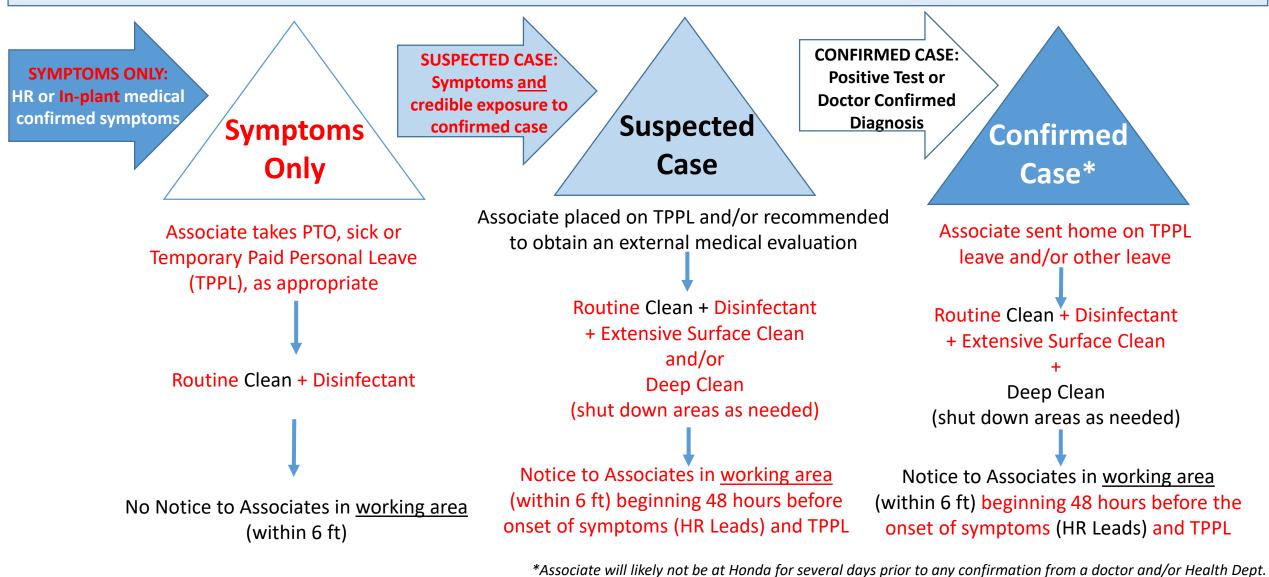
Purpose: Clarify action and notification if symptoms, suspected case or confirmed case



Focus is on exposure prevention

### Cleaning and Communication Plan

#### Purpose: Clarify Routine, Targeted, Extensive Surface, and Deep Clean Strategies

Level	Who	What	When	Why	How	Training level	Personal Protective Equipment	Statement
0	Associates	Routine cleaning under Draft COVID 19 condition.	All day, every day	Assumption that all commonly touched surfaces are contaminated.	Commercially available disinfectants and surface wipes	Hazard Communication	Per Safety Data Sheet or risk assessment	All cleaning should be done with the intent to disinfect. Bleach solutions can also be used. -50-100 ppm for 10 min or
1	Associates or In-house Cleaning Services	Targeted clean with disinfectant product.	Symptoms only Symptoms only -any case where last surface contact is >72hrs	Kills germs and viruses on surfaces	Commercially available disinfectants and surface wipes; or Bleach solutions: 2100 ppm for 30 seconds	Hazard Communication	Per Safety Data Sheet or risk assessment	Narrow scope cleaning based on associate's work area
2	In-house Cleaning Services	Extensive surface clean	or Suspect Case Confirmed Case*	Kills emerging viral pathogens on surfaces.	EPA approved disinfectants	Hazard Communication for non-routine tasks	Per Safety Data Sheet or risk assessment	<ul> <li>-narrow scope cleaning based on source tracking of the associate for 48 hours before onset of symptoms.</li> <li>-fogging may be necessary in this situation when associate interactions are not known</li> </ul>
3	Outside contractor or Specialized Team	Deep clean	or Suspect Case Case*	Kills emerging viral pathogens on surfaces.	EPA approved disinfectants Fogging, misting, or other	Hazard Communication for non-routine tasks	HAZMAT	Based on source tracking of the associate for 48 hours before onset of symptoms

Follow Strategies Based for Different Types of Cleaning Required

## Associate exhibits symptoms at work

Associate believes they were exposed to COVID-19 and they are at work Associate believes they were exposed to COVID-19 and is not at work

- 1. Associate notifies their supervisor (Supervisor notifies HR or Company Medical)
- 2. Associate goes to Company Medical or offsite clinic
- 3. Company Medical/Offsite Clinic follows established CDC protocol
  - If not suspected case, associate returns to work when feeling better per normal practice. Follow Company Attendance and Leave Policies.
  - If suspected or confirmed case Infected Associate is sent home on New Temporary Paid Personal Leave (TPPL) and converts to another leave if applicable or works remotely
    - Follow steps 4-8

#### Suspected or Confirmed Case:

- 4. Options:
  - Routine clean
  - Target surface clean with disinfectant
  - Extensive Surface Clean
  - Deep Clean
- 5. Infected Associate follows Company leave policies
- 6. HR activates associate/contingent notification protocol prepared notice letters and places close contacts in quarantine.
- 7. Associates in quarantine are notified of results, if known.
- 8. Infected Associate returns to work if:
  - Medically released, and/or
  - Recovered
    - 7 days have passed since symptoms first appeared, and
    - At least 72 hours have passed since:
      - No fever without the use of fever-reducing medications, *and*
      - Improvement in respiratory symptoms (e.g., cough, shortness of breath).

#### Key point for front line leaders: notify HR or Medical

## Key Steps to Take if Associate Believes They Have Been Exposed to COVID-19

Revised 4/3/2020

Associate exhibits symptoms at work

Associate believes they were exposed to COVID-19 and they are at work

#### Associate believes they were exposed to COVID-19 and has not been at work since exposure

#### **Suspected Case:** Potential Credible Exposure

- 1. Associate notifies their supervisor (Supervisor to notify HR or Company Medical)
- 2. Associate contacts HR or in-plant Medical
  - HR or in-plant Medical asks credible exposure questions

#### Credible Exposure

#### HR Credible Expose Questions:

- 1. Have you traveled outside the United States in the past 14 days? (for business or personal travel)?
- 2. Have you been in close physical contact with anyone that has traveled outside the United States in the past 14 days?
- 3. Have you been in close physical contact with anyone who has been confirmed or is displaying symptoms of COVID-19 in the last 14 days?
- 4. Do you have any other reason to believe that you were exposed to COVID-19 by other means? HR is to exercise sound judgement and consider the circumstances to determine appropriate course of action.
- 3. If credible, associate is a suspected case placed on New Temporary Paid Leave or works remotely (14 calendar days)
  - Follow steps 4-8

#### Suspected or Confirmed Case:

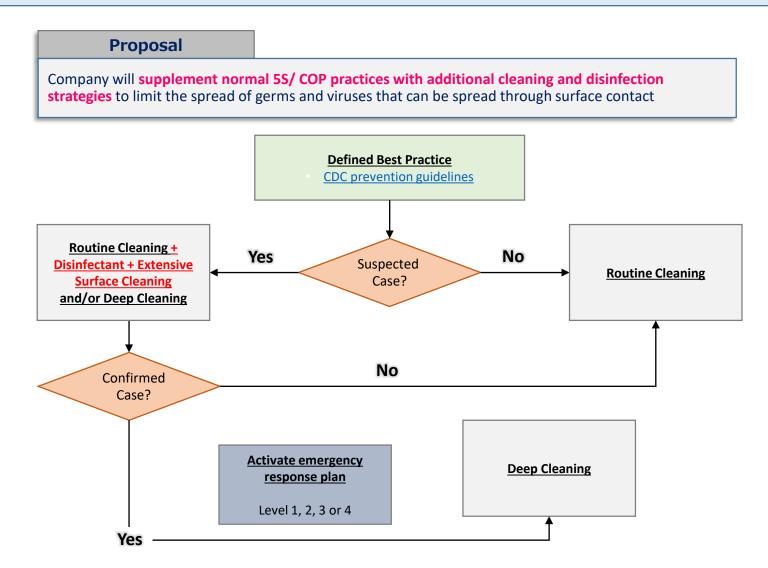
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      - No fever without the use of fever-reducing medications, *and*
      - Improvement in respiratory symptoms (e.g., cough, shortness of breath).

### Key point for front line leaders: notify HR or Medical

# Appendix...Additional Detail

## Additional Detail...Action Plan

#### Purpose: Cleaning and disinfection strategies for COVID-19



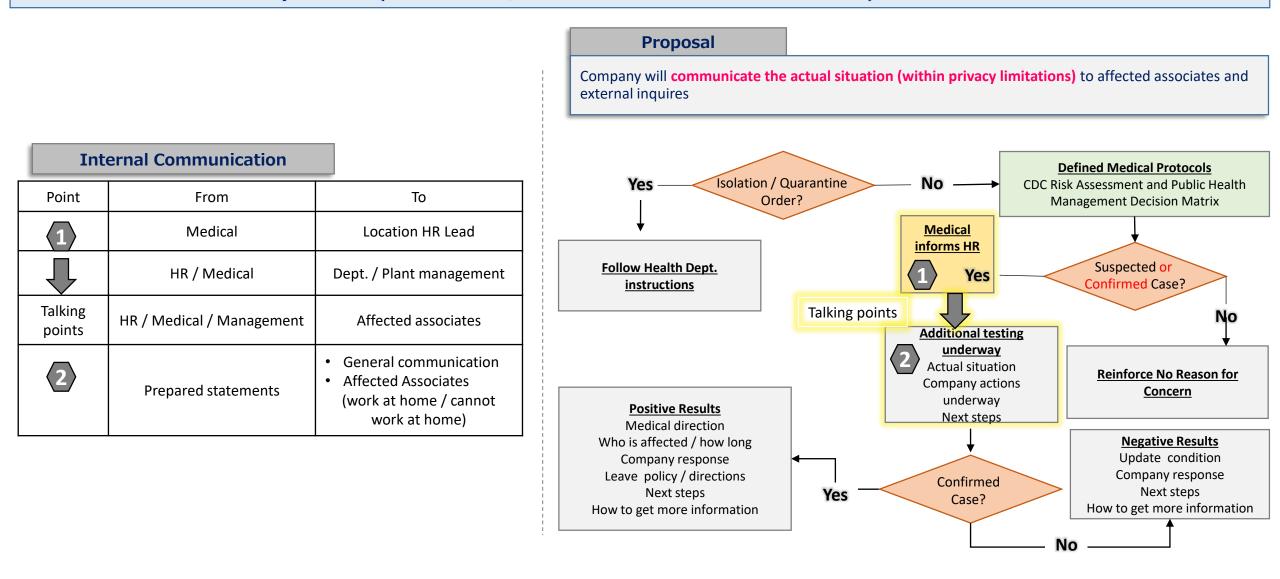
#### Cleaning / disinfection scope and frequency increase with escalation

## Additional Detail...Communication Plan Clarified 3/17

Revised

4/1/2020

#### Purpose: Pre-plan internal / external communications due to exposure or illness.



HR / Medical / Leadership consensus on action/talking points leading to prepared statements

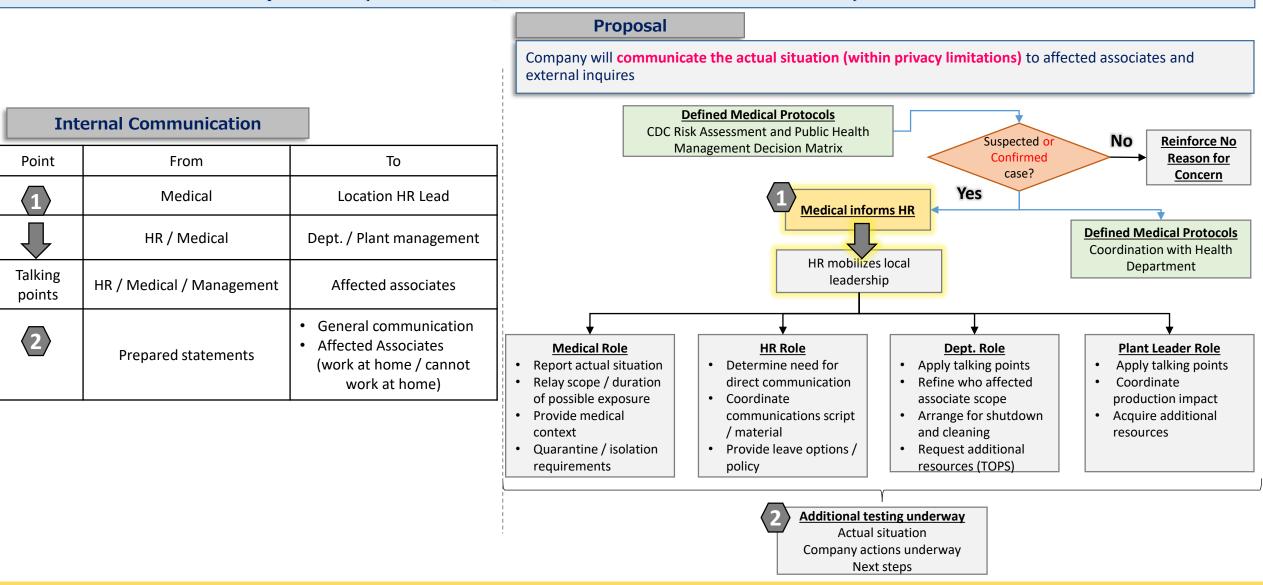
## Additional Detail...Communication Plan

Revised

4/1/2020

New 3/17/2

**Purpose:** Pre-plan internal / external communications due to exposure or illness.



Utilize multiple communication methods at specific trigger points