



**COVID-19 Action Plan for Confirmed Positive or Suspected Cases  
ENGIE NORAM  
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*Attorney Client Communication and Work Product Privileged*

**Purpose and Scope:**

The following is intended to provide guidance to U.S. based ENGIE NORAM entities (ENGIE) regarding mandatory actions to take immediately upon receiving notification that (1) an employee; or (2) a contractor, visitor or other individual who has been in close contact with an employee or who is otherwise at an ENGIE facility or jobsite (“Third Party”), is diagnosed as positive for the COVID 19 virus as determined by CDC-approved testing methods. This guidance has been created in light of the latest guidance offered by the Centers for Disease Control and Prevention (CDC). If the guidance provided in this document later becomes contrary to the guidance provided by the CDC or other federal, state, or local governmental health authority, such other authority controls.

**Definitions:**

The following definitions are prescribed by the [CDC](#):

**Close contact** is defined as:

- a. being within approximately 6 feet (2 meters) of a COVID-19 case for a prolonged period of time; close contact can occur while caring for, living with, visiting, or sharing a healthcare waiting area or room with a COVID-19 case – *or* –
- b. having direct contact with infectious secretions of a COVID-19 case (e.g., being coughed on)

**Self-monitoring** means people should monitor themselves for fever by taking their temperatures twice a day and remain alert for coughing or difficulty breathing. If they feel feverish or develop a measured fever, cough, or difficulty breathing during the self-monitoring

period, they should self-isolate, limit contact with others, and seek advice by telephone from a healthcare provider or their local health department to determine whether medical evaluation is needed.

***Symptoms compatible with COVID-19, for the purpose of this guidance, include subjective or measured fever, cough, or difficulty breathing.***

***Congregate settings*** are crowded public places where close contact with others may occur, such as shopping centers, movie theaters, stadiums.

***Social distancing*** means remaining out of congregate settings, avoiding mass gatherings, and maintaining distance (approximately 6 feet or 2 meters) from others when possible.

Source: [CDC](#).

### **Immediate Actions:**

The functional manager or site supervisor, as determined as a situation may reasonably require, must immediately implement the following actions upon becoming aware that an employee or Third Party may have a positive COVID-19 diagnosis or be at risk for contracting COVID-19 based on an exposure:

***If the employee or Third Party is at an ENGIE Facility or Project Site, including facilities and project sites controlled by ENGIE, and exhibits symptoms:***

1. Immediately separate the employee or Third Party from others. Have a conversation in a non-populated space, staying at least six feet away from the person who might be infected. If masks are available, the person should put a mask on. Avoid handshakes or other physical contact.
2. Immediately contact the local health department for current advice and guidance. In most geographies, an internet search for “local health department” and the location name or ZIP code should provide the contact information on the first page of search results. Most local health departments have 24-hour coverage. When calling, be clear that you have a person who is positive, or at moderate or high risk of COVID-19.
3. If a local health department is unable to or does not respond in a timely fashion, as determined in the acting supervisor or manager’s discretion, instruct the employee or Third Party who might be infected to immediately leave the premises, return home, and seek medical assistance. Instruct him or her to contact his or her health care provider/location by phone in advance to allow for appropriate isolation measures. Employees should be instructed, and Third Party’s advised, to not take public transportation, and should be given a mask, if available.
4. If the employee or Third Party has not yet been tested, but is demonstrating ***symptoms indicative of COVID-19***, work with the employee or Third Party to determine his or her Risk Level based on CDC Guidance as presented in Attachment 1. Encourage the employee or Third Party to take the Coronavirus Self-Checker on the CDC website, and if deemed necessary, seek actual testing. Employees must report test results, positive or negative, to their respective supervisor. <https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/index.html>.
5. If the individual is identified as High or Medium Risk and demonstrating symptoms indicative of COVID-19, ENGIE HR or H&S representatives will interview the individual to identify co-workers or others with whom he or she has been in ***close contact***.

6. ENGIE representatives should immediately contact the employee's or Third Party's supervisor to determine additional close-contact personnel and confirm the individual's reported close contacts. ENGIE representatives must maintain the individual's confidentiality and determine necessary social distancing measures (self-quarantine) for those who have medium risk exposures.
7. If the individual has an assigned work station, is handling common tools/equipment, or has visited common areas (elevators, kitchen, bathrooms, lunch/conference room), those areas should be immediately secured, prohibiting other employees or Third Party's from access, and cleaned using guidance provided in Attachment 3 (Environmental Cleaning and Disinfection).
8. Inform the employee or Third Party that ENGIE reserves the right to request medical clearance before the employee is allowed to return to work, and with respect to Third Parties, before the individual is permitted to return to facilities or jobsites owned or controlled by ENGIE.

***If the employee or Third Party is exhibiting COVID-19 symptoms and notifies an ENGIE NORAM Entity, Facility, or Project site before coming to the site:***

1. With respect to employees or Third Parties who work at facilities or jobsites owned or controlled by ENGIE, instruct the employee or Third Party to not come to the site. Further, regarding employees, advise them to self-monitor and to contact their personal healthcare provider for guidance.
2. If the employee or Third Party is demonstrating symptoms consistent with COVID-19, assist the individual to determine his or her Risk Level Based on CDC Guidance Risk Assessment Guidance presented in Attachment 1. The individual (employee or Third Party) should seek medical advice, as only a health care professional can order testing.

***If the employee or Third Party is diagnosed with COVID-19, tests positive, or is in the High or Medium-Risk level:***

1. Those in the Medium and High-risk levels, and positive test results, or diagnosis by healthcare professionals should be reported to ENGIE on a confidential and need to know basis. In these cases, the functional manager or supervisor handling the case should complete and submit the COVID-19 Confirmed Positive Report Form presented in Attachment 2 to ENGIE HR and H&S.
2. Contact the local health department for current advice and guidance. In most geographies, an internet search for "local health department" and the location name or ZIP code should provide the contact information on the first page of search results. Most local health departments have 24-hour coverage. When calling, be clear that you have a person who is positive, or at moderate or high risk of COVID-19.
3. If a local health department is unable to respond, or does not respond in a timely fashion, as determined in the manager or supervisor's discretion, instruct the employee or Third Party to immediately leave the premises, and in the case of employees, to return home. If the individual is symptomatic or at high risk per Attachment 1, advise him or her to seek medical assistance immediately. For employees, instruct them to contact their personal health care provider/location by phone in advance to allow for appropriate isolation measures. Note that employees should seek professional medical advice, as only a qualified health care professional can order testing.

4. If the individual is identified as High or Medium-risk and demonstrating symptoms indicative of COVID-19, ENGIE HR or H&S representatives will interview the individual to identify others on the worksite with whom they have been in **close contact**.
5. ENGIE representatives should immediately contact the individual's supervisor to identify additional close-contact individuals, and confirm the individual's reported close contacts. ENGIE representatives must maintain the individual's confidentiality and determine necessary social distancing measures (self-quarantine) for those who have medium risk exposures.
6. If the individual has an assigned work station, and has recently visited the office or site and handled common tools/equipment, or visited common areas (elevators, kitchen, bathrooms, lunch/conference room), those areas should be immediately secured, prohibiting other employees or Third Parties from access, and cleaned using guidance provided in Attachment 3 (Environmental Cleaning and Disinfection).
7. Inform the employee or Third Party that ENGIE reserves the right to request medical clearance before the individual is allowed to return to the site.
8. Complete and submit the COVID Confirmed Positive Report Form presented in Attachment 2, if applicable.

***If the employee or Third Party is at low risk:***

1. Those with low risk exposures are not restricted from public spaces as long as they have no symptoms and should self-observe for 14 days.
2. Recommend that those with low-risk exposures check their temperature before coming to work. Any person with a temperature of over 100.4 or with respiratory symptoms should not come to work.
3. If the employee or Third Party develops further symptoms during a 14-day isolation time, recommend he or she contact a healthcare professional, and assist the individual to determine his or her Risk Level Based on CDC Guidance presented in Attachment 1.
4. There is no recommendation for testing, symptom monitoring, or special management of those who are "contacts of contacts."

***If the employee or Third Party is at a facility or site NOT controlled by ENGIE and exhibits symptoms or has been confirmed positive for COVID-19:***

1. **Employees:** The same protocols described above shall apply to all ENGIE employees, regardless of who controls the facility or jobsite.
2. **Third Parties:**
  - a. ENGIE's functional manager or site supervisor should encourage the Third Party to leave the facility or jobsite and to follow the protocols described above.
  - b. If the Third Party refuses to leave the facility or jobsite or to follow the protocols described above:
    - i. Immediately inform the person in charge of the facility or jobsite of the situation so that he or she may take appropriate steps; and
    - ii. Immediately inform all ENGIE employees at that facility or jobsite that they must avoid close contact with that individual until further notice.

Attachment 1		
U.S. Centers for Disease Control and Prevention - Risk Categories for Exposures Associated with Travel or Identified during Contact Investigations of Laboratory-confirmed Cases		
Risk Level	Travel-associated Exposures*	Exposures Identified through Contact Investigation
<b>High</b>	Not applicable	Living in the same household as, being an intimate partner of, or providing care in a nonhealthcare setting (such as a home) for a person with symptomatic laboratory-confirmed COVID-19 infection without using recommended precautions for home care and home isolation
<b>Medium</b> (assumes no exposures in the high-risk category)	<ul style="list-style-type: none"> <li>- Travel from a country with widespread sustained transmission</li> <li>- Travel from a country with sustained community transmission</li> <li>- Travel on a cruise ship or river boat</li> </ul>	<ul style="list-style-type: none"> <li>- Close contact with a person with symptomatic laboratory-confirmed COVID-19</li> <li>- On an aircraft, being seated within 6 feet (two meters) of a traveler with symptomatic laboratory-confirmed COVID-19 infection; this distance correlates approximately with 2 seats in each direction</li> <li>- Living in the same household as, an intimate partner of, or caring for a person in a nonhealthcare setting (such as a home) to a person with symptomatic laboratory-confirmed COVID-19 infection <b>while consistently using recommended precautions</b> for <a href="#">home care</a> and <a href="#">home isolation</a></li> </ul>
<b>Low</b> (assumes no exposures in the high-risk category)	Not applicable	Being in the same indoor environment (e.g., a classroom, a hospital waiting room) as a person with symptomatic laboratory-confirmed COVID-19 for a prolonged period of time but not meeting the definition of close contact
<b>No identifiable risk</b>	Not applicable	Interactions with a person with symptomatic laboratory-confirmed COVID-19 infection that do not meet any of the high-, medium- or low-risk conditions above, such as walking by the person or being briefly in the same room.

Source: [Centers for Disease Control and Prevention](#)

**Attachment 2**  
**Questionnaire for Reporting Confirmed Positive COVID-19 Cases**  
**ENGIE North America**

The following is required to be submitted to your ENGIE NORAM Human Resources and Health & Safety contact immediately upon notification that an ENGIE NORAM employee is designated as a Confirmed Positive through recognized medical tests. ***Please note that an employee's name should not be used in this report or associated emails under any conditions.***

1. Reporting Company:
2. Location (City):
3. Date Case Confirmed:
4. Individuals Job or Trade:
5. Date of Initial Symptoms:
6. Describe measures were implemented locally (e.g. working from home, etc.):
7. Specific Local Status (e.g. Shelter-in-Place, etc.):
8. Source of Infection, if known:
9. Where is the individual today and what is his or her physical condition?
10. Have the local authorities or the client been notified?
11. What are the measures being put in place to protect the other employees who may have had close contact for a prolonged time with the individual?
12. Has there been any communication with other employees, contractors, or clients?

**Attachment 3**  
**U.S. Centers for Disease Control and Prevention: Environmental Cleaning and Disinfection Recommendations**

Interim Recommendations for US Community Facilities with Suspected/Confirmed Coronavirus Disease 2019

- [Background](#)
- [Purpose](#)
- [Definitions](#)
- [Cleaning and Disinfection After Persons Suspected/Confirmed to Have COVID-19 Have Been in the Facility](#)
- [How to Clean and Disinfect](#)
- [Personal Protective Equipment \(PPE\) and Hand Hygiene:](#)
- [Additional Considerations for Employers:](#)

**Background**

There is much to learn about the novel coronavirus that causes [coronavirus disease 2019](#) (COVID-19). Based on what is currently known about the virus, spread from person-to-person happens most frequently among close contacts (within about 6 feet). This type of transmission occurs via respiratory droplets. Transmission of novel coronavirus to persons from surfaces contaminated with the virus has not been documented. Transmission of coronavirus in general occurs much more commonly through respiratory droplets than through fomites. Current evidence suggests that novel coronavirus may remain viable for hours to days on surfaces made from a variety of materials. Cleaning of visibly dirty surfaces followed by disinfection is a best practice measure for prevention of COVID-19 and other viral respiratory illnesses in community settings.

**Purpose**

This guidance provides recommendations on the cleaning and disinfection of rooms or areas of those with suspected or with confirmed COVID-19 have visited. It is aimed at limiting the survival of novel coronavirus in key environments. These recommendations will be updated if additional information becomes available.

These guidelines are focused on community, non-healthcare facilities (e.g., schools, institutions of higher education, offices, daycare centers, businesses, community centers) that do and do not house persons overnight. These guidelines are not meant for [cleaning staff in healthcare facilities](#) or repatriation sites, [households](#), or for others for whom specific guidance already exists.

### Definitions

- *Community facilities* (e.g., schools, daycares centers, businesses) comprise most non-healthcare settings that are visited by the general public outside of a household.
- *Cleaning* refers to the removal of dirt and impurities, including germs, from surfaces. Cleaning alone does not kill germs. But by removing the germs, it decreases their number and therefore any risk of spreading infection.
- *Disinfecting* works by using chemicals to kill germs on surfaces. This process does not necessarily clean dirty surfaces or remove germs. But killing germs remaining on a surface after cleaning further reduces any risk of spreading infection.

Cleaning and Disinfection After Persons Suspected/Confirmed to Have COVID-19 Have Been in the Facility

### Timing and location of cleaning and disinfection of surfaces

- At a school, daycare center, office, or other facility that does not house people overnight:
  - It is recommended to **close off areas used by the ill persons and wait as long as practical before beginning cleaning and disinfection** to minimize potential for exposure to respiratory droplets. **Open outside doors and windows to increase air circulation in the area.** If possible, wait up to 24 hours before beginning cleaning and disinfection.
  - **Cleaning staff should clean and disinfect all areas (e.g., offices, bathrooms, and common areas) used by the ill persons**, focusing especially on frequently touched surfaces.



- At a facility that does house people overnight:
  - Follow Interim Guidance for [US Institutions of Higher Education](#) on working with state and local health officials to isolate ill persons and provide temporary housing as needed.
  - It is recommended to **close off areas used by the ill persons and wait as long as practical before beginning cleaning and disinfection** to minimize potential for exposure to respiratory droplets. **Open outside doors and windows to increase air circulation in the area.** If possible, wait up to 24 hours before beginning cleaning and disinfection.
  - In areas where ill persons are being housed in isolation, follow [Interim Guidance for Environmental Cleaning and Disinfection for U.S. Households with Suspected or Confirmed Coronavirus Disease 2019](#). This includes **focusing on cleaning and disinfecting common areas where staff/others providing services may come into contact with ill persons, but reducing cleaning and disinfection of bedrooms/bathrooms used by ill persons to as needed.**
  - In areas where ill persons have visited or used, continue routine cleaning and disinfection as in this guidance.

## How to Clean and Disinfect

### Surfaces

- If surfaces are dirty, they should be cleaned using a detergent or soap and water prior to disinfection.
- For disinfection, diluted household bleach solutions, alcohol solutions with at least 70% alcohol, and most common EPA-registered household disinfectants should be effective.
  - Diluted household bleach solutions can be used if appropriate for the surface. Follow manufacturer's instructions for application and proper ventilation. Check to ensure the product is not past its expiration date. Never mix household bleach with ammonia or any other cleanser. Unexpired household bleach will be effective against coronaviruses when properly diluted.

- Prepare a bleach solution by mixing:
  - 5 tablespoons (1/3<sup>rd</sup> cup) bleach per gallon of water or
  - 4 teaspoons bleach per quart of water
  - [Products with EPA-approved emerging viral pathogens claim](#)<sup>external icon</sup> are expected to be effective against COVID-19 based on data for harder to kill viruses. Follow the manufacturer's instructions for all cleaning and disinfection products (e.g., concentration, application method and contact time, etc.).
  - For soft (porous) surfaces such as carpeted floor, rugs, and drapes, remove visible contamination if present and clean with appropriate cleaners indicated for use on these surfaces. After cleaning:
    - If the items can be laundered, launder items in accordance with the manufacturer's instructions using the warmest appropriate water setting for the items and then dry items completely.
    - Otherwise, use products with the EPA-approved emerging viral pathogens claims (examples can be found at [this link](#)) that are suitable for porous surfaces.

#### **Linens, Clothing, and Other Items That Go in the Laundry**

- Do not shake dirty laundry; this will minimize the possibility of dispersing virus through the air.
- Wash items as appropriate in accordance with the manufacturer's instructions. If possible, launder items using the warmest appropriate water setting for the items and dry items completely. Dirty laundry that has been in contact with an ill person can be washed with other people's items.
- Clean and disinfect hampers or other carts for transporting laundry according to guidance above for hard or soft surfaces.

#### **Personal Protective Equipment (PPE) and Hand Hygiene:**

- **Cleaning staff should wear disposable gloves and gowns for all tasks in the cleaning process, including handling trash.**
  - Gloves and gowns should be compatible with the disinfectant products being used.

- Additional PPE might be required based on the cleaning/disinfectant products being used and whether there is a risk of splash.
- Gloves and gowns should be removed carefully to avoid contamination of the wearer and the surrounding area. Be sure to **clean hands** after removing gloves.
- Gloves should be removed after cleaning a room or area occupied by ill persons. **Clean hands** immediately after gloves are removed.
- Cleaning staff should immediately report breaches in PPE (e.g., tear in gloves) or any potential exposures to their supervisor.
- **Cleaning staff and others should clean hands often**, including immediately after removing gloves and after contact with an ill person, by washing hands with soap and water for 20 seconds. If soap and water are not available and hands are not visibly dirty, an alcohol-based hand sanitizer that contains 60%-95% alcohol may be used. However, if hands are visibly dirty, always wash hands with soap and water.
- Follow normal preventive actions while at work and home, including cleaning hands and avoiding touching eyes, nose, or mouth with unwashed hands.
  - Additional key times to clean hands include:
    - After blowing one's nose, coughing, or sneezing
    - After using the restroom
    - Before eating or preparing food
    - After contact with animals or pets
    - Before and after providing routine care for another person who needs assistance (e.g., a child)

#### Additional Considerations for Employers:

- Employers should work with their local and state health departments to ensure appropriate local protocols and guidelines, such as updated/additional guidance for cleaning and disinfection, are followed, including for identification of new potential cases of COVID-19.
- Employers should educate staff and workers performing cleaning, laundry, and trash pick-up activities to recognize the symptoms of COVID-19 and provide instructions on

what to do if they develop [symptoms](#) within 14 days after their last possible exposure to the virus. At a minimum, any staff should immediately notify their supervisor and the local health department if they develop symptoms of COVID-19. The health department will provide guidance on what actions need to be taken. When working with your local health department check their available hours.

- Employers should develop policies for worker protection and provide training to all cleaning staff on site prior to providing cleaning tasks. Training should include when to use PPE, what PPE is necessary, how to properly don (put on), use, and doff (take off) PPE, and how to properly dispose of PPE.
- Employers must ensure workers are trained on the hazards of the cleaning chemicals used in the workplace in accordance with OSHA's Hazard Communication standard ([29 CFR 1910.1200](#)).
- Employers must comply with OSHA's standards on Bloodborne Pathogens ([29 CFR 1910.1030](#)), including proper disposal of regulated waste, and PPE ([29 CFR 1910.132](#)).