**Situation Descriptions for Employees**

High Risk: **CONFIRMED** COVID-19 case

High Risk: **PRESUMED** COVID-19 case

There is a presence of COVID-19 symptoms including, cough, fever and shortness of breath, and the employee has received a negative test for influenza (Strong likelihood of exposure)

Employee tests positive for COVID-19

**Employee accountabilities:**

* Immediately notify manager via email/phone call
* Immediately self-quarantine at home
* Report the following:
	+ Date of onset of symptoms
	+ All work locations (buildings, floors, offices) in 14 days prior to onset of symptoms
	+ Names and dates of all employees with whom there was close contact\*
	+ Names and dates of all employees with incidental contact\*
* Contact physician; follow physician's directions
* Employee may not return until s/he is free of all symptoms for 72 hours. A medical certification may be required prior to return to work.

**Employee accountabilities:**

* Immediately notify manager via email/phone call
* Immediately self-quarantine at home
* Report the following:
	+ Date of onset of symptoms
	+ All work locations (buildings, floors, offices) in 14 days prior to onset of symptoms
	+ Names and dates of all employees with whom there was close contact\*
	+ Names and dates of all employees with incidental contact\*
* Contact physician; follow physician's directions
* Employee may not return until s/he is free of all symptoms for 72 hours. A medical certification may be required prior to return to work.

**Situation Descriptions for Management**

High Risk: **PRESUMED** COVID-19 case

High Risk: **CONFIRMED** COVID-19 case

There is a presence of COVID-19 symptoms including, cough and fever and shortness of breath, and the employee has received a negative test for influenza (Strong likelihood of exposure)

Employee tests positive for COVID-19

**Management Will:**

 •Forward notification to VPHR, Director of Risk Management, and Director of Safety

•Notify 'close contact' employees/customers of potential exposure; send home for 14-day self-quarantine; cc LOA@ACCOes.com and VPHR

•Notify 'incidental contact' employees/customers of potential exposure

•Coordinate deep clean of location(s) with Risk and Facilities

•Refer to HR/Safety for employee final return to work approval

**Management Will:**

•Forward notification to HR, Director of Risk Management, and Director of Safety

•Notify 'close contact' employees/customers of potential exposure; send home for 14-day self-quarantine; cc LOA@ACCOes.com and VPHR

•Notify 'incidental contact' employees/customers of potential exposure

•Coordinate deep clean of location(s) with Risk and Facilities

•Refer to HR/Safety for employee final return to work approval

**Situation Descriptions for Human Resources**

High Risk: **CONFIRMED** COVID-19 case

High Risk: **PRESUMED** COVID-19 case

There is a presence of COVID-19 symptoms including, cough and fever and shortness of breath, and the employee has received a negative test for influenza (Strong likelihood of exposure)

Employee tests positive for COVID-19

**HR accountabilities:**

 •HR to record Confirmed COVID-19 case and self-quarantined employees

•Satisfy Leave of Absence needs and requirements

•Follow-up on return-to-work situations 2 days prior to expiration of 14-day period

• HR to provide final return to work approval

**HR accountabilities:**

 •HR to record Confirmed COVID-19 case and self-quarantined employees

•Satisfy Leave of Absence needs and requirements

•Follow-up on return-to-work situations 2 days prior to expiration of 14-day period

• HR to provide final return to work approval

**Situation Descriptions for RISK & Facilities Team**

High Risk: **CONFIRMED** COVID-19 case

High Risk: **PRESUMED** COVID-19 case

There is a presence of COVID-19 symptoms including, cough and fever and shortness of breath, and the employee has received a negative test for influenza (Strong likelihood of exposure)

Employee tests positive for COVID-19

**Risk/Facilities accountabilities:**

•Arrange location deep clean if employee was in the office for an extended period

•Notify management of completion and date for general workforce return

**Risk/Facilities accountabilities:**

•Arrange location deep clean if employee was in the office for an extended period

•Notify management of completion and date for general workforce return

**Situation Descriptions for HR/RISK/SAFETY TEAMS**

High Risk: **CONFIRMED** COVID-19 case

High Risk: **PRESUMED** COVID-19 case

There is a presence of COVID-19 symptoms including, cough and fever and shortness of breath, and the employee has received a negative test for influenza (Strong likelihood of exposure)

Employee tests positive for COVID-19

**Questions to ask employee:**

HR, Director of Risk Management, Director of Safety to ask the following:

1. When did symptoms begin?
2. Can you determine where/when you may have been exposed to COVID-19? Were either our customers or other employees involved?
3. During the 14 days prior to your symptoms beginning, where did you go within our workplaces?
4. During the 14 days prior to your symptoms beginning, where did you go within our customers' workplaces?
5. Have you been self-isolating?
6. Have you been practicing frequent hand-hygiene while in our, and our customers' workplaces?
7. Have you been practicing 6 foot social distancing?
8. Who have you spent prolonged time with in an indoor/enclosed area, with less than 6 feet of social distancing?
9. Where, specifically, did these prolonged interactions occur?
10. When, specifically, did these prolonged interactions occur?

**Questions to ask employee:**

HR, Director of Risk Management, Director of Safety to ask the following:

1. When did symptoms begin?
2. Can you determine where/when you may have been exposed to COVID-19? Were either our customers or other employees involved?
3. During the 14 days prior to your symptoms beginning, where did you go within our workplaces?
4. During the 14 days prior to your symptoms beginning, where did you go within our customers' workplaces?
5. Have you been self-isolating?
6. Have you been practicing frequent hand-hygiene while in our, and our customers' workplaces?
7. Have you been practicing 6 foot social distancing?
* Who have you spent prolonged time with in an indoor/enclosed area, with less than 6 feet of social distancing?
* Where, specifically, did these prolonged interactions occur?
* When, specifically, did these prolonged interactions occur?

**Situation Descriptions for Employees**

**Medium Risk**

**Low Risk**

Employee had contact with someone with a confirmed COVID-19 case. The contact was prolonged, without barriers, and within 6 feet proximity, or the employee had contact with respiratory secretions (e.g., an uncovered sneeze or cough) from someone with a confirmed COVID-19 case, or Employee had 1st-hand contact with someone who has COVID-19-like symptoms who works in a healthcare facility treating COVID-19 cases.

If the employee did not use good hygiene practices following the contact, then consider the exposure to be high risk and follow the designated protocol.

Employee had no physical contact, no prolonged interaction within less than 6 feet, with an employee with COVID-19-like symptoms, or

Employee had contact that is 2 or more instances removed (someone who was in contact with someone who was in contact with someone).

Contact may be momentary, or with more than 6 feet of physical separation.

If the employee did not use good hygiene practices following the contact, then consider the exposure to be high risk and follow the designated protocol.

**Employee accountabilities:**

•Notify manager via email/phone call

•Disinfect physical surfaces in workplace or jobsite as applicable

•Contact physician; follow physician's directions

If no COVID-19 symptoms:

•14-day self-isolate at home

•Self-monitor for symptoms

Report the following:

•Date of onset of symptoms

•All work locations (buildings, floors, offices) since the potential exposure

•Names and dates of all employees with whom employee had close contact\*

•COVID-19 test results, if tested

Employee may return to workplace at end of 14-day period if s/he has been free of all symptoms for at least 72 hours. A medical certification may be required prior to return to work.

**Employee accountabilities:**

 •Disinfect physical surfaces in workplace

•Self-monitor for symptoms

•Notify manager if COVID-19-like symptoms develop and/or employee tests positive for COVID-19

**Situation Descriptions for Description Management**

**Medium Risk**

**Low Risk**

Employee had no physical contact, no prolonged interaction within less than 6 feet, with an employee with COVID-19-like symptoms,

or

Employee had contact that is 2 or more instances removed (someone who was in contact with someone who was in contact with someone).

Contact may be momentary, or with more than 6 feet of physical separation.

If the employee did not use good hygiene practices following the contact, then consider the exposure to be high risk and follow the designated protocol.

Employee had contact with someone with a confirmed COVID-19 case. The contact was prolonged, without barriers, and within 6 feet proximity, or the employee had contact with respiratory secretions (e.g., an uncovered sneeze or cough) from someone with a confirmed COVID-19 case, or Employee had 1st-hand contact with someone who has COVID-19-like symptoms who works in a healthcare facility treating COVID-19 cases.

If the employee did not use good hygiene practices following the contact, then consider the exposure to be high risk and follow the designated protocol.

**Management will:**

•Forward notification to HR, Director of Risk Management, Director of Safety

•Notify 'close contact' employees/customers of potential exposure; send home for 14-day self-isolation; cc HR

•Notify 'incidental contact' employees/customers of potential exposure and low risk

•Coordinate deep clean of location(s) with Risk and Facilities

•Refer to HR/Safety for employee final return to work approval

**Management will:**

Manager to Ask Employee questions found in “Question” section of this diagram. If 'Yes' to ANY of the questions, the Manager is to notify HR, Director of Risk Management, Director of Safety and email the and await information on next steps.

**Situation Descriptions for Human Resources**

**Medium Risk**

**Low Risk**

Employee had no physical contact, no prolonged interaction within less than 6 feet, with an employee with COVID-19-like symptoms, or

Employee had contact that is 2 or more instances removed (someone who was in contact with someone who was in contact with someone).

Contact may be momentary, or with more than 6 feet of physical eparation.

If the employee did not use good hygiene practices following the contact, then consider the exposure to be high risk and follow the designated protocol.

Employee had contact with someone with a confirmed COVID-19 case. The contact was prolonged, without barriers, and within 6 feet proximity, or the employee had contact with respiratory secretions (e.g., an uncovered sneeze or cough) from someone with a confirmed COVID-19 case, or Employee had 1st-hand contact with someone who has COVID-19-like symptoms who works in a healthcare facility treating COVID-19 cases.

If the employee did not use good hygiene practices following the contact, then consider the exposure to be high risk and follow the designated protocol.

**HR accountabilities:**

•HR to record Confirmed COVID-19 case and self-quarantined employees

•Satisfy Leave of Absence needs and requirements

•Follow-up on return-to-work situations 2 days prior to expiration of 14-day period

• HR to provide final return to work approval

**HR accountabilities:**

NA

**Situation Descriptions for Risk & Facilities Team**

**Medium Risk**

**Low Risk**

Employee had contact with someone with a confirmed COVID-19 case. The contact was prolonged, without barriers, and within 6 feet proximity, or the employee had contact with respiratory secretions (e.g., an uncovered sneeze or cough) from someone with a confirmed COVID-19 case, or Employee had 1st-hand contact with someone who has COVID-19-like symptoms who works in a healthcare facility treating COVID-19 cases.

If the employee did not use good hygiene practices following the contact, then consider the exposure to be high risk and follow the designated protocol.

Employee had no physical contact, no prolonged interaction within less than 6 feet, with an employee with COVID-19-like symptoms, or

Employee had contact that is 2 or more instances removed (someone who was in contact with someone who was in contact with someone).

Contact may be momentary, or with more than 6 feet of physical separation.

If the employee did not use good hygiene practices following the contact, then consider the exposure to be high risk and follow the designated protocol.

**Risk/Facilities accountabilities:**

•Arrange location deep clean if employee was in the office for an extended period

•Notify management of completion and date for general workforce return

**Risk/Facilities accountabilities:**

NA

**Situation Descriptions: Question to Address Medium/Low Exposure**

**Medium Risk**

**Low Risk**

Employee had contact with someone with a confirmed COVID-19 case. The contact was prolonged, without barriers, and within 6 feet proximity, or the employee had contact with respiratory secretions (e.g., an uncovered sneeze or cough) from someone with a confirmed COVID-19 case, or Employee had 1st-hand contact with someone who has COVID-19-like symptoms who works in a healthcare facility treating COVID-19 cases.

If the employee did not use good hygiene practices following the contact, then consider the exposure to be high risk and follow the designated protocol.

Employee had no physical contact, no prolonged interaction within less than 6 feet, with an employee with COVID-19-like symptoms, or

Employee had contact that is 2 or more instances removed (someone who was in contact with someone who was in contact with someone).

Contact may be momentary, or with more than 6 feet of physical separation.

If the employee did not use good hygiene practices following the contact, then consider the exposure to be high risk and follow the designated protocol.

**Questions to ask employee:**

**HR/Director of Risk Management/Director of Safety to ask the following:**

1. When did symptoms begin?
2. Can you determine where/when you may have been exposed to COVID-19? Were either our customers or other employees involved?
3. During the 14 days prior to your symptoms beginning, where did you go within our workplaces?
4. During the 14 days prior to your symptoms beginning, where did you go within our customers' workplaces?
5. Have you been self-isolating?
6. Have you been practicing frequent hand-hygiene while in our, and our customers' workplaces?
7. Have you been practicing 6 foot social distancing?
8. Who have you spent prolonged time with in an indoor/enclosed area, with less than 6 feet of social distancing?
9. Where, specifically, did these prolonged interactions occur?
10. When, specifically, did these prolonged interactions occur?

**Questions to ask employee:**

Manager to ask employee the following:

1. Have you been diagnosed with, or are suspected to have, COVID-19? Y/N
2. In the last two weeks, have you been in close contact with someone who’s been confirmed to have, or is suspected to have, COVID-19? Y/N
3. In the last two weeks, have you or a member your household traveled to a location designated by the CDC as a Level 3 Travel risk (As of March 11, 2020, this includes China, Iran, Italy, and South Korea)? Y/N
4. In the last two weeks, have you been in close contact with someone (including household members), who’s been in Hubei Province, China? Y/N
5. In the last two weeks, have you been under self-quarantine due to potential or confirmed exposure to COVID-19? Y/N
6. Are you currently experiencing symptoms consistent with COVID-19 (including, cough and fever and shortness of breath, and the employee has received a negative test for influenza)? Y/N

If yes to ANY of the above, the Manager is to notify HR, Director of Risk Management, Director of Safety and email the and await information on next steps.