	Assign dedicated entry point(s) for all employees or groups (to reduce congestion at main entrance, to help with screening needs, and to help with tracing)	
point(s) (from vehicle to desk)	Provide visual indicators of appropriate spacing (e.g., lines or x's) outside building in case of congestion	
	Reduce entry congestion and ensure screening effectiveness through space and/or timing management (e.g., stagger start times for locations, 50/50 rotational schedules)	
Screen employee health/exposure (home, entrance)	Advise vulnerable workers and people with underlying health conditions of their right to continue to quarantine, and to draw down UI benefits instead of returning to work	Check on outside office interactions (e.g., vulnerable family members, secondary jobs – firefighter, volunteer, EMT) and have employee stay home if possible
	Conduct common screening protocol, at bare minimum conduct symptom and contact questionnaire (should also consider	Make temperature and screening procedure visible to ensure employees feel safe to enter the building
	temperature check, overall health status check, screening questions at home or office/parking entrance) and keep pulse on CDC guidelines	Provide guidance on stay home while sick, hygiene and separation
	Instruct symptomatic employees to remain home	Leverage digital application to record questionnaires and temperature
Screen all visitors with similar protocol	Develop visitor screening protocols - limit visitors as much as possible, if absolutely necessary apply equal standard or more stringent standard as employees	Ensure visitors schedule their visits and attain approval before traveling to the office (e.g., conduct visitor questionnaire virtually and deny visitors who do not meet requirements)
	Create delivery area and protocols to encourage as much no- contact delivery as possible	

2: Facility entry and health check protocols (e.g., pre-work, who is involved, check-in upon arrival) (examples)

Screen employee health/exposure (home, entrance)

Questi	ons:
Enter t	he team member EmpliD (If KBS, Paramount or Serv U, enter name) * Required Response
	have any new and unusual of the following symptoms: fever greater than 100.4 degrees F, cough, difficulty ing or shortness of breath, diarrhea, chills or sore throat? * Required Response
	Yes
	No
If a tou	chless thermometer has been provided to your store, confirm the team member's temperature below.
Select	N/A if no thermometer has been provided * Required Response
	Yes (Temperature is > 100.4° F)
_	
	No (Temperature is <= 100.4° F)
100	No (Temperature is <= 100.4° F) N/A
□ Have y	
Have y	N/A ou had or have you been notified that you have had close contact with a person that has been diagnosed with
Have y	N/A ou had or have you been notified that you have had close contact with a person that has been diagnosed with 19 through a positive test result? * Required Response (does not apply to Pharmacists or Pharmacy Techs)
Have y	N/A ou had or have you been notified that you have had close contact with a person that has been diagnosed with 19 through a positive test result? * Required Response (does not apply to Pharmacists or Pharmacy Techs) Yes
Have y	N/A ou had or have you been notified that you have had close contact with a person that has been diagnosed with 19 through a positive test result? * Required Response (does not apply to Pharmacists or Pharmacy Techs) Yes No
Have y COVID	N/A ou had or have you been notified that you have had close contact with a person that has been diagnosed with 19 through a positive test result? * Required Response (does not apply to Pharmacists or Pharmacy Techs) Yes No ou travelled internationally or domestically (i.e. air travel or cruise) within the last 14 days?
Have y COVID Have y * Requ	N/A ou had or have you been notified that you have had close contact with a person that has been diagnosed with 19 through a positive test result? * Required Response (does not apply to Pharmacists or Pharmacy Techs) Yes No ou travelled internationally or domestically (i.e. air travel or cruise) within the last 14 days? ired Response (does not apply to Pharmacists or Pharmacy Techs)
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Screen all visitors with similar protocol

1. Visitors

- No visitors will be allowed into Family of Company spaces. This includes the following:
 - Job candidates
 - Clients signing documents
 - o Community partners & mentorship programs
 - External speakers and presenters
 - Tour groups
 - Friends and family

Vendors

- Essential Vendors
 - These vendors provide business critical services to the Family of Companies. In most cases, our essential vendors have been assigned permanent identification badges which provide access around our spaces according to need. These would include:
 - Delivery personnel (USPS, UPS, FedEx, DHL...)
 - Office supply vendors (print, paper...)
 - Food vendors
 - Construction workers (for relevant locations)
- Non-Essential Vendors
 - Non-essential vendors do not currently provide business-critical services to company.
 Meetings with these individuals should happen virtually.
 - Sales pitches
 - Potential partners
- · Healthcare Collective

3: PPE requirements (e.g., what do you need before walking in facility) (health practices)

Health practice overview	Core practices	Next level implementation for better equipped facilities
Ensure PPE and safety supplies (facial coverings,	Make sure office is stocked with soap and hand sanitizer (hand sanitizer with over 60% alcohol)	Ensure PPE (e.g., sanitizer, masks) are on order to provide proper lead time for refills
hand sanitizer) are stocked	Ensure that team members have access to facial coverings (surgical masks or cloth masks made to public health specifications)	Procure contactless thermometers , facial coverings, sanitizer for employees etc.
Establish standard PPE protocol and distribution	Facial coverings are required for all employees and should be presented by employer or employee before employees approach the facility entrance	Hand out facial coverings for all professional personnel (average 2 masks/week), (e.g., surgical masks, cloth masks, cloth coverings)
methods	check point. Establish distribution plan for handing out and ensuring facial coverings	Establish mask pick-up location in the building for people not present during Monday distribution or who need replacement (provide reason)
	(by select member of team or during Monday building entrance screening)	Record and track who has received their weekly masks
Require facial coverings	Require face coverage (e.g., surgical masks, cloth masks) in shared spaces (e.g., during meetings and informal conversations, restrooms, moving through shared spaces). Mask guidance includes surgical masks , cloth masks , and cloth face coverings (must follow public health specifications)	
	Increase handwashing accessibility (hand sanitizing when hand washing is not possible). E.g., prop restroom doors open to reduce contact points	
Provide guidance for PPE usage and reasoning	Remind employees to bring PPE home and back each day (e.g., security guard reminder and/or signage at exit(s))	Conduct digital training prior to return to work on how to properly use PPE
3	Communicate guidance on required vs optional PPE situations	Provide cleaning instructions for PPE to employees (leverage CDC
	Educate employees on appropriate use of PPE (new or existing training/ signage/ communication for donning and doffing masks, glove protocols, cleaning up after use, proper hand washing)	guidance)

3: PPE requirements (e.g., what do you need before walking in facility) (examples)



Ensure PPE (facial coverings, hand sanitizer) is stocked

Cloth mask



Surgical mask



Require facial coverings

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Per	sonal Pro	tective Equip	oment (PF	PE) Required		
	Safety Glasses	Surgical OR Procedure Mask	Gloves (nitrile)	Protective Goggles OR Safety Glasses AND Face Shield	Respirator (N95)	Protective Gown OR Cloth Coveral
Member of Emergency Response Team in continuous close contact with an employee who has become ill at work	Req	Req	Req	Req	Opt	Req
Employee who becomes ill at work	Req	Req				
Employee who has recovered from COVID and has residual cough	Req	Req				
General Cleaning	Req	Req	Req			
Individual conducting on-site thermal scanning for employees who do not know their temperature	Req	Req	Req	Opt		Opt
Employees who must work in close quarters (< 6ft or 2m)	Req	Req				
When travelling in Magna arranged transportation on buses / vehicles		Req				
Shipping & Receiving (interaction with drivers)	Req	Opt	Req			
Decontamination of affected areas (Follow chemical specific requirements for PPE)	Req	Req	Req	Req		Req
Security Personnel		Opt	Opt			
Essential Visitors		Fallery Control	Distancian	nd Usual PPE Required	D. Facilit.	
Reception/Entry Area		Follow Social	unstancing a	nd Osdai FFE Required	by Facility	
Public Areas / General Plant Area/Offices						
Food Preparation Staff in Kitchen	Req Req Req					
	Close Kitchen Temporarily where possible. If not, clean after every use					
Off-site Visits (Customers Sites)	Follow Site Requirements					
Company Travel	Follow Regional Travel Advice					

https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/diy-cloth-face-coverings.html

Provide guidance for PPE usage and reasoning

Coronavirus ("COVID-19") Preparedness: Critical Onsite Team Member Guidelines

The health and wellbeing of our team members remains of utmost importance to us. We continue to monitor evolving CDC guidelines and state directives on best practices to maintain a healthy work environment. Below are our updated guidelines for our critical onsite team members, effective immediately until further notice.

HAND WASHING; COUGHS AND SNEEZES:

You can help minimize the spread of COVID-19 by practicing good hygiene etiquette.

- Wash your hands often with soap and water for at least 20 seconds (sing "happy birthday" twice)
 especially after you have been in a public place, or after blowing your nose, coughing, or sneezing.
 A helpful guide on proper hand washing can be viewed here:
 https://www.youtube.com/watch?v-g9144-not4Fo&feature-voutu.be
- If soap and water are not readily available, use a hand sanitizer that contains at least 60% alcohol. Cover all surfaces of your hands and rub them together until they feel dry. Hand sanitizer can be found in common areas on the floor such as the kitchen.
- 3. Avoid touching your eyes, nose, and mouth with unwashed hands.
- Remember to always cover your mouth and nose with a tissue when you cough or sneeze or use the
 inside of your ellow. A helpful guide can be viewed here:
 <a href="https://www.wutube.com/wwist-24e-ellows/wwist-24e-ellows/www.always-alwa
- 5. Throw used tissues in the trash.

MASKS AND GLOVES:

- We are requiring all team members to wear a mask that covers your nose and mouth or other face covering (scarf, bandana) while you are in the office.
- You will be supplied with a mask to wear during your workday. If you need a face mask, reach out to your team leader to get one for you.
- You can supply your own mask if it is in line with the CDC's guidelines. Here are some helpful tools on how to make your own mask if you wish:
- a. https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/diy-cloth-face-coverings.html
- b. https://www.youtube.com/watch?v=tPx1vgvJqf4&feature=youtu.be

https://www.cdc.gov/handwashing/when-how-handwashing.html

4: Distancing (health practices)

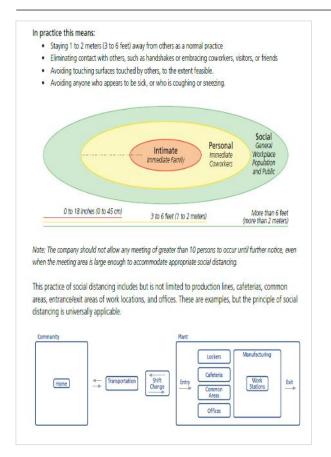
Health practice overview	Core practices	Next level implementation for better equipped facilities	
Increase general distancing	Ensure employees stay 6ft apart using appropriate visual cues – tape,	Provide specifics on office and home practice (optional guidance)	
etween people	floor markings, tool to reserve seats, one directional stairwells [map zones]	Send policy updates to employees through company	
	Recommend vulnerable populations (or if you live with someone at risk) to work from home or establish separate working hours (note: do not	communication channels (e.g., CEO guidance and/or building/facility guidance)	
	ask for specific reason)	Deploy training and support for any mandated requirements from the	
	Prohibit handshakes, and other high-risk behaviors	State	
	Minimize use of high touch items where possible (e.g., leave doors open)	Leverage technology to help employees to reserve work space to limit overall movement	
Limit common space use and operations	Limit access to common spaces (kitchens) – close kitchens in short-term (supply boxed food via delivery or pick-up points to limit traffic, reduce cash payments, encourage employees to eat at their desks)	Limit capacity in restrooms (prop doors open when possible to reduce contact, close off alternative stalls, leverage door markers, other methods TBD)	
	Turn off water fountains (add note that they are inoperative) and ice makers	Install touchless waste bins	
Stagger timing of movement within the building	Stagger start times and meal times (e.g., 15min) to limit clogged doorways (companies can designate different access points for individuals to enter)	Implement rotational shift schedules and stagger back to work based on Work From Home capabilities	
	Encourage eating at their workstation/desk.	Make stairwells and entry points one way with markings on the ground and proper training/signage provided	
Provide physical	Install temporary (e.g., cardboard) barriers between seats	Establish barriers between workstations and cafeteria tables	
reinforcements (e.g.,	Reduce capacity in open working space and conference rooms or lock	Place X's in elevators to limit capacity	
barriers, X's) for distancing	completely (e.g., remove chairs or tape them off)	Mark the ground to enforce one way traffic through hallways, stairs,	
expectations	Only allow certain seats to be filled (remove seats) to ensure 6ft	and/or doorways and prop doors open to reduce congestion and	
	Prohibit meetings that may interfere with social distancing or create unnecessary movement throughout the office (e.g., lock or limit use of conference rooms as a meeting space)	contact risks	

4: Distancing (examples)

Increase general distancing between people

Limit common space use and operations

Provide physical reinforcements (e.g., barriers, X's) for distancing expectations



Social Distancing During Lunch Break

Manage lunch breaks to provide social spacing and proper hygiene. Stagger start and end times to limit the amount of people within the lunch area at a given time.

Recommended

For plants with less than 200 on a shift example:

Separate the plant into two groups

- Alternating days or weeks Group A will be asked to go to their car/truck for lunch, allow 5-10 extra minutes for travel time to incent employees to go to their vehicle (if reasonable and practical).
- Group B will be able to use the lunch roomlimit entry to a certain number and all others will
 go to the vehicle. In effect employees can chose which option they prefer.

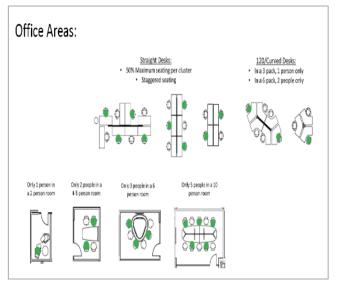
1st Break Example

- Row 1 Teams 1 to 4 10:00 to 10:20 a.m.
- Row 2 Teams 5 to 8 10:30 to 10:50 a.m.
- Row 3 Teams 9 to 13 11:00 to 11:20 a.m.

*For plants with over 200 employees, the number of times must be increased

Plants with full service Cafeterias

- · Do not allow any self-service in full cafeteria service
- Place a permanent mark on the floors to ensure proper distance (anywhere where there is a line)





5: Cleaning (e.g., daily cleaning routine) (health practices)

Health practice overview	Core practices	Next level implementation for better equipped facilities
Conduct more frequent daily	Disinfect site work stations and common surfaces prior to site reopen	Set HVAC to ensure max air circulation (40% outside air)
cleaning of all high touch areas	Shut down area (e.g., ice machines) if adequate cleaning cannot be	Sanitize microwave and buttons after use and other communal items
and post protocols publicly	provided	Investigate use of ultraviolet cleaning technology for high touch-point areas (e.g., door handles, elevator buttons)
Establish employee	Encourage employees to clean items prior to entry (e.g., phones)	Educate employees on cleaning protocols for personal items
cleaning protocols	Provide disinfecting wipes with EPA-approved emerging viral pathogens and require employees wipe down work station 2-3 times daily - employees responsible for wiping down work area (provide approved sanitizing wipes)	Digital reminders to employees to clean appropriate reminders
	Encourage employees to wash hands frequently (when not possible, increase hand sanitization availability). Allow time/supplies to do so	
	Post physical signage specific to personal hygiene (wash hands, cover cough/sneeze, don't touch face) and disinfection	
	Minimize shared items (e.g., markers, utensils); if items must be shared (e.g., remote controls, shared storage, whiteboards), establish cleaning protocols for before/after each use	
Elevate daily cleaning and deep cleaning by 3rd parties	Designate cleaning protocol for all areas and ensure visibility, meeting rooms, break areas, kitchens etc. 2-6x/day (frequency	Implement clean desk policies at the end of each day to ease cleaning procedures
3.,	depends on threat level and touch-point frequency – e.g., water stations, restrooms cleaned more)	Block off conference room time for daily cleaning
	Communicate increased cleaning schedule to facilities and janitorial	Conduct deep clean if a presumed case is identified
	employees and verify janitorial companies exercise proper protocols	Consider more advanced material requirements given the extent of
	Create specific protocols for shared spaces, to indicate when facilities have been used	cleaning requirements
Conduct routine checks for cleaning procedures	Monitor office cleanliness weekly with checklist from virus response team	Monitor office environments for compliance daily (building owners to check in with manager or virtual checks)

5: Cleaning (e.g., daily cleaning routine) (examples)



Conduct more frequent daily cleaning of all high touch areas and post protocols publicly

Establish employee cleaning protocols

Elevate daily cleaning and deep cleaning by 3rd parties

Conduct routine checks for cleaning procedures

2. Cleaning

 Implement a mildly enhanced cleaning service, substitute cleaning solutions to better attack virus (with bleach or other ingredients that state EPA approved emerging viral pathogens or Clorox 360 machines), focus attention on communal, public and highly trafficked areas and increase frequency of cleaning to the following minimum standards.

3. Restrooms:

- Counter tops, sinks, faucets, toilets, urinals, stalls, doors. Light switches, soap dispensers, sanitary dispensers
- Recommended frequency 1x daily

4. Break Areas:

- Tabletops, chairs, benches, trash receptacles, buffet lines, registration stations, doors, vending machine stations, refrigerators, handles, doors, light switches, napkin holders
- Recommended frequency –1x daily

Common areas:

- Concierge stations, elevators, stairs coffee machines, phones, light switches, doors.
- Recommended frequency 1x per day

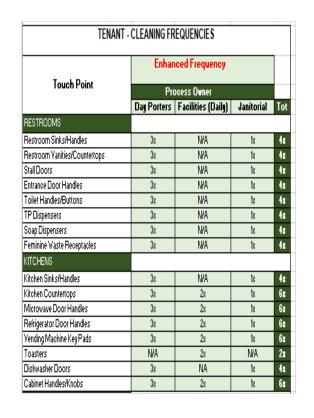
6. Conference rooms:

- Table tops, chairs, phones, white boards and utensils, light switches, doors
- Depending upon the face to face guideline recommendation, conference room use may be at a minimum. Recommended – 1x per day

Offices:

- . Table tops, chairs, key boards, phones, light switches, doors
- Recommended frequency 1x per day









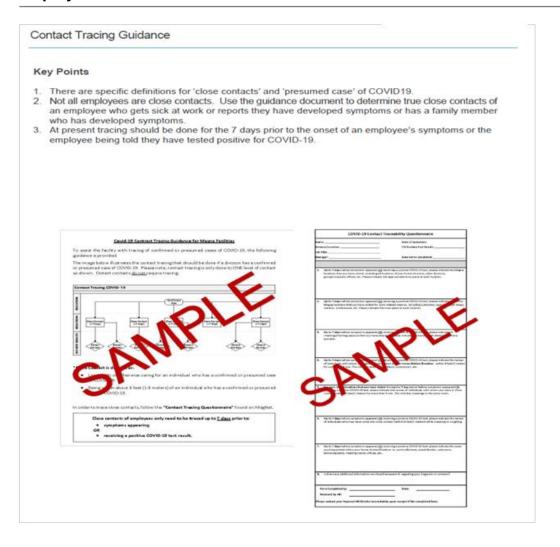


6: Case monitoring protocols (health practices)

Health practice overview	Core practices	Next level implementation for better equipped facilities
Define protocol for	Ensure employees with symptoms are sent home	Provide work from home guidance and support for
symptomatic employees	Create policies to encourage workers to stay home or leave facility (e.g., temp paid sick leave if medically	employees (e.g., trainings for video conferencing or installation links via email)
	advised to quarantine) when feeling sick or when in close contact with a confirmed positive case	Check in periodically on symptoms and work ability
	Establish clear reporting process for any symptomatic or positive test employees (e.g., notify company leaders, maintain central log)	
	Require a doctor's note release (for returning to work) if an employee has laboratory confirmed COVID-19.	
Provide symptom checking and guidance to exposed employees	Initiate cleaning and communication protocols when employees are sent home with symptoms (e.g., inform team members/manager of potential exposure)	Conduct tracing procedures for 3-7 days prior to onset of employee symptoms (based on where employee was and whether PPE was worn)
		Communicate procedures with employees
Mark off and clean spaces identified in tracing	Clean appropriate areas based on tracing procedures and CDC recommendations— areas with contact are shut down, third party company cleans	If appropriate, leverage third-party cleaning services

6: Case monitoring protocols (examples)

Provide symptom checking and guidance to exposed employees



Mark off and clean spaces identified in tracing

Level	Pre- cursor	Actions	Owner	Timing
No Identifiable Exposure (No Risk)	None	Normal Daily Cleaning by Janitorial Staff, including expanded disinfecting of commonly touched surfaces Increased individual workstations cleaning following DTE Workspace Hygiene recommendation (attached)	Employees Janitorial	Daily
Secondary Exposure (Low Risk) An employee exposed to someone who was exposed to COVID-19	Supervisor Notified	Disinfect all work surfaces that employee may have contacted Disinfect all high touch surfaces in areas where employee has been during the current work day	Employees Janitorial	Immediate
Direct Exposure (Med Risk) An employee was exposed to someone with a confirmed diagnosis of COVID-19	Supervisor or Medical Notified	Close off all area(s) where employee/ person has been working Disinfection Contractor to disinfect all high touch surfaces in affected areas Disinfection will be done utilizing Disposable Gloves Increase fresh air ventilation mix* After disinfection the area(s) would then be available for re-entry Provide disinfectant to employees contained within the area for cleaning	3 rd Party	Immediate
Single Confirmed Employee (High Risk) Any confirmation of one employee being diagnosed with COVID-19	Medical Notified	Close off affected area(s) where employee/ person has worked for 24 hours, if feasible, before disinfecting Disinfection Contractor to conduct deep disinfection including all high touch surfaces in affected areas Disinfection will be done utilizing Disposable Gloves and Gowns Increase fresh air ventilation mix* Provide disinfectant to employees contained within the area for cleaning After disinfection the area(s), re-entry determined by contractor/ ICS	3 rd Party	Delayed 24 hours
Multiple Confirmed Employees (High Risk) Confirmation of two or more employees diagnosed with COVID-19	Medical Notified	Close off affected facility(s) where employee/ person has worked for 24 hours, if feasible, before disinfecting Conduct disinfection per single confirmed employee diagnosis above	3 rd Party	Delayed 24 hours

7: Facility/space temporary closure (e.g., clear area if someone comes to work sick) (health practices)

Health practice overview	Core practices	Next level implementation for better equipped facilities
Enforce appropriate shut down/ pause and cleaning	Send potentially exposed people home if there was a positive case in the building	Establish situation room representatives (HR, security, communications) to prepare for evacuating or closing
protocol	Temporarily close appropriate locations in the building down for deep cleaning (enforce appropriate amount of shutdown time) if there was a confirmed positive case (before reopening: conduct deep cleaning and check in with employees having direct contact)	facility
Communicate shut down protocol to employees	Communicate potential exposure or positive cases, while maintaining employee privacy	

8: Travel restrictions (health practices)

Health practice overview	Core practices	Next level implementation for better equipped facilities
Restrict business and personal travel and have employees work from home if possible after travel	Reduce risk from employees, customers, vendors by restricting travel (air, public transit) to only essential travel (implement administrative controls - prevent purchase of air travel until approval)	Require 14 day quarantine after returning from personal travel (confirm with manager upon return) Require work from home or PTO after voluntary travel or large conference attendance
	Permit business critical air travel (and public transport in some cases) only after receiving appropriate approval	