



# COVID-19

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## PREPAREDNESS AND RESPONSE PLAN

And in keeping with the executive order 2020-91 enforced by Governor Whitmer.

Implemented May 11, 2020

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## Introduction and Purpose

To respond to the current state of emergency related to the novel coronavirus (“COVID19”) and to comply with relevant state and local orders related to COVID-19, MTS Seating has prepared the following COVID-19 Preparedness and Response Plan (“Plan”). This Plan may be updated as this situation evolves or as state or local orders related to COVID-19 are issued or amended.

MTS has developed a COVID Response Team to implement, monitor, and report on the COVID-19 control strategies designed under this plan. This team will consist of a member of our Production Management team, a member of Employee Services, and our Safety Manager.

## **Protective Safety Measures**

### Training

All employees will be provided with COVID-19 training that covers the following areas.

- Workplace infection-control practices.
- The proper use of personal protective equipment. Masks must be worn when an employee is outside their immediate work area or are not maintaining six foot of social distancing. Masks are required for all in-person meetings and in restrooms and hallways.
- Steps the employee must take to notify the business or operation of any symptoms of COVID-19 or a suspected or confirmed diagnosis of COVID-19.
- How to report unsafe working conditions.
- All manufacturing and office personnel will enter the building through dedicated entry points. Manufacturing personnel will come through one of the two plant lunchroom doors, and all office personnel will enter through the main entrance door.

### Sick Leave

Employees are permitted to take paid leave consistent with the Families First Coronavirus Response Act, and any other applicable benefit policies and directive issued under the COVID-19 emergency. Any onsite employee who appears to have a fever or respiratory illness will be separated from other employees and sent home.

### Remote Work

All employees who are not essential to operations and whose job duties reasonably allow them telework will work remotely. Additionally, all business-related travel for employees will be restricted to necessary travel only.

### Employee Screening Before Entering the Workplace

All employees will be required to wear a mask when entering the workplace. All employees must complete a health screening questionnaire before being permitted to enter the workplace. This health screening complies with the screening processes required for manufacturing facilities in the



State of Michigan. Attached as Appendix B is an Employee Health Screening Questionnaire. As part of the screening process, all employees will have their temperatures taken to verify their current temperature is below 100.4 F. Any individual taking employee temperatures will be required to wear appropriate personal protective equipment. If an employee fails the screening process, he or she will be sent home until allowed to return to work under the relevant executive orders or public health orders, which requirements are explained in detail in the Return to Work Plan, attached as Appendix C.

### Enhanced Social Distancing

Supervisors will direct employees to perform their work in such a way to reasonably avoid coming within 6 feet of other individuals to the maximum extent possible through the use of ground markings, signs, and physical barriers, as appropriate to the workplace. Where possible, employees may be relocated or provided additional resources to prevent shared use of offices, desks, telephones, and tools/equipment. The number of employees permitted in any break room or lunchroom shall be limited to ensure social distancing restrictions can be followed. Employees should remain in their assigned work area as much as possible. Employees whose job duties regularly require them to be within 6 feet of other employees will be provided with appropriate personal protective equipment or physical barriers commensurate with their level of risk of exposure to COVID-19.

### Enhanced Hygiene

Employees are instructed to wash their hands frequently, to cover their coughs and sneezes with a tissue, and to avoid touching their faces. Employees will be provided with access to places to frequently wash hands or to access hand sanitizer. Employees will also be provided with access to alcohol wipes and areas to properly dispose of them. Signs regarding proper hand washing methods will be posted in all restrooms. Handshaking is also prohibited to ensure proper hand hygiene.

### Enhanced Cleaning and Disinfecting

Increased cleaning and disinfecting of surfaces, equipment, and other elements of the work environment will be performed regularly using products containing EPA-approved disinfectants.

How to Clean and Disinfect:

- Frequently touched surfaces shall be cleaned with soap and water.
- Then disinfected with spray or wipes. [EPA-registered household disinfectant](#)

Custodial staff and employees will clean high touch surfaces routinely. High touch surfaces include: Tables, doorknobs, light switches, countertops, handles desks, phones, keyboards, toilets, faucets, sinks, etc. Each manufacturing facility will develop a routine schedule for sanitizing. Employees will be provided with access to disposable disinfectant wipes so that any commonly used surfaces can be wiped down before each use.



In the event that an employee that has been in the workplace in the past 14 days tests positive for COVID-19:

- Area(s) used by sick employee temporarily closed off until properly disinfected
- Custodial staff to clean and disinfect all areas used by the sick employee
- Custodial Staff to follow: [CDC Guidelines to Cleaning and Disinfecting Facilities](#)

### Visitors

No visitors should be allowed in the workplace unless they are deemed essential to address an issue related to critical infrastructure functions. All visitors entering the building must wear a mask and shall be screened before entering the building. A screening questionnaire will be utilized to decide if the visitor can enter the building. If a visitor presents with symptoms of COVID-19 or answers yes to any of the screening questions, access to the building will be denied, attached Appendix D. Provide visitor handout regarding what to do if you might have COVID-19, Appendix E, Feeling Sick Fact Sheet.

## **Employees with Suspected or Confirmed COVID-19 Cases**

### Suspected Cases

An employee will be considered to have a Suspected Case of COVID-19 if:

- They are experiencing any of the following COVID-19 symptoms:
- Fever above 100.4 F, chills, new loss of taste or smell, Atypical Continuous Cough, sore throat, muscle pain, Atypical shortness of breath, or difficulty breathing.
- They have been exposed to a COVID-19 positive person, meaning:
- An immediate family member has tested positive for or exhibited symptoms of COVID-19; or In the last 14 days, the employee came in close contact with someone who has tested positive for COVID-19.

If an employee believes that he or she qualifies as a Suspected Case (as described above), he or she must:

- Immediately notify a Supervisor, Employee Services, or the COVID Response Team.
- Self-quarantine for 14 days after the last date of exposure to the COVID positive person; and
- Seek immediate medical care or advice.

If an employee qualifies as a Suspected Case, and the employee worked onsite at anytime following the Suspected Case qualification, the MTS COVID Response Team will:

- Notify all employees who may have come into close contact (being within approximately six feet for a prolonged period of time without PPE) with the employee in the past 14 days (while not disclosing the identity of the employee to ensure the individual's privacy); and
- Ensure that the employee's work area is thoroughly cleaned.



### Confirmed Cases

An employee will be considered a Confirmed Case of COVID-19 if the employee has been performing in-person operations in the past 14 days, and that person tested positive for COVID19.

If an employee believes that he or she qualifies as a Confirmed Case (as described above), he or she must:

- Immediately notify a Supervisor, Employee Services, or the COVID Response Team of his or her diagnosis; and
- Remain out of the workplace until cleared to return to work.

If an employee qualifies as a Confirmed Case, within 24 hours, the MTS COVID Response Team will:

- Notify all employees or suppliers who may have come into close contact with the employee (being within approximately six feet for a prolonged period of time without PPE) in the past 14 days (while not disclosing the identity of the employee to ensure the individual's privacy);
- Ensure that the entire workplace, or affected parts thereof (depending on employee's presence in the workplace), is thoroughly cleaned and disinfected;
- If necessary, close the work area or workplace, until all the required cleaning and disinfecting is completed; and
- Contact the local public health department.

Communicate with employees about the presence of a confirmed case and the cleaning/disinfecting plans and when the workplace will reopen.

### Business Continuity Plans

The MTS COVID Response Team will:

- Work with management to cross-train employees to perform essential functions, so the workplace can operate even if key employees are absent.
- Identify other supply chains for critical goods and services in the event of a disruption.
- Develop an emergency communication plan to communicate important messages to employees.
- Follow Executive Order 2020-36 that prohibits discharging, disciplining, or otherwise retaliating against employees who stay home or who leave work when they are at a particular risk of infecting others with COVID-19.



APPENDIX B

Coronavirus Disease (COVID-19)  
Employee Health Screening

Department: \_\_\_\_\_

Employee Name: \_\_\_\_\_ Date: \_\_\_\_\_

Time In: \_\_\_\_\_

**In the past 24 hours, have you experienced any of the following symptoms:**

Fever (100.4°F or above), Chills, or New loss of taste or smell?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Atypical Continuous Cough, Sore throat, or muscle pain?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Atypical Shortness of Breath or difficulty breathing?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Current temperature:		

If you answer “yes” to any of the symptoms listed above, please do not go into work. Self-isolate at home and contact your primary care physician’s office for direction.

- You should isolate at home for a minimum of 10 days since symptoms first appear.
- You must also have three days without fevers and improvement in respiratory symptoms.

**In the past 14 days, have you:**

Had close contact (within approximately six (6) feet for a prolonged period of time) with an individual diagnosed with Covid-19  Yes  No?

If you answer “yes” to either of these questions, please do not go into work. Self-quarantine at home for 14 days.



Employee Signature

Supervisor Signature

## APPENDIX C

### **EMPLOYEE RETURN TO WORK PLAN**

Consistent with Executive Order 2020-36, employees who fail entrance screening will only be permitted to return to work under the following circumstances.

Employees who test positive for COVID-19 or display one or more of the main symptoms of COVID-19 (fever, chills, new loss of taste or smell, atypical continuous cough, sore throat, muscle pain, or atypical shortness of breath or difficulty breathing) will not be permitted to return to work until either:

1. At least three days (72 hours) have passed since recovery defined as resolution of fever without the use of fever-reducing medications and improvement in respiratory symptoms (e.g., cough, shortness of breath); and,
2. At least ten days have passed since symptoms first appeared; or
3. They receive a negative COVID-19 test.

Employees\* who have been in “close contact” (being within approximately six feet for a prolonged period of time) with an individual who tests positive for COVID-19 or who displays one or more of the main symptoms of COVID-19 will not be permitted to return to work until either:

1. 14 days have passed since the last close contact with the sick or symptomatic individual;  
or
2. The symptomatic individual receives a negative COVID-19 test.



APPENDIX D

Coronavirus Disease (COVID-19)  
Visitor Health Screening

Visitors Name: \_\_\_\_\_

Appointment Date: \_\_\_\_\_ Time In: \_\_\_\_\_

**In the past 24 hours, have you experienced any of the following symptoms:**

Fever? (100.4°F or above) , Chills, or New loss of taste or smell?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Atypical Continuous Cough, Sore throat, or muscle pain?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Atypical Shortness of Breath or difficulty breathing?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Current temperature:	

If the visitor answered “yes” to any of the symptoms listed above, visitor would not be allowed access to the building. Visitor handed CDC Handout: Sick with COVID-19 Fact Sheet.

**In the past 14 days, have you:**

Had close contact (within approximately six (6) feet for a prolonged period of time) with an individual diagnosed with Covid-19  Yes  No?

Traveled via airplane internationally or domestically?  Yes  No

If the visitor answered “yes” to either of these questions, visitor would not be allowed access to the building. Visitor handed CDC Handout: Sick with COVID-19 Fact Sheet.

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Date: \_\_\_\_\_ Time: \_\_\_\_\_ Procurement Manager: \_\_\_\_\_

## APPENDIX E

### **Quick Links and Resources:**

Governor Whitmer's Executive Order 2020-91:

[https://www.michigan.gov/whitmer/0,9309,7-387-90499\\_90705-529474--,00.html](https://www.michigan.gov/whitmer/0,9309,7-387-90499_90705-529474--,00.html)

FAQs from Governor Whitmer on Executive Order 2020-77:

[https://www.michigan.gov/coronavirus/0,9753,7-406-98178\\_98455-528528--,00.html](https://www.michigan.gov/coronavirus/0,9753,7-406-98178_98455-528528--,00.html)

Helpful CDC Guidance:

<https://www.cdc.gov/coronavirus/2019-ncov/community/guidance-business-response.html>

CDC Posters:



How to Wash  
Your Hands



Feeling Sick  
Fact Sheet



Stop the Spread  
of Germs Poster