



COVID PROTOCOL

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COVID Protocols

(Based on CDC & state guidance effective 5/28/2020)

What to do if ...

- 1 Employee has a confirmed positive test for COVID-19 and is symptomatic
- 2 Employee has a confirmed positive test and is asymptomatic
- 3 Employee has not had a test, but is exhibiting symptoms
- 4 Employee has been exposed to someone with a confirmed positive test
- 5 Employee has been exposed to someone exhibiting symptoms, but that someone has not had a test to confirm coronavirus diagnosis.
- 6 Employee is caring for a sick family member living in the same household that has had a positive coronavirus test.
- 7 Employee was COVID-19 positive, remained out of work the required amount of time, is no longer symptomatic, returned to work and now household contact is COVID-19 positive, can the employee be reinfected and should they stay out of work?
- 8 What should employees do if they feel as though they have been exposed to someone with a positive test outside of work?
- 9 Employee has traveled on a cruise, to a hotspot in the U.S.A. or overseas.
- 10 Employee has been part of a large gathering
- 11 Employee is admitted to the hospital
- 12 Employee visits ER
- 13 Employee visits Urgent Care
- 14 Employee who has to spend time in hospital because their minor dependent or spouse is hospitalized.



1 Employee has a confirmed positive test for COVID-19 and is symptomatic

Employees with confirmed COVID-19 who have stayed home (home isolation) can return to work under the following conditions**:

- > **If they have not had a test** to determine if they are still contagious, they can leave home after these three things have all happened:
 - o They have had no fever for at least 72 hours (that is three full days of no fever **without** the use of medicine, like tylenol or ibuprofen/motrin or aspirin, that reduces fevers)
 - AND**
 - o other symptoms have improved (for example, symptoms of cough or shortness of breath have improved)
 - AND**
 - o at least 10 days have passed since their symptoms first appeared
- > **If they have had a test** to determine if they are still contagious, they can leave home after these three things have all happened:
 - o They no longer have a fever for at least 72 hours (that is three full days **without** the use of medicine that reduces fevers)
 - AND**
 - o other symptoms have improved (for example, symptoms of cough or shortness of breath have improved)
 - AND**
 - o they have received two negative tests in a row, at least 24 hours apart.

2 Employee has a confirmed positive test and is asymptomatic

Employees who DID NOT have COVID-19 symptoms, but tested positive and have stayed home (home isolated) can return to work under the following conditions**:

- > **If they have not had a test** to determine if they are still contagious, they can leave home after these two things have happened:
 - o At least 10 days have passed since the date of their first positive test
 - AND**
 - o they continue to have no symptoms (no cough or shortness of breath) since the test.
- > **If they have had a test** to determine if they are still contagious, they can leave home after:
 - o They have received two negative tests in a row, at least 24 hours apart.

Note: if the asymptomatic employee develops symptoms, they must follow the guidance above for employees with COVID19 (#1)

3 Employee has not had a test, but is exhibiting symptoms

Employees with symptoms suspicious for COVID-19 should not remain at work & should contact onsite nurse practitioner to arrange an appointment for testing. Employee must remain out of work until a test has been performed & results are available to make a return to work determination.

- > If the test result is **negative but symptoms are still present**, the employee should remain out of work until telephone consultation with onsite nurse practitioner.
- > If test result is **negative and symptoms have resolved**, the employee may return to work after 72 hours of being fever free without use of fever-reducing medication. The onsite nurse practitioner will provide clearance for the employee to return to work.
- > If test is **positive**, follow guidance listed under #1.

4 Employee has been exposed to someone with a confirmed positive test

CDC defines an exposure as being within 6' of a COVID-19 positive person for 15 minutes or longer either within 48 hrs before onset of symptoms or during any timeframe after symptom onset.

Employees who have been EXPOSED to someone with COVID-19

(family member, housemate, friend, etc) may be allowed to remain at work under the following conditions: for 14 days after the last date of exposure to the COVID-19 positive person, the employee will participate in daily symptom assessment and twice daily temperature screening, is monitored for symptoms by onsite nurse practitioner, wears a mask while at work, practices social distancing of 6' or more and follows cleaning/disinfectant procedures of work area (including proper hand hygiene). If the employee is a caregiver for someone with COVID-19, they should follow the CDC Advice for Caregivers. The onsite nurse practitioner should be notified of exposed employees (contacts) as soon as possible for tracking purposes and should contact the employee to provide guidance. Depending upon the level of contact and other factors, the nurse practitioner may provide additional guidance regarding the work status of the exposed employee.

If exposed employee becomes symptomatic while at work, the employee should notify the supervisor and immediately leave the work area. The employee should contact the onsite nurse practitioner for further guidance. The employee's work area should be cleaned & disinfected as soon as possible. Information on persons who had contact with the ill employee during the time of symptom onset and/or 2 days prior to symptoms should be compiled. Those having close contact within 6 feet of the employee for 15 minutes or more during this time would be considered exposed if the employee is determined to have COVID.

If exposed employee becomes symptomatic when not at work, the employee should not report to work. The onsite nurse practitioner should be notified in order to contact the employee to determine further assessment. Same guidance noted above regarding cleaning of work area & determining contacts should be followed.

CDC recommends testing of asymptomatic & symptomatic contacts. Marsh protocol requires testing of all asymptomatic & symptomatic contacts. Timing of testing is dependent upon last date of exposure to COVID-19 positive person.

If an employee declines testing, the employee will be out of work the remainder of the 14 day monitoring period without pay.

- 5 Employee has been exposed to someone exhibiting symptoms, but that someone has not had a test to confirm coronavirus diagnosis.**

Employees who have been EXPOSED to someone with suspected COVID-19 (family member, housemate, friend, etc) can remain at work if the same workplace conditions outlined in #4 are followed as well as guidance regarding what to do if symptoms develop.

- 6 Employee is caring for a sick family member living in the same household that has had a positive coronavirus test.**

Follow guidance outlined in #4.

- 7 Employee was COVID-19 positive, remained out of work the required amount of time, is no longer symptomatic, returned to work and now household contact is COVID-19 positive, can the employee be reinfected and should they stay out of work?**

Studies have indicated there is low risk for reinfection at this time. If the employee is now a contact of a COVID + person, the same guidelines apply as outlined in #4.

- 8 What should employees do if they feel as though they have been exposed to someone with a positive test outside of work?**

The employee should be informed by the local health department if they have been identified as a contact of the confirmed positive person. They should report the exposure when questioned during the daily symptom screening. They will then follow the guidance outlined in #4.

- 9 Employee has traveled on a cruise, to a hotspot in the U.S.A. or overseas.**

Personal travel is discouraged. A **14 day mandatory quarantine** upon return is required for travel on a cruise ship, to any destination designated by the CDC as a hot spot or any international destination.

- > Employee must stay home for 14 days
 - o Employee should take their temperature with a thermometer two times a day and monitor for fever.
 - o Employee should watch for cough or trouble breathing.
 - o Employee should stay home and avoid contact with others.
 - o Employee should keep their distance from others (about 6 feet or 2 meters).

10 Employee has been part of a large gathering

Mass gatherings of > 25 people are discouraged. Employee may return to work but **should self monitor for 14 days** from the time of the gathering.

- > Take temperature twice daily
- > Participate in daily symptom check
- > If temperature is 100.4 or above and/or symptoms develop, employee needs to remove themselves from the work environment and contact the onsite nurse practitioner for COVID testing.

11 Employee is admitted to the hospital

12 Employee visits ER

13 Employee visits Urgent Care

Scenarios #11-13: if the medical evaluation/treatment is not COVID related, the employee's return to work is based on the reason for needing medical care (ie seen at urgent care due to fall at home causing ankle injury, may return to work when cleared by treating provider). If hospitalized, self monitoring is recommended for 14 days after hospital discharge (see scenario #10)

If any of the medical evaluations are because of COVID related symptoms, the return to work determination will depend upon outcome of testing. Guidance for scenarios #1-3 will be followed.

14 Employee who has to spend time in hospital because their minor dependent or spouse is hospitalized.

Will be dependent upon reason for hospitalization

- > If the family member's illness is COVID related, either a 14 day quarantine after last exposure or guidance for scenario #4 will be followed.
- > If the illness is not COVID related, return to work is not restricted. Self monitoring as advised in scenario #10 should be performed.



COVID-19 RETURN TO WORK PROTOCOL



Employees returning to work following COVID-19 confirmed case or exposure - after receiving clearance from a medical professional - will be required to follow the protocol as outlined below upon their return. Subject to change based on the guidance of the CDC and Wake Forest Baptist Health.

Regular Temperature Checks and Health Screening Protocol are required for those who have tested positive to COVID-19 or have had direct close contact with someone with a confirmed case of COVID-19. Employees should expect the frequency and duration of these measures as follows:

POSITIVE COVID-19 RESULTS

FOR THE FIRST SEVEN (7) CALENDAR DAYS* UPON RETURNING TO WORK, employees who have tested positive for COVID-19 must have TWO (2) temperature checks each day (morning and afternoon) and must also complete a health screening questionnaire each morning. Both of these requirements must be met each day for the first seven calendar days upon their return to work. The morning temperature check and health screening questionnaire will be done first thing in the morning, before the employee can begin work.

DURING THE FIRST SEVEN (7) DAYS BACK TO WORK, the employee must report to Human Resources at scheduled times in the morning & afternoon in order for the Nurse Practitioner to evaluate them. She will do the first temperature check and the health screening questionnaire in the morning, and the second temperature check in the afternoon.

EXPOSURE TO COVID-19

FOR FOURTEEN (14) CALENDAR DAYS* AFTER LAST DATE OF EXPOSURE TO A POSITIVE COVID-19 PERSON, asymptomatic employees who have had close contact (six feet or less for 15 minutes or more) with someone with a confirmed positive case of Coronavirus will be provided a surgical mask** to wear while at work and must have TWO (2) temperature checks each day (morning and afternoon) and must also complete a health screening questionnaire each morning. Both of these requirements must be met during the 14 day monitoring period. The morning temperature check and health screening questionnaire will be done first thing in the morning, before the employee can begin work. This is a CDC requirement.

DURING THE FIRST FOURTEEN (14) DAYS BACK TO WORK, the employee must report to Human Resources at scheduled times in the morning & afternoon in order for the Nurse Practitioner to evaluate them. She will do the first temperature check and the health screening questionnaire in the morning, and the second temperature check in the afternoon.

A copy of the monitoring log will be provided each Friday for the employee to record a temperature twice daily & presence/absence of symptoms during the weekend. The log is to be returned to the nurse practitioner on Monday morning.

Protocol will be revised as needed, and will be introduced as more efficient processes are available at Marsh.

The Continuous Improvement team will continue to conduct random health screenings for employees who are not under the above COVID-19 protocol for returning to work following a confirmed case or exposure.

Any answer of “yes” on the health screening questionnaire or any fever at 100.4 or above needs to be reported to HR right away for immediate attention.

*Protocol must be followed as described on ALL work days during the 7 or 14 calendar day period.

** Dependent on supply.



PROTOCOL FOR WHEN SYMPTOMS ARE DISCOVERED THROUGH HEALTH SCREENING/TEMP CHECK



ALL employees are subject to a health screening and temperature check at any time while at Marsh.

If an employee answers “yes” to any of the questions on the health screening form, or if a fever is discovered at 100.4 or above, the employee must follow the appropriate steps below:

IF BEFORE BEGINNING OF WORKDAY (PRIOR TO 7:30 AM)

Supervisors are asked to get the employee's phone number before they leave and provide to HR, who will pass along to the Nurse Practitioner. Instruct the employee to leave the building immediately. The NP will call the employee to determine the protocol that is appropriate and place the employee accordingly.

IF DURING THE WORKDAY (AFTER 7:30 AM)

Supervisors are asked to get the employee's phone number before they leave and provide to HR, who will pass along to the Nurse Practitioner. Instruct the employee to return to their vehicle immediately and await a call from the Nurse Practitioner. If the employee does not have a car, they will sit in the sheltered bus stop on Centennial and wait for a call/further instruction. The Nurse Practitioner will determine the protocol that is appropriate and place the employee accordingly.

EMPLOYEES CANNOT RETURN TO WORK WITHOUT CLEARANCE FROM THE NURSE PRACTITIONER



PROTOCOL FOR NON-COVID SITUATIONS

Any employee who needs to see the Nurse Practitioner for any non-COVID related concern can visit MarshWellness.com to schedule an appointment to see the nurse practitioner or ask their supervisor to contact Human Resources, who will assist in getting an appointment scheduled with the Nurse Practitioner. HR will inform the employee and their supervisor of the appointment time. If employee schedules the appointment, a notification containing the appointment time will be sent to their email address.

Employees should expect to answer a series of questions pertaining to their complete medical history and prescriptions, just as they would when establishing themselves as a new patient at any doctor's office or medical practice. Unless an emergency, drop-in visits to see the Nurse Practitioner are not allowed.



CORONAVIRUS (COVID-19) WORKPLACE HEALTH SCREENING

Employee Name: _____ Employee Number: _____

Temperature			
Have you been within 6 feet of a person with a lab-confirmed case of COVID-19 for at least 5 minutes, or had direct contact with their mucus or saliva, in the past 14 days?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
Have you had contact with someone who is under investigation for COVID-19?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
Have you traveled internationally or within the U.S. in the last 14 days ?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
Have you had close contact with anyone who has traveled internationally or within the U.S. in the last 14 days?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
IN THE LAST 48 HOURS, HAVE YOU OR ANYONE IN YOUR HOUSEHOLD HAD ANY OF THE FOLLOWING?	Self	Family Member	
Fever of 100.4 F (38 C) or above, or possible fever symptoms like alternating shivering (chills) and sweating	<input type="checkbox"/> YES	<input type="checkbox"/> YES	<input type="checkbox"/> NO
New cough	<input type="checkbox"/> YES	<input type="checkbox"/> YES	<input type="checkbox"/> NO
New trouble breathing	<input type="checkbox"/> YES	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Shortness of breath, difficulty breathing or new wheezing	<input type="checkbox"/> YES	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Headache	<input type="checkbox"/> YES	<input type="checkbox"/> YES	<input type="checkbox"/> NO
New muscle/body aches	<input type="checkbox"/> YES	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Sore throat	<input type="checkbox"/> YES	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Congestion or runny nose	<input type="checkbox"/> YES	<input type="checkbox"/> YES	<input type="checkbox"/> NO
New loss of smell or taste, or a change in taste	<input type="checkbox"/> YES	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Nausea or vomiting	<input type="checkbox"/> YES	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Diarrhea	<input type="checkbox"/> YES	<input type="checkbox"/> YES	<input type="checkbox"/> NO

If YES to any of the above, employee may be asked to go to HR for further questions, or go home immediately and follow Marsh COVID-19 protocol.

Employee Signature: _____ Date: _____



VISITOR POLICY DURING COVID-19



As states and regions progress through the phases of the reopening, Marsh will begin to allow select visitors on-site that are deemed crucial to our business. As a manufacturer, it is important to maintain safety and access to our facilities for contractors, suppliers, and delivery personnel who are essential to our operations.

Only business critical visitors are permitted at any Marsh facility at this time, including only those that we are currently doing business with, or those we are strongly considering. Cold calls and exploratory discussions are to be conducted virtually/off-site until further notice.

The following protocol has been implemented to protect the health of our workforce:

The Manager or Supervisor who invited/will be working with a crucial visitor is considered the "host" while the visitor is on the Marsh premises.

In advance, the host is to inform visitor(s) of the following:

- 1** Visitors must check-in at Human Resources upon arrival. If Human Resources is not available, the host is accountable for completing the steps below and record those results for later review.
- 2** Are expected to complete a health screening form and have temperature taken
- 3** Must abide by the safety protocol and requirements of being on campus, to include maintaining a distance of at least 6 feet from other individuals and wearing a mask properly covering the nose and mouth fully at all times while inside the Marsh factory. In response to any visitors not wearing a mask or otherwise violating our safety protocols, the Company may discontinue business with that visitor or, in its discretion, take a credit of up to 5% against future invoices as a means to deter future violations.

If a visitor responds YES on any of the questions on the health screening form, or registers a temperature of 100.4 or above, the visitor will be denied entry. Human Resources will inform the Marsh host.

If NO, Human Resources will call the Marsh host to accompany the visitor to the location of the meeting.

When possible, the host will remain with the visitor while on the Marsh premises, and will be responsible for ensuring that the requirements and protocols are strictly followed.



CRUCIAL VISITOR COVID-19 HEALTH SCREENING QUESTIONNAIRE

The safety of our employees, supplier partners, customers, families and visitors remain Marsh's priority. As COVID-19 continues to evolve, Marsh is monitoring the situation closely and will update company guidance as needed based on current recommendations from the Centers for Disease Control and our on-site medical professionals from Wake Forest Baptist Health. At this time, only business critical visitors are permitted at Marsh.

To prevent the spread of COVID-19 and reduce the potential risk of exposure to our workforce and visitors, we are requiring that all visitors complete a health screening questionnaire. Your participation is important to help us take precautionary measures to protect the health and well-being of you and our employees.

Visitor's Name

Visitor's Phone Number

Visitor's Company/Organization

Name of Marsh Employee Host

Purpose of Visit

SELF DECLARATION BY VISITOR

- | | YES | NO |
|--|--------------------------|--------------------------|
| 1 Have you experienced any cold or flu-like symptoms in the last 14 days?
(to include fever, cough, sore throat, respiratory illness, difficulty breathing, loss of taste or smell) | <input type="checkbox"/> | <input type="checkbox"/> |
| 2 Have you had close contact with or cared for someone diagnosed with COVID-19 within the last 14 days? | <input type="checkbox"/> | <input type="checkbox"/> |
| 3 Have you been in close contact with anyone who has traveled internationally within the last 14 days? | <input type="checkbox"/> | <input type="checkbox"/> |
| 4 Temperature at time of visit? | <input type="text"/> | |

If the answer is "yes" to any of the questions, access to the facility will be denied.

Signature (visitor): _____ Date: _____

Note: If you plan to be on-site for consecutive days, please immediately advise your Marsh host if any of your responses change during your time with us. The information collected on this form will be used to determine your access to Marsh facilities.

Access to Marsh facility (circle one): Approved Denied

In response to any visitors violating our safety protocols, the Company may discontinue business with that visitor or, in its discretion, take a credit of up to 5% against future invoices as a means to deter future violations.



HOME ENTRY AUTHORIZATION: OCCUPIED HOMES



In response to COVID-19, Marsh Furniture Company and Marsh Kitchen & Bath ("Marsh") have implemented new procedures for installing cabinets in your home. These procedures are designed to minimize the spread of the virus.

First, Marsh team members may not come to work or enter a customer's home if they are experiencing any COVID-19 symptoms. To the best of our knowledge no team member entering your home has a confirmed case of COVID-19. We also conduct daily checks to confirm that no team member is exhibiting symptoms or has recently been exposed to anyone with COVID-19 symptoms. Upon entry into your home, our team members will try to maintain a 6' distance from you and your family, will wear a mask, gloves and shoe covers.

Second, before coming into your home, we likewise ask about the health of your family to ensure that we are doing our best to protect the health of our team members. We will not schedule a visit or complete an installation or service if the customer or someone in the household is experiencing any COVID-19 related symptoms.

PLEASE ANSWER THE QUESTIONS BELOW: Circle YES or NO

CUSTOMER NAME: _____

CUSTOMER ADDRESS: _____

Is anyone in the home under quarantine or self-isolation due to COVID-19? YES NO

Has anyone living in the home had a confirmed case of COVID-19? YES NO

If YES, what was the date of diagnosis?

_____ Date

If YES, has the case been resolved?

YES NO

Is there anyone in the home that currently has, or in the past 14 days had, COVID-19 symptoms? (Fever, dry cough, breathing difficulty, loss of taste or smell, etc.) YES NO

*If you answer YES to any of the **bolded** questions, we will reschedule your installation at a later date. Further, by signing this authorization you: 1) certify to Marsh that the information you have provided is accurate, and 2) you authorize Marsh team members to enter your home with the knowledge that an inherent risk of exposure to COVID-19 exists and that you assume all risks related to exposure and agree not to hold Marsh, or any of its directors, officers, employees, agents, or contractors liable for possible exposure or illness.*

Customer Name (Please Print) Date

Customer Signature Date

Marsh Kitchen & Bath Representative Date



TRAVEL RISK ASSESSMENT

Name

Date

Phone Number

Department number

DID YOU RECENTLY RETURN FROM A TRIP?

Where did you travel (city/state/country)? _____

When did you leave? _____

When did you return? _____

What was the purpose of your trip (vacation, visiting family, etc)? _____

Method of travel (please circle): Car Airplane Train Cruise Ship

If returning to work were you exposed to anyone with confirmed
or suspected COVID-19 symptoms while you were away?

YES **NO**

☐☐

Do you, anyone you visited or your travel companions currently have any of the
following symptoms: fever, cough, congestion, sore throat, shortness of breath,
new loss of taste or smell?

☐☐

If yes, please circle the symptoms.

ARE YOU PLANNING AN UPCOMING TRIP?

Where are you planning to travel (city/state/country)? _____

When are you planning to leave? _____

When are you planning to return? _____

What is the purpose of your trip (vacation, visiting family, etc)? _____

Method of travel (please circle): Car Airplane Train Cruise Ship

Reviewed by: _____ Date: _____

DOMESTIC

Before you travel, learn if coronavirus is spreading in your local area or in any of the places you are going.

While you are traveling, it is possible a state or local government may put into place travel restrictions, such as stay-at-home or shelter-in-place orders, mandated quarantines upon arrival, or even state border closures. Follow state and local travel restrictions. If an employee chooses to travel to a destination within the U.S. that is considered a COVID hotspot, Marsh may, at its discretion, require the employee to quarantine for 14 additional days, during which they will not be paid.

INTERNATIONAL

CDC recommends that U.S. travelers defer all cruise travel worldwide, and avoid all nonessential travel to international destinations. If an employee chooses to travel internationally or on a cruise ship, Marsh will require the employee to stay home for 14 additional days, during which they will not be paid.