

# Return to Work Plan

Updated April 30<sup>th</sup> 2020

# Return to Office Considerations

## Background and Assumptions:

- Risk of COVID Exposure to continue for 6-12+ months
- Group meeting restrictions & common area distancing and hygiene requirements may continue indefinitely
- Increased remote work requests and virtual meeting expectations to continue beyond pandemic period

Consideration 1: Designated Essential Business that *requires* onsite support  
or  
Stay at home orders lifted

Consideration 2: Safe Work Plan and COVID Response Team intact  
and  
Screening/Cleaning Supplies on hand

Consideration 3: Downward Daily Case Trend - continued decline for 2 weeks in each operating area  
and  
Area hospitals not operating beyond capacity for COVID treatment

For use in  
determining shift  
to Phase 2

Consideration 4: Testing available to monitor continued exposure

For use in  
determining shift  
to Phase 2/3

# Phased Approach for Return to Office

## Phase 1

Goal: Safe Work Plan in place and operationalized to allow access to allow *voluntary* onsite work or *occasional* office access.

## Phase 2

Goal: Safely accommodate traditionally *in-office teams* while monitoring and managing COVID risk

## Phase 3

Goal: *Return to normal* operations; Safely accommodate travelling personnel and individuals with continuing risk factors

## Actions / Status

### Critical Requirements:

- Thermometers
- Onsite health check screening
- Use of approved face masks

### Critical Requirements:

- Sanitation supplies
- Onsite Screening Management
- Broader COVID testing availability

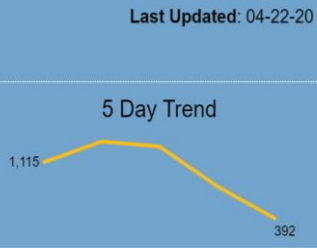
### Critical Requirements:

- Low risk of resurgence

# ODH Dashboard Case Trend Indicator

## COVID - 19

### Cases



### Deaths



### Hospitalizations

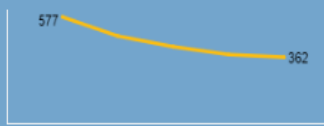


### ICU Admissions

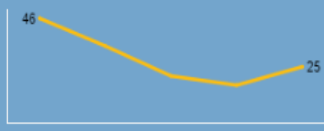


Last Updated: 04-27-20

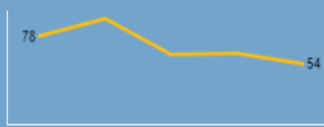
### 5 Day Trend



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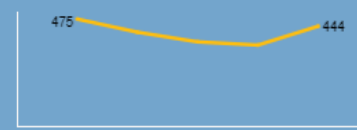


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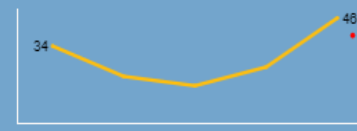


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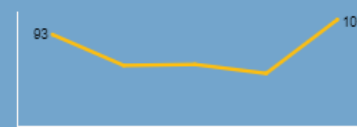
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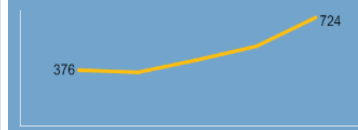


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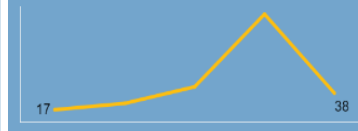


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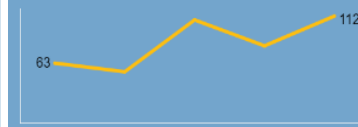
### 5 Day Trend



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### 5 Day Trend



### 5 Day Trend



## Week of April 27th

### *Return To Work Planning*

#### Phased Return to Work Plan

STATUS: Draft schedule developed; plan integrates risk-based approach based on known risk factors/exposure  
Leaders to provide initial input on critical/required Phase 2 office personnel

#### Updated Response Plan

STATUS: Contract Tracing Approach developed  
Determine ability to redeploy to remote work environment if required by Response effort

#### PPE Availability and Use

STATUS: In process of procuring additional supplies to support return to office plans (Gloves, Masks, Hand Sanitizer)  
Masks Required while in facility starting May 1  
Daily KN95 issued for warehouse personnel  
Employees to bring washable facemask; If not available, PS will provide one for weekly use

#### COVID Response Team:

STATUS: COVID Response Team to be established to support communication, enforcement and response policies.  
Team: Robert S., Matt. Weisenburger, Kelly K., Kathleen Hinz, Onsite Screener, Nick Kalain, Tony Campbell

#### Employee and Visitor Screening Protocols:

STATUS: Employee Office Access requirements in place  
Screening Approach – Self Check for limited onsite Staff;  
Plans to move to onsite daily screening upon entry as start of Return to Office  
Office access hours (with onsite screening availability) 7:30a-1:30p

## Week of April 27th

	<i>Return To Work Planning</i>
Workplace Hygiene & Cleanliness	
STATUS:	Sanitization provider contracted thru June 2020; Sanitization Standards in place(CDC List N approved supplies) Cleaning service frequency maintained Distancing requirements for office workstations (12ft+ distancing during Phase 1)
Common Areas & Equipment	
STATUS:	Sanitization routine for specific equipment confirmed. COVID Occupancy Limits established for common areas to maintain 6ft distancing requirements. Meeting Space and Lounge/Bistro space layout reconfigured to support occupancy limits/distancing Required washing of hands when entering coffee/kitchen areas
Training/Communication of Return procedures	
STATUS:	Building Posters to be established for exterior of building providing notice to Employees and Visitors Company-wide communication issued regarding Safe Work Plan procedures Screening workflow and isolation room protocol to be established.
Testing Availability:	
STATUS:	COVID testing in OH is limited & prioritized for 1) Symptomatic individuals and Healthcare Workers 2) At risk populations and First Responders with Symptoms Monitoring availability of broad based testing from Managed Care Networks, Lab Services, Hospitals and area treatment centers, Retail Pharmacies, and mail order/bulk purchase kits. Antibody testing available, Infection tests limited
Travel Limitations	
STATUS:	Essential Travel to provider/supplier locations follow host site requirements; Research regional stay at home requirements or travel limitations PPE Distribution Plan for travelling associates needed Essential business meetings should occur in a business office, non-care facility or alternative meeting space

# Employee Building Access & Health Check Procedures

## DAILY SELF-CHECK REQUIREMENT:

1. Daily Screening. Until further notice by the Company, each day before entering the office, all employees must:
  - (A) Self-check their temperature at home with a thermometer; AND
  - (B) Self-monitor for COVID-19 symptoms, e.g., shortness of breath, fever, dry cough, sore throat, chest pain, etc; AND
  - (C) Comply with established screening & reporting requirements onsite

**\*Employees returning to office for the first time may be asked to complete screening onsite**

2. For Those Without Thermometer. For those employees without a thermometer at home, such employees must agree to screening requirements which include taking temperatures with contactless thermometer each day at the main entrance before entering. Before using the thermometer, take one of the provided disinfectant wipes, and sanitize the thermometer before and after each use.
3. All Employees Must Use a Mask while in the Facility. If you are not prepared with a mask you should not enter the facility. Contact your manager or a member of Human Resources.
4. Notify Manager of Fever or Symptoms; Not Permitted to Enter. Employees who show a fever of 100.4 or above or other symptoms of COVID-19 (currently or in the last 14 days), must notify their manager and are not permitted to work in the office; such employees should work from home unless symptoms do not allow the employee to do so.
5. Reporting Requirements for Travel and other risks. Employees who, in the prior 14 days, (a) have been around others with COVID-19 symptoms, (b) travelled outside of state, (c) used mass transit, or (d) have been part of any large gathering of 10 or more people, or (e) or been in close proximity with or provided care for someone diagnosed with COVID-19, or been in close proximity w/ a COVID caretaker (e.g., nurse/doctor), must notify their manager and should work from home (unless otherwise approved by COVID Response Team)

# Visitor Building Access & Health Check Procedures

## PRE-APPROVAL AND SCREENING REQUIREMENT FOR ALL VISITORS:

1. Visitor Pre-Approval Required. Until further notice, **ALL** visitors (all guests, customers, contractors, service personnel, job candidates, etc.) must be approved in advance by COVID Response Team before they are permitted to enter the building.

***\*NOTE: If a visitor is not approved are not permitted to enter the building; please take responsibility for your guests and ensure IN ADVANCE that they are on the approved list in accordance with this protocol***

2. All Approved Visitors Must Wear A Mask while performing work in the facility while this requirement is in effect. Visitors should supply their own mask. If visitors do not have a mask available, one may be provided to the visitor.
3. Temperature Check and Screening. All visitors :
  - (A) Daily temperature check should be performed at the main entrance before entering. (before using the thermometer, sanitizing wipes should be used and sanitize the thermometer before and after use);  
AND
  - (B) HOST should use the Visitor Screening checklist to reaffirm that no risks are present at time of access. Confirm that in the prior 14 days, visitor has not had any other symptoms of COVID-19, been around others with symptoms, travelled outside of the state, used mass transit, or been part of any large gathering of 10 or more people, or been in close proximity with or provided care for someone diagnosed with COVID-19, or been in close proximity w/ a COVID caretaker (e.g., nurse/doctor).must

***\*NOTE: Please make your visitors aware of these requirements IN ADVANCE, and ask them to self-check/self-screen, to avoid any surprises and to get additional advance screening/approval from COVID Response Team***

4. Fever, Symptoms or Screening Issue. Anyone who show a fever of 100.4 or greater, have other symptoms, or do not pass other screening questions are not permitted in the building (unless specifically approved by COVID Response Team)
5. Handle with Care. All deliveries, individual lunches, packages, etc., must be handled with care and should be wiped down before being brought into the building; where possible, quarantine (set aside) packages and deliveries for several days before opening.
6. Food, Food Deliveries, Etc. Outside food delivery/Door Dash, etc., should be *contactless* delivery if at all possible, or should be<sup>8</sup> met outside. You should limit contact and disinfect/wipe down. Group lunches, pot-lucks, etc., are not permitted at this time.



# Screening Requirements

PARTSOURCE

## COVID-19 Visitor Questionnaire

The safety of our associates, customers, families, and visitors remain PartsSource's overriding priority during the COVID-19 pandemic. Only business-critical visitors are permitted at any PartsSource facility at this time, and such visitors must 1) wear a mask at all times in the building, and 2) submit this completed form and have advance approval from her/his host before arriving; hosts must have advance approval for the visit via this form approved and signed by Human Resources. As the COVID-19 situation evolves, PartsSource may update its procedures based on recommendations from the Centers for Disease Control (CDC), State Department(s) of Health, other bodies, applicable law and governmental guidance.

To help prevent the spread of COVID-19 and reduce the potential risk of exposure to our workforce and visitors, we are requiring this simple screening questionnaire. Your participation is important to help us take precautionary measures to protect you and everyone in our facilities. Thank you for your time.

Visitor Name	
Company/Organization	
PartsSource Host Name	
Facility You Are Visiting	
Personal Phone Number	

## Self-Declaration by Visitor

Have you experienced any of the following symptoms in the last 14 days? Please select 'yes' or 'no' for each (\*Note: Visitors are **REQUIRED** to inform the Company of any symptoms including on the day of the visit):

- **Fever** (100.4°F or higher): YES  NO
- **Cough:** YES  NO
- **Respiratory Illness:** YES  NO
- **Shortness of Breath:** YES  NO
- **Difficulty Breathing:** YES  NO
- **Any Other Symptoms Indicative of COVID-19** YES  NO

If Yes, Explain:

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Are you waiting for a COVID-19 test or test results, or have you been in close proximity with or provided care for someone waiting for a COVID-19 test or test results?

YES  NO

In the last 14 days, have you been in close proximity with or provided care for someone diagnosed with COVID-19 or showing other symptoms, or been in close proximity w/ a COVID caretaker (e.g., nurse/doctor)?

YES  NO

Have you been advised to be in quarantine at this time?

YES  NO

Within the last 14 days, have you (a) been part of any gatherings of 10+ people, (b) been within a hospital, (c) used mass transit, OR (d) otherwise engaged in Level 2 or 3 travel as provided on the CDC's COVID-19 travel information page (<https://www.cdc.gov/coronavirus/2019-ncov/travelers/index.html>), or been in close proximity w/ anyone who has (a through d)?

YES  NO

## \*\*\* PLEASE READ \*\*\* COVID-19 SELF-CHECK AND MASK REQUIREMENTS

\*\*\* Please understand these requirements are designed for your safety and the safety of all employees. Please do your part to protect yourself and your coworkers. In addition to the requirements below, please continue to practice exceptional hygiene (cover coughs and sneezes, wash hands often, disinfect often, do not touch face, etc.); continue social distancing of 6-12 feet; do not share handshakes, etc. \*\*\*

\*\*\* **EMPLOYEES MUST WEAR MASKS WHILE IN THIS FACILITY; AND**  
\*\*\* **EMPLOYEES MUST PERFORM DAILY SELF-CHECKS AS FOLLOWS:**

- Self-Check Each Day.** Until further notice by the Company, each day before entering the office, ALL employees must:
  - Self-check their temperature at home with a thermometer; AND
  - Self-monitor for COVID-19 symptoms, e.g., shortness of breath, fever, dry cough, sore throat, body aches, chest pain, etc.
- Notify Manager of Fever or Other Symptoms; Not Permitted to Enter.** Employees with a fever of 100.4°F or above or other symptoms of COVID-19 (currently or in the last 14 days) must notify their manager and are not permitted to work in the office; such employees should work from home unless symptoms do not allow the employee to do so.
- For Those Employees Without a Thermometer.** For those without a thermometer, you **MUST** check your temperature with the contactless thermometer located at the main entrance each day before entering.
- Other Screening; Travel and Large Gatherings.** Employees who, in the prior 14 days, (a) have been around others with COVID-19 symptoms, (b) traveled outside of Ohio, (c) used mass transit, or (d) have been part of any large gathering of 10 or more people, or (e) been in close proximity with or provided care for someone diagnosed with COVID-19, or been in close proximity w/ a COVID caretaker (e.g., nurse/doctor) must notify their manager and should work from home (unless otherwise approved by Human Resources).

**By entering this site, you are confirming that you are following ALL the requirements listed above. If you cannot meet any of these requirements, immediately leave the site and call your supervisor or Human Resources. When in doubt, stay home.**

As the COVID-19 situation evolves, PartsSource will continue to monitor it closely and may periodically update its procedures based on current recommendations from the Centers for Disease Control (CDC), and applicable laws and governmental guidance.

### VISITORS:

If you have been requested to perform essential services, you must have completed our COVID-19 Visitor Questionnaire and have an approved, signed, printed copy with you at all times. No other visitors will be permitted to enter the building.

Updated 4/30/20

# Response Protocol

## COVID-19 Scenarios and Quarantine Protocol

All scenarios outlined below result in a quarantine. Any employee returning from a quarantine must pass the daily employee self-check, regardless of the situation.

Situation	Earliest Return to Work (RTW)?* <i>*Documentation from a medical provider overrides anything below</i>	Quarantine Close Contacts at Work?	Earliest Return to Work for Close Contacts?
<b>Employee Illness</b>			
Employee reporting COVID-19 self-check symptom(s)	7/3 rule	If "patient zero" was symptomatic at work, quarantine those in close contact that day	When patient zero returns or 14 days (whichever comes first)
Employee displaying COVID-19 symptoms <u>and</u> a medical professional advises employee to quarantine or get a COVID-19 test ( <u>suspected</u> case)	14 days <u>and</u> able to pass 7/3 rule	Yes	14 days from last close contact
Employee waiting for results of a COVID-19 test ( <u>suspected</u> case)	Positive = RTW from medical provider Negative = 7/3 rule	Yes	14 days from last close contact; immediately if test results negative
Employee tests POSITIVE for COVID-19 ( <u>confirmed</u> )	RTW from medical provider	Yes	14 days from last close contact
<b>Illness of Employee's Spouse/Household Member</b>			
Employee's spouse/household member showing COVID-19 symptoms	Follow 7/3 rule for spouse/household member	No	No
<b>Employee in Contact w/ Others (Suspected for Confirmed COVID-19 cases)</b>			
Employee (or spouse/household member) has close contact outside of work with a <u>suspected</u> case of COVID-19	14 days from last close contact, or immediately if close contact receives negative test results	No	No
Employee has close contact outside of work with a <u>confirmed</u> case of COVID-19	14 days from last close contact; if contact is continuous (spouse/household member), RTW after close contact receives negative test results	Yes	14 days from last close contact

## Response when suspected COVID symptoms are present

- ❑ If Employee has temperature is 38°C (100.4°F) or higher, or the employee exhibits visible symptoms of illness consistent with COVID-19, the employees will be isolated and screening administered (onsite testing or self-check).
- ❑ Reception Interview Room to be designated as isolation room and equipped with supplies (Gloves/Masks/Thermometer).
- ❑ Contact tracing will be initiated if symptoms are consistent with COVID-19. Employee may be required to seek testing (if available) or self-quarantine for required timeframe.
- ❑ If employee is too ill to work or not equipped to work remotely Emergency Sick Leave may be used.
- ❑ Employees returning to work from a quarantine or approved medical leave (PTO or EML) should be notify their Manager and/or HR and to submit to that representative a medical certificate releasing them to return to work.

# Contact Tracing Protocol

In the event of a suspected or confirmed case of COVID-19, the individual's manager and/or Human Resources personnel will work with the individual to identify his/her contacts as follows:

1. Staff shall work with an individual with a confirmed or suspected case of COVID-19 to help them recall everyone with whom they have had close contact during the timeframe while they may have been infectious, which at present for COVID-19 is widely believed to be up to 14 days.

This can be done by methodically tracing each day, and the actions and close proximity/contact with people, over the past 14 days. Staff should be sure to gather from the individual as much contact information (name, phone, email, address if known, etc.) on the contacts as possible.

Things to be considered during tracing include but are not limited to: family members or others who have been within the household, other visits with family/friends, work exposure, meetings, events, delivery of services to the individual or of food or other items which included proximity or contact, trips to the store or other places (to the extent people can be identified), etc.

2. Staff should be as resourceful as possible to locate and then warn these exposed identifiable contacts of their potential exposure as rapidly and sensitively as possible.
3. To protect privacy, contacts are only informed that they may have been exposed to an individual with the infection. They are not told the identity of the individual who may have exposed them.
4. Contacts are provided with education, information, and support to understand their risk, including but not limited to:
  - a. What they should do to separate themselves from others
  - b. Monitor themselves for illness; and
  - c. The possibility that they could spread the infection to others even if they themselves do not feel ill or show symptoms
5. Contacts should be strongly encouraged to stay home and maintain social distance from others (at least 6 feet) until 14 days after their last exposure in case they also become ill or are contagious, and monitor themselves by checking their temperature twice daily and watching for common symptoms including but not limited to cough and shortness of breath.

# Return to Office Schedule (Timing TBD)

	Phase 1						Phase 2				Phase 3
	Wave 1	Wave 2	Wave 3	Wave 1	Wave 2	Wave 3	Wave 1	Wave 2	Wave 3	Wave 4	All other Personnel
<b>1. Finance</b>	3	NAME	3	NAME	3	NAME	6	NAME	6	NAME	All Other Personnel
<b>2. Inside Sales</b>	3	NAME	3	NAME	3	NAME	6	NAME	6	NAME	All Other Personnel
<b>3. Customer Success</b>	2	NAME	2	NAME	2	NAME	4	NAME	4	NAME	All Other Personnel
<b>4. Supply Chain</b>	2	NAME	2	NAME	2	NAME	4	NAME	4	NAME	All Other Personnel
<b>All Other Functions</b>	2	NAME	2	NAME	2	NAME	4	NAME	4	NAME	All Other Personnel

## Phase 1 (Voluntary/Occasional Office Access)

### Universal Requirements for Onsite Personnel

Safe Workspace Distancing must be maintained (12+ft)  
 Must agree to and perform self-check requirements (universal requirements)  
 No evident risks (per self-check screening) within 14 days prior scheduled day onsite  
 Required use of face masks while onsite

### Prioritization

1. Resources with Productivity Challenges (without health risk factors)
2. Resources requested to perform occasional onsite activities (without health risk factors)

## Phase 2 (Required; Distancing Maintained) - May required several sub-phases

### Universal Requirements for Onsite Personnel

Safe Workspace Distancing maintained where possible (12+ft)  
 Must agree to and perform screening requirements (Self-check for those regularly onsite)  
 No evident risks (based on self-check screening) within 14 days prior scheduled day onsite  
 Use of face masks (if consistent with current guidance)

### Prioritization

1. Resources with Productivity Challenges (without health risk factors)
2. Resources requested to perform occasional onsite activities (without health risk factors)
3. Resources with alternative childcare/no childcare dilemmas
4. Resources who have business critical visitors scheduled
5. Resources who share indoor space with family members with COVID health risk factors

## Phase 3 & Beyond

### Universal Requirements for Onsite Personnel

Appropriate Distancing Requirements (based on current guidance)  
 Self Check Requirements remains in place  
 Must not come to work exhibiting symptoms consistent with COVID  
 Remote Work Requests for non-remote equipped users require Remote Work Agreement

### Prioritization

1. All other resources not approved for Normal (non-Covid Related) Remote Work Approval