

FirstEnergy Protocol for Confirmed Positive and Presumptive* COVID-19 Cases

This protocol applies to:

- Confirmed positive and presumptive* COVID-19 employee cases, whether the employee is at work or home and/or
- Potential exposure of employee to COVID-19 at work or home

Confirmed positive employee and contractor COVID-19 tests or close contact with a confirmed COVID-19 case will be expedited through the protocol (beginning with Step 3 below). Immediately contact:**

- **Corporate Health and Safety - Patti Cain, 330-814-4061**
 - If not available, contact Dave Winston, 330-414-6303, or Matt Steinmetz, 330-417-7378
- **Business unit leadership**

See Quick Reference Card on page 4.

Protocol

(Confirmed positive or close contact begin at Step 3; Symptomatic or potential exposure begin at Step 1)

1. Employee reports symptoms or details of exposure to either supervisor or local HR
2. Medical evaluation form is completed and submitted by the employee, supervisor or local HR
 - a. [Medical Illness Screening Form \(click here\)](#), or
Access form via coronavirus page on the [Corporate Health and Safety SharePoint](#) site or [myfirststewards.com](#)
 - b. Email to Corporatehealthandsafety@firstenergycorp.com, or
 - c. Contact FirstEnergy Reporting Center at 888-888-9108

3. The following tracks take place simultaneously:

Track I – Local Investigation

Local business unit management/local HR determines if employee is/was in the workplace and potential exposure to co-workers; notifies business unit leadership; notifies local union leadership, as appropriate

- a. Identify co-workers potentially exposed
- b. Isolate at the workplace or send home impacted co-workers out of caution until case is reviewed with medical consultant
- c. Gather details of contact
- d. Report names and contact numbers of impacted co-workers to Patti Cain at 330-814-4061
- e. Demarcate the potentially contaminated space and post appropriate signage until assessment and/or cleaning of the area is completed, as necessary
- f. Identify other work groups that work with the employee and/or occupy or visit the contaminated space and notify appropriate leaders of the situation and restrictions, as necessary. This may result in additional co-workers potentially exposed. In that case, refer to Step 3, Track I, d., and coordinate the reporting with the other work group(s)

NOTE: Management should ensure that the employee and all impacted co-workers get a medical assessment

Track II – Medical Assessment

Nurse case manager contacts the employee directly to complete medical assessment process

- a. Identify primary issue
- b. Medical history
- c. Work history, job information and work status
- d. If employee is/was in the workplace, determine potential exposure to co-workers

- Names of co-workers
 - e. Contact business unit management/local HR to confirm impacted co-workers
 - Local HR to notify supervisor of additional impacted co-workers
 - f. Contact additional impacted co-workers directly to complete medical assessment process
 - g. Complete case summary
 - Identify illness severity, health risks and exposure issues
 - h. Review case with medical consultant
 - i. Speak to and provide medical care recommendation to employee/co-workers
4. Convene discussion with local business unit leader/local HR/Corporate Health & Safety, medical consultant and nurse case manager to discuss medical recommendations which are made on a case-by-case basis by our medical consultant
 - a. Work status of employee/impacted co-workers
 - Remain at work or stay at home based on medical assessment
 - Estimated return-to-work date(s) if possible
 - b. Advise on workplace cleaning recommendations
 - Facility
 - Vehicle
 - Tools and Equipment
 5. Business unit management determines appropriate actions regarding employee, co-workers, and cleaning
 - At a minimum, the business unit must comply with the medical recommendations; additional time off and measures may be taken, if warranted
 - Contact employee/co-workers regarding return to work decision if different from medical recommendation
 - Discuss actions with union leadership, as appropriate
 6. Local HR/business unit management completes follow-up protocol
 - a. Coordinate cleaning for facilities/work areas/vehicles/tools and equipment through local building services group
 - b. Identify other work groups that work with the employee and/or occupy or visit the contaminated space and notify appropriate leaders of the situation and restrictions, as necessary, if not done already. This may result in additional co-workers potentially exposed. In that case, refer to Step 3, Track I, d., and coordinate the reporting with the other work group(s). The following are some, but not all, of the work groups that need to be contacted
 - Corporate Security, Roger Gongos, 330-608-0317
 - Corporate Administrative Services (courier, corporate facilities, etc.), Jen Geyer, 330-612-7916
 - IT Business Systems, Donna Bursick, 724-454-7250
 - IT Network Engineering & Operations, Enterprise Technologies, Steve Osvath, 330-416-8703
 - Contractor Safety (for contractors/subcontractors not directly supervised by FE -- therefore, excludes contractors and contingent labor brought in through Pontoon), Shelley Baber, 724-366-1968
 - Transmission & Substation Engineering, Jeremy Hay, 412-335-4404
 - Transmission Project Management, Ron Ferre, 330-715-8202
 - Transmission & Substation Services, John Martinez, 330-618-2093; backup, Rich Vavrek, 330-607-9923
 - Emerging Technologies, Randy Frame, 330-608-0350
 - Other groups, as appropriate

- c. Check with Corporate Security, Roger Gongos, 330-608-0317, for records of badge use to determine other high-risk locations
 - d. In Pennsylvania, at any location where a confirmed positive or presumptive COVID-19 case is identified, on-site temperature checks must be performed for all employees who enter the site for 14 days beginning the following day
 - Coordinate implementation of the on-site company-administered temperature check procedure outlined in [HR Policy for COVID-19 Temperature Checks](#)
 - Communicate as appropriate to all who report to or may visit the site
 - e. Notify Corporate Communications for awareness, Diane Francis, 330-301-4750
 - f. Local HR or HR Business Partner guides business unit communication with employees using approved communication templates with assistance from Legal and prepared talking points; care should be taken to safeguard protected health information and to avoid identifying individuals to the extent possible given circumstances
7. Nurse case manager follows the case management process through return to work
 8. Business unit management/local HR communicates with local leadership and the work group when employee returns to work using prepared talking points

***Presumptive COVID-19 illness** may include symptoms such as fever, chills, cough, congestion, sore throat, muscle aches, headache, chest ache/discomfort (non-cardiac), shortness of breath, diarrhea, fatigue, loss of appetite and loss of sense of smell.

**** Close contact** is defined as an individual who is living or working with another individual who has COVID-19 frequently within 6 feet and for a prolonged period of time (2 or more continuous hours). This is a risk for the individual to contract the disease. This is a common situation for family members in a home setting. **Casual contact** involves two or more individuals who meet or work together in a limited manner – talking, walking by one another, riding an elevator, sitting in the same room or interacting in the workplace without physical contact and for a limited period of time (generally less than an hour).

Quick Reference Card

Reporting Confirmed Positive and Presumptive* COVID-19 Cases

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April 6, 2020