#### La Crosse Center Expansion & Renovation

Monthly Summary: February 2021 La Crosse, Wisconsin













March 4, 2021

As we conclude the month of February and start working into March, this report details some of the major site activities completed through this month. There is also a brief list showing the activities we will have upcoming in the month of March. Attached is the overall project schedule and some pictures of work completed in February.

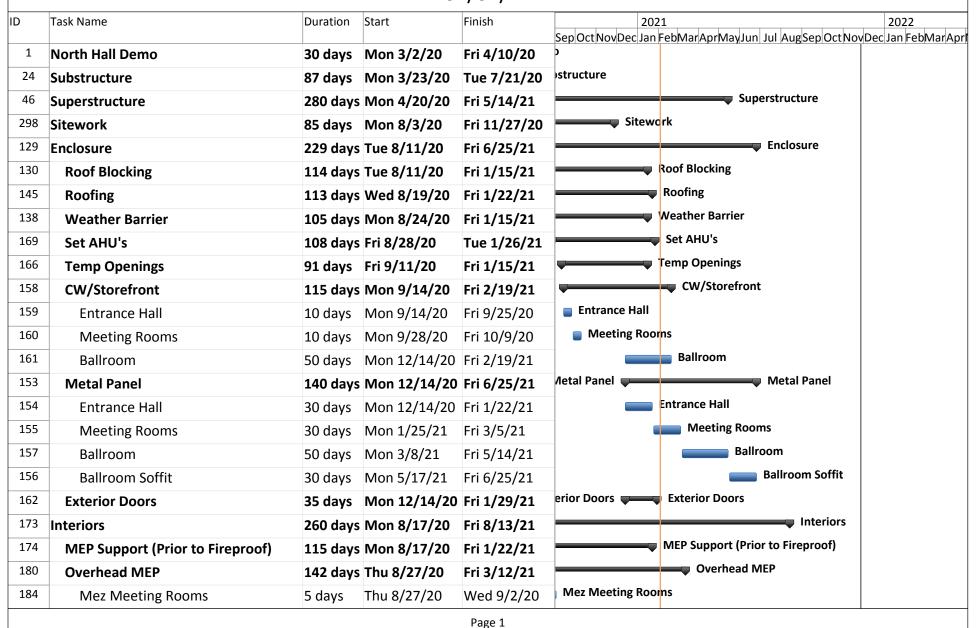
**COVID-19 UPDATE:** Kraus-Anderson has implemented specific jobsite protocol to minimize the job site impact of COVID-19. All onsite personnel are required to complete a daily screening questionnaire to ensure potentially infected people are not allowed onsite. Should a questionnaire indicate a potentially infected individual, a response plan is put in place; before the individual is allowed to return to the jobsite, a return-to-work form must be accepted by the superintendent. Some of Kraus-Anderson's best management practices that have been adopted onsite include limiting job trailer access solely to the two Kraus-Anderson superintendents, holding virtual meetings, wearing masks 100% of the time, maintaining at least six feet between each other when possible, installing hand sanitizer stations throughout the site, and disinfecting portable restrooms, door handles, and other high-touch surfaces multiple times a day. Attached are the aforementioned documents put forth by Kraus-Anderson and made available to all onsite personnel.

Work completed in February and in progress:

- Installed box office countertop and windows
- Installed office level flooring
- Turned over office level
- Painted meeting level walls and soffits
- Installed meeting level suspended ceilings
- Installed meeting level doors and hardware
- Installed grand stair handrails
- Fireproofed Ballroom roof steel
- Installing North side metal wall panels
- Installing Ballroom curtain wall
- Installing Ballroom MEPs
- Installing Ballroom interior walls
- Installing concourse level and office level furniture

#### Upcoming work in March:

- Install Ballroom metal wall panels
- Install Ballroom operable partition track
- Install ballroom level coiling fire doors
- Install Radisson corridor flooring
- Begin demolition of the concourse level East Connector



D	Task Name	Duration	Start	Finish	2021	2022
10-					Sep Oct Nov Dec Jan Feb Mar Apr May Jun Jul Aug Sep Oct	Nov Dec Jan Feb Ma
183	Meeting Rooms	5 days	Mon 8/31/20	Fri 9/4/20	Meeting Rooms	
182	Entrance Hall	15 days	Mon 9/21/20	Fri 10/9/20	Entrance Hall	
181	North Hall	15 days	Mon 10/19/20	Fri 11/6/20	North Hall	
185	Ballroom	20 days	Mon 2/15/21	Fri 3/12/21	Ballroom	
186	Studs	132 days	Thu 9/3/20	Fri 3/5/21	Studs	
190	Mez Meeting Rooms	10 days	Thu 9/3/20	Wed 9/16/20	Mez Meeting Rooms	
189	Meeting Rooms	10 days	Mon 9/7/20	Fri 9/18/20	Meeting Rooms	
188	Entrance Hall	10 days	Mon 10/5/20	Fri 10/16/20	Entrance Hall	
187	North Hall	15 days	Mon 10/19/20	Fri 11/6/20	North Hall	
191	Ballroom	15 days	Mon 2/15/21	Fri 3/5/21	<b>Ballroom</b>	
192	MEP In Wall Rough In	137 days	Thu 9/17/20	Fri 3/26/21	MEP In Wall Rough In	
196	Mez Meeting Rooms	20 days	Thu 9/17/20	Wed 10/14/20	Mez Meeting Rooms	
195	Meeting Rooms	20 days	Mon 9/21/20	Fri 10/16/20	Meeting Rooms	
194	Entrance Hall	5 days	Mon 10/19/20	Fri 10/23/20	<b>◎</b> Entrance Ha <mark>ll</mark>	
193	North Hall	5 days	Mon 11/9/20	Fri 11/13/20	<b>⋒ North Ha</b> ll	
197	Ballroom	15 days	Mon 3/8/21	Fri 3/26/21	Ballroom	
288	Elevator/Escalator	50 days	Mon 10/19/20	Fri 12/25/20	ator Ele <mark>vator/Escalator</mark>	
290	Freight Elevator DD	50 days	Mon 10/19/20	Fri 12/25/20	Freight Elevator DD	
291	Passenger Elevator CC	30 days	Mon 11/2/20	Fri 12/11/20	Passenger Elevator CC	
289	Escalators	20 days	Mon 11/30/20	Fri 12/25/20	Esc <mark>a</mark> lators	
198	Drywall	130 days	Mon 10/26/20	Fri 4/23/21	/wall Drywall	
200	Entrance Hall	15 days	Mon 10/26/20	Fri 11/13/20	Entrance Hall	
199	North Hall	15 days	Mon 11/9/20	Fri 11/27/20	North Hall	
202	Mez Meeting Rooms	40 days	Mon 11/30/20	Fri 1/22/21	Mez Meeting Rooms	

				2/04/21			
)	Task Name	Duration	Start	Finish	Son Oct No.	202	2022 FebMarAprMayJun Jul AugSep OctNovDec Jan FebMa
201	Meeting Rooms	35 days	Mon 1/11/21	Fri 2/26/21	Seploctino	Decjan	Meeting Rooms
203	Ballroom	20 days	Mon 3/29/21	Fri 4/23/21	_		Ballroom
283	Ceiling Paint (Dryfall)	87 days	Mon 11/16/20	Tue 3/16/21	Dryfall) 🐷		Ceiling Paint (Dryfall)
285	Entrance Hall	2 days	Mon 11/16/20	Tue 11/17/20	1	Entrance	Hall
284	North Hall	2 days	Mon 11/30/20	Tue 12/1/20		North	Hall
286	Meeting Rooms (Lobby N401)	2 days	Mon 3/1/21	Tue 3/2/21			Meeting Rooms (Lobby N401)
287	Ballroom	2 days	Mon 3/15/21	Tue 3/16/21			<sub> </sub> Ballroom
204	Paint	119 days	Tue 12/1/20	Fri 5/14/21	Paint (		Paint
206	Entrance Hall	5 days	Tue 12/1/20	Mon 12/7/20		Entrai	nce Hall
205	North Hall	10 days	Tue 12/8/20	Mon 12/21/20		Nor	th Hall
207	Meeting Rooms	5 days	Wed 3/3/21	Tue 3/9/21			Meeting Rooms
208	Mez Meeting Rooms	5 days	Wed 3/3/21	Tue 3/9/21			Mez Meeting Rooms
209	Ballroom	15 days	Mon 4/26/21	Fri 5/14/21			Ballroom
210	Tile	129 days	Tue 12/8/20	Fri 6/4/21	Tile	<b>—</b>	Tile
212	Entrance Hall	15 days	Tue 12/8/20	Mon 12/28/20		Ent	rance Hall
211	North Hall	5 days	Tue 12/22/20	Mon 12/28/20		No	th Hall
213	Ballroom	15 days	Mon 5/17/21	Fri 6/4/21	-		Ballroom
214	Millwork/Woodwork	129 days	Tue 12/8/20	Fri 6/4/21	Voodwork		Millwork/Woodwork
216	Entrance Hall	5 days	Tue 12/8/20	Mon 12/14/20		Entra	nce Hall
215	North Hall	2 days	Tue 12/22/20	Wed 12/23/20		Nor	th Hall
217	Mez Meeting Rooms	2 days	Wed 3/10/21	Thu 3/11/21			Mez Meeting Rooms
218	Meeting Rooms	2 days	Wed 3/10/21	Thu 3/11/21			Meeting Rooms
219	Ballroom	15 days	Mon 5/17/21	Fri 6/4/21			Ballroom
220	Wall Protection	124 days	Tue 12/8/20	Fri 5/28/21	Protection	_	Wall Protection

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)	Task Name	Duration	Start	Finish		2021 2022
222	Entrance Hall	5 days	Tue 12/8/20	Mon 12/14/20		Jan FebMarAprMayJun Jul AugSep OctNovDec Jan FebM Entrance Hall
221	North Hall	-	Tue 12/22/20	Mon 1/4/21		North Hall
223	Meeting Rooms	•	Wed 3/10/21	Tue 3/23/21		■ Meeting Rooms
224		,	Wed 3/10/21 Wed 3/10/21	Tue 3/23/21 Tue 3/16/21		Mez Meeting Rooms
225	Mez Meeting Rooms Ballroom	5 days				Ballroom
		•	Mon 5/17/21	Fri 5/28/21	MEP Trims	MEP Trims
230	MEP Trims	-	Tue 12/8/20	111 0/ 11/ 21	· ·	·
232	Entrance Hall	10 days	Tue 12/8/20	Mon 12/21/20		Entrance Hall
231	North Hall	15 days	Tue 12/22/20	Mon 1/11/21		North Hall
233	Meeting Rooms	5 days	Wed 3/10/21	Tue 3/16/21		Meeting Rooms
234	Mez Meeting Rooms	5 days	Wed 3/10/21	Tue 3/16/21		Mez Meeting Rooms
235	Ballroom	20 days	Mon 5/17/21	Fri 6/11/21		Ballroom
236	Ceiling Grid	124 days	Tue 12/8/20	Fri 5/28/21	eiling Grid 🔎	Ceiling Grid
238	Entrance Hall	5 days	Tue 12/8/20	Mon 12/14/20	<b>.</b> E	Entrance Hall
237	North Hall	2 days	Tue 12/22/20	Wed 12/23/20		North Hall
239	Meeting Rooms	5 days	Wed 3/10/21	Tue 3/16/21		Meeting Rooms
240	Mez Meeting Rooms	3 days	Wed 3/10/21	Fri 3/12/21		Mez Meeting Rooms
241	Ballroom	10 days	Mon 5/17/21	Fri 5/28/21		Ballroom
242	Ceiling Tile	139 days	Tue 12/22/20	Fri 7/2/21	Ceiling Tile	Ceiling Tile
244	Entrance Hall	3 days	Tue 12/22/20	Thu 12/24/20	•	Entr <mark>ance Hall</mark>
243	North Hall	3 days	Tue 1/12/21	Thu 1/14/21		North Hall
245	Meeting Rooms	3 days	Wed 3/17/21	Fri 3/19/21		Meeting Rooms
246	Mez Meeting Rooms	2 days	Wed 3/17/21	Thu 3/18/21		Mez Meeting Rooms
247	Ballroom	15 days	Mon 6/14/21	Fri 7/2/21		Ballroom
269	Operable Walls/WON Doors	137 davs	Thu 12/24/20	Fri 7/2/21	WON Doors	Operable Walls/WON Doors

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)	Task Name	Duration	Start	Finish	2021	2022
					1	ar Apr May Jun Jul Aug Sep Oct Nov Dec Jan Feb Mar
270	NH WON Doors	5 days	Thu 12/24/20	Wed 12/30/20		
272	NH Air Wall	10 days	Tue 1/12/21	Mon 1/25/21	NH A	ir Wall
271	Box Seat Fire Door	2 days	Wed 3/17/21	Thu 3/18/21		Box Seat Fire Door
273	Meeting Room Air Wall	5 days	Wed 3/17/21	Tue 3/23/21		Meeting Room Air Wall
274	Ballroom Air Wall	15 days	Mon 6/14/21	Fri 7/2/21		Ballroom Air Wall
254	Fluid Applied Flooring	146 days	Fri 12/25/20	Fri 7/16/21	lied Flooring	Fluid Applied Flooring
255	Entrance Hall	2 days	Fri 12/25/20	Mon 12/28/20	<b>₽ Ent</b> rance	Hall
256	North Hall	2 days	Fri 1/15/21	Mon 1/18/21	<b>₽</b> North	Hall
257	Ballroom	10 days	Mon 7/5/21	Fri 7/16/21		<b>Ballroom</b>
258	Carpeting	156 days	Fri 12/25/20	Fri 7/30/21	Carpeting	Carpeting
259	Entrance Hall Offices	5 days	Fri 12/25/20	Thu 12/31/20	<b>■</b> Entrance	e Hall Offices
261	Mez Meeting Rooms	5 days	Fri 3/19/21	Thu 3/25/21		Mez Meeting Rooms
260	Meeting Rooms	15 days	Mon 3/22/21	Fri 4/9/21		Meeting Rooms
262	Ballroom	20 days	Mon 7/5/21	Fri 7/30/21		Ballroom
280	Window Shades	85 days	Mon 3/22/21	Fri 7/16/21	Window Shades	<b>↓</b> Window Shadεs
281	Meeting Rooms	5 days	Mon 3/22/21	Fri 3/26/21		Meeting Rooms
282	Ballroom	10 days	Mon 7/5/21	Fri 7/16/21		Ballroom
248	Doors and Hardware	155 days	Fri 1/1/21	Thu 8/5/21	ınd Hardware	Doors and Hardware
250	Entrance Hall	3 days	Fri 1/1/21	Tue 1/5/21	<b>₽ En</b> tranc	e Hall
249	North Hall	3 days	Tue 1/19/21	Thu 1/21/21	North	Hall
251	Mez Meeting Rooms	3 days	Fri 3/26/21	Tue 3/30/21		Mez Meeting Rooms
252	Meeting Rooms	2 days	Mon 4/12/21	Tue 4/13/21		Meeting Rooms
253	Ballroom	4 days	Mon 8/2/21	Thu 8/5/21		<b>₿ Ballroom</b>
263	Signage	156 days	Fri 1/1/21	Fri 8/6/21	Signage	Signage

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D	Task Name	Duration	Start	Finish	2021	2022
265	Entrance Hall	3 days	Fri 1/1/21	Tue 1/5/21	Sep Oct NovDec Jan FebMarAprMayJun Jul AugSep Oct Nov  Entrance Hall	/Dec Jan Feb Mar Api
264	North Hall	3 days	Tue 1/19/21	Thu 1/21/21	North Hall	
266	Mez Meeting Rooms		Fri 3/26/21	Mon 3/29/21	<u> </u>	
267		2 days			Meeting Rooms	
	Meeting Rooms	•	Mon 4/12/21	Tue 4/13/21		
268	Ballroom	•	Mon 8/2/21	Fri 8/6/21	<b> </b>	
275	AV Equipment	149 days	Tue 1/19/21	Fri 8/13/21	AV Equipment AV Equipm	ent
276	North Hall	5 days	Tue 1/19/21	Mon 1/25/21	North Hall	
277	Meeting Room	5 days	Fri 3/26/21	Thu 4/1/21	Meeting Room	
278	Mez Meeting Rooms	5 days	Mon 4/12/21	Fri 4/16/21	Mez Meeting Rooms	
279	Ballroom	10 days	Mon 8/2/21	Fri 8/13/21	<b>Baliroom</b>	
226	<b>Toilet Partitions</b>	5 days	Mon 6/7/21	Fri 6/11/21	Toilet Partitions 📦 Toilet Partitions	
227	Ballroom	5 days	Mon 6/7/21	Fri 6/11/21	Ballroom	
228	Kitchen Equipment	15 days	Mon 7/19/21	Fri 8/6/21	Kitchen Equipment 🛶 Kitchen Equ	pment
229	Ballroom	15 days	Mon 7/19/21	Fri 8/6/21	Ballroom	
292	Punchlist and Inspections	233 days	Wed 1/6/21	Fri 11/26/21	nd Inspections	Punchlist and Ins
293	Entrance Hall	19 days	Wed 1/6/21	Mon 2/1/21	Entrance Hall	
294	North Hall	6 days	Fri 1/22/21	Fri 1/29/21	North Hall	
296	Occupancy Entrance Hall/North Hall	0 days	Mon 2/1/21	Mon 2/1/21	<ul><li>2/1</li></ul>	
295	Ballroom/Meeting Rooms	75 days	Mon 8/16/21	Fri 11/26/21		Ballroom/Meeting
297	Occupancy Ballroom/Meeting Rooms	0 days	Fri 11/26/21	Fri 11/26/21		11/26
300	East Corridor Remodel	132 days	Mon 3/1/21	Tue 8/31/21	East Corri	dor Remodel

















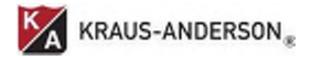












#### **COVID-19 SCREENING QUESTIONNAIRE**

Pr	oject / Location Name:
tał	response to the Coronavirus (COVID-19) pandemic and State and Federal Government guidelines, KA is king precautions to lessen the spread of the virus. All individuals who enter a KA office or jobsite must be reened until further notice.
ΡI	ease answer the following screening questions:
1.	Have you (a) within the past 14 days returned from, or been exposed to anyone who returned from, any Level 2 or Level 3 travel country designated by the Centers for Disease Control ("CDC") (examples include China, Europe, South Korea, Iran, Iceland, Japan, etc.); or (b) within the past 10 days utilized domestic air travel?
	YES NO
2.	To the best of your knowledge, have you been diagnosed with COVID-19 or have you been exposed* to someone who has been diagnosed with COVID-19 within the ten (10) days prior to the person's diagnosis (*you have been "exposed" to someone diagnosed with COVID-19 if (a) you were a member of their household or providing care to them in their household, (b) you were their intimate partner or (c) you had close contact (less than 6 feet) with the infected person for a prolonged period of time (more than 10 minutes))?
	YES NO
3.	To the best of your knowledge, have you experienced or been exposed to anyone that is currently experiencing any of the following COVID-19 symptoms: (a) a fever of 100.4°F or higher, (b) *a new cough not attributable to another health condition, (c) *a new sore throat not attributable to another health condition or that may have been caused by a specific activity like physical exercise, (e) new loss of taste or smell or (f) *new shortness of breath not attributable to another health condition? (NOTE: For symptoms noted by (*), "attributable to another health condition" may include the symptom occurring within 72 hours after receiving a vaccination for COVID-19)
	YES NO
an	you answered "Yes" to any of the above questions, access to any offices or jobsites will be denied d the KA COVID-19 Response Plan must be followed. If you are coming to the office or jobsite for a setting we ask that you make other arrangements to participate remotely.
re	e information provided on this questionnaire will be treated as confidential by KA. It will only be viewed by KA personnel as needed to manage site safety protocols and will not be shared with yone outside of KA without consent.
	signing below, I certify all of the foregoing statements are true and correct, and I agree that if any of a bove answers change I will notify the KA supervisor or my KA contact immediately.
Fii	st Name:
La	st Name:
	ompany Name:
	te:
	anature:



#### **COVID-19 RESPONSE TO SICKNESS PLAN:**

#### WORKER EXHIBITS COVID-19 SYMPTOMS or "YES" ANSWER ON COVID-19 SCREENING QUESTIONNAIRE

- **A.** In the event that COVID-19 infects or presumptively infects someone on a KA site, or a worker answers "yes" to one of the questions on the KA COVID-19 Screening Questionnaire, the following actions shall be taken:
  - Notify KA Superintendent.
  - Employer to immediately remove worker and their personal belongings from the jobsite by using industry-standard protocols and CDC guidelines to prevent the spread of COVID-19.
  - Notify employer's office.
  - Instruct worker to seek medical attention and self-quarantine.
  - Notify the following KA personnel with an email including location/worksite, areas on the site where the infected worker was physically present, employer information, dates infected worker was on site over the two (2) work days prior to the earlier of the date the infected worker (i) developed COVID-19 symptoms or (ii) was tested to confirm the infected worker's diagnosis (if any), names (if then known) of other workers who had close contact (less than six feet for prolonged period of more than 10 minutes) with the infected worker, etc.:
    - o KA Human Resources:
      - Leslie Greves: <u>leslie.greves@krausanderson.com</u>
      - Back-up if unavailable: Diane Toll: diane.toll@krausanderson.com
    - KA Field Operations:
      - Brian Hook: brian.hook@krausanderson.com
      - Back-up if unavailable: Rick Lund: rick.lund@krausanderson.com
    - KA Safety Department:
      - Jay VanderLeest: jay.vanderleest@krausanderson.com
      - Back-up if unavailable: Jake Leoni: jake.leoni@krausanderson.com
- **B.** In a case of an employee or trade contractor employee that answers "yes" to the first question on the KA COVID-19 Screening Questionnaire:
  - If the involved travel was to a Level 2 or Level 3 travel country, notify the worker's employer to direct the worker to self-quarantine for 14 days after the last date of

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- travel exposure. If at the end of the 14-day self-quarantine the worker has not exhibited COVID-19 symptoms for at least 24 hours, they may return to work. (KA COVID-19 Return to Work Form required)
- If the involved travel was <u>domestic</u> air travel, notify the worker's employer to direct the worker to self-quarantine for 10 days after the last date of travel exposure. If at the end of the 10-day self-quarantine the worker has not exhibited COVID-19 symptoms for at least 24 hours, they may return to work. (KA COVID-19 Return to Work Form required)
- If the involved travel was <u>domestic</u> air travel, if during the 10-day self-quarantine
  the worker medically tests negative for COVID-19 as a result of an infection test
  performed more than 5 days after the completion of <u>domestic</u> air travel, the
  worker may return to work so long as at least 7 days have passed since the last
  date of travel exposure and the worker has not exhibited COVID-19 symptoms
  for at least 24 hours. (KA COVID-19 Return to Work Form required)
- **C.** In a case of an employee or trade contractor employee that answers "yes" to the second question on the KA COVID-19 Screening Questionnaire or tests positive for COVID-19:
  - Notify the worker's employer to direct the worker to contact their medical provider and self-quarantine for 10 days after being diagnosed with COVID-19 or their last exposure to an individual diagnosed with COVID-19. If (i) the worker's exposure was to an individual diagnosed with COVID-19 that lives in the worker's home or (ii) the worker is working in any occupied multi-tenant or multi-patient residential, healthcare or long term care facility, or any similar facility, the worker must self-quarantine for 14 days after being diagnosed with COVID-19 or their last exposure to an individual diagnosed with COVID-19, without exception. If at the end of the applicable self-quarantine period the worker has not exhibited COVID-19 symptoms for at least 24 hours without the use of fever-reducing or other symptom-altering medicines (e.g., cough suppressants), they may return to work. (KA COVID-19 Return to Work Form required)
  - In the case of an exposed worker who is self-quarantining for 10 days, if during the 10-day self-quarantine the worker medically tests negative for COVID-19 as a result of an infection test performed more than 5 days after their last exposure to the individual diagnosed with COVID-19, the worker may return to work after completing only 7 days of quarantining so long as the worker has not exhibited COVID-19 symptoms for at least 24 hours without the use of fever-reducing or other symptom-altering medicines (e.g., cough suppressants). (KA COVID-19 Return to Work Form required)
  - Follow KA Crisis Communication Plan
  - Call the Department of Health for which state you are in to relay the location and circumstances.
  - Follow any recommendations by the Department of Health.
  - Depending on the type of exposure, the Construction jobsite may be temporarily shut down to allow KA's Safety Department to evaluate the infection exposure and any recommendations from the Department of Health with the KA jobsite team. Once the evaluation is complete, the KA Safety Department will determine the potential need for jobsite isolation or shutdown.

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- Employer of infected worker to follow applicable guidelines from the State
  Department of Health or other agency with jurisdiction, with assistance from KA if
  necessary. Do not allow any person in that area until the disinfection has been
  completed according to CDC guidelines.
- Employer of infected worker to disinfect work area, tools and equipment that
  have been exposed by the infected worker according to CDC guidelines, with
  assistance from KA if necessary. In some cases, a third-party company will be
  hired to clean and disinfect all the areas the infected employee may have used,
  focusing on frequently touched surfaces.
- With the assistance of the KA Safety Department and the employer of the
  infected worker who tested positive for COVID-19, the KA jobsite team will
  determine if other workers were in close contact (less than six feet for prolonged
  period of more than 10 minutes) with the infected worker within 48 hours prior to
  the earlier of the date the infected worker (i) developed COVID-19 symptoms or
  (ii) was tested to confirm the infected worker's diagnosis:
  - o If other workers are determined to have been in close contact with the infected worker, remove those workers from the jobsite and notify employers of exposed workers to direct those worker(s) to contact their medical provider and self-quarantine for 10 days after their last exposure to the infected worker. If, however, the exposed worker is working in any occupied multi-tenant or multi-patient residential, healthcare or long term care facility, or any similar facility, the worker must self-quarantine for 14 days without exception. If at the end of the 10-day self-quarantine period those workers have not exhibited COVID-19 symptoms for at least 24 hours, they may return to work. (KA COVID-19 Return to Work Form required)
  - In the case of exposed workers who are self-quarantining for 10 days, if during the 10-day self-quarantine any of those workers medically test negative for COVID-19 as a result of an infection test performed more than 5 days after their last exposure to the infected individual, they may return to work after completing only 7 days of quarantining so long as the worker has not exhibited COVID-19 symptoms for at least 24 hours without the use of fever-reducing or other symptom-altering medicines (e.g., cough suppressants). (KA COVID-19 Return to Work Form required)
- **D.** In a case of an employee or trade contractor employee that answers "yes" to the third question on the KA COVID-19 Screening Questionnaire:
  - Notify the worker's employer that the worker must remain home until the worker

     (i) medically tests negative for COVID-19 as a result of an infection test
     performed more than 5 days after their symptom(s) first appeared and (ii) is
     symptom free for 24 hours without the use of fever-reducing or other symptom altering medicines (e.g., cough suppressants). (KA COVID-19 Return to Work
     Form required)
  - The sick worker and any workers that were in close contact with the sick worker shall remain off site until the sick worker receives the results of a COVID-19

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infection test performed more than 5 days after the sick worker's symptom(s) first appeared, and as follows:

- <u>Positive Test</u>: If the COVID-19 test is positive, the protocols under Section III.C above apply.
  - Notify the infected worker's employer to direct the worker to contact their medical provider and self-quarantine for 10 days. If at the end of the applicable self-quarantine period the worker has not exhibited COVID-19 symptoms for at least 24 hours without the use of fever-reducing or other symptom-altering medicines (e.g., cough suppressants), they may return to work. (KA COVID-19 Return to Work Form required)
  - Notify the employers of any workers exposed to the infected worker to direct those worker(s) to contact their medical provider and self-quarantine for 10 days after their last exposure to the infected individual. If, however, the exposed worker is working in any occupied multi-tenant or multi-patient residential, healthcare or long term care facility, or any similar facility, the worker must self-quarantine for 14 days without exception. If at the end of the applicable self-quarantine period those workers have not exhibited COVID-19 symptoms for at least 24 hours, they may return to work. (KA COVID-19 Return to Work Form required)
  - In the case of exposed workers who are self-quarantining for 10 days, if during the 10-day self-quarantine any of the exposed workers medically test negative for COVID-19 as a result of an infection test performed more than 5 days after their last exposure to the infected individual, they may return to work after completing only 7 days of quarantining so long as the worker has not exhibited COVID-19 symptoms for at least 24 hours without the use of fever-reducing or other symptom-altering medicines (e.g., cough suppressants). (KA COVID-19 Return to Work Form required)
- Negative Test: If the COVID-19 test is negative, the sick worker and any
  workers exposed to the sick worker may return to work as long as those
  workers have not exhibited COVID-19 symptoms for at least 24 hours
  without the use of fever-reducing or other symptom-altering medicines
  (e.g., cough suppressants). (KA COVID-19 Return to Work Form required)
- **E.** In the event of a temporary project suspension in accordance with this Plan, or as directed by the State Department of Health, other authorities having jurisdiction, and/or the owner, follow KA's procedures for a temporary jobsite shutdown and provide the necessary notifications to all stakeholders.
- **F.** Project Team shall coordinate with building owner/facility manager with respect to all COVID-19 safety precautions.
- **G.** Requirements for Returning to Work

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- A worker infected with COVID-19 may return to the site provided they can satisfy all of the CDC recommended guidelines outlined below.
  - Worker is no longer exhibiting COVID-19 virus symptoms AND
    - If under a physician's care, submits a physician signed medical release form and a KA COVID-19 Return to Work form to KA Superintendent OR
    - If not under a physicians' care, submits a KA COVID-19 Return to Work form to KA Superintendent.
- COVID-19 Return to Work form is an employee statement attesting to the following CDC guidelines:
  - Employee has no fever (100.4 F or higher) for at least 24 hours without the use of fever reducing medications AND
  - Other symptoms have improved (for example, cough or shortness of breath have improved) AND
  - At least 7 days have passed since symptoms first appeared.
- For non-infected workers excluded from the jobsite, see Section D above for return to work guidelines.

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NA	ME:							
JO	EMPLOYEE: YES NO TRAD BSITE OR OFFICE LOCATION: PERVISOR:	E CON	TRAC	TOR: Y	ES _	NO		
1.	Were you on self-quarantine from a KA jobsite	or offi	ce?	or	NO		N/A	
2.	Have you completed your self-quarantine for the individual diagnosed with COVID-19?		10 day	s after		st exp		an
		YES		or	NO		N/A	
3.	Have you been free from any COVID-19 sympto or higher), cough or shortness of breath)?		at lea	st 24 h	_	or exa		ver (100.4 F
		YES		or	NO		N/A	
4.	Have you received a medically-approved COVI exposure to an individual diagnosed with COV						days aft N/A	er your last
5.	If you answered "Yes" to question 4, have you exposure to an individual diagnosed with COV		eted 7	days o	of quara	ntinin	g after y	our last
		YES		or	NO		N/A	
6.	Did you go to the doctor?	YES		or	NO		N/A	
7.	Were you diagnosed with COVID-19?	YES		or	NO		N/A	
8.	If you answered "Yes" to question 7, have you after you were diagnosed with COVID-19?	compl	eted y	our sel	f-quara	ntine	for the fu	ıll 10 days
	,	YES		or	NO		N/A	
9.	If you answered "Yes" to questions 7 and 8, ha hours without using fever reducing medication		been	fever f	ree (les	s than		) for 24
40		YES		or	NO		N/A	10
10.	If you answered "Yes" to questions 7 and 8, ha	ive yoι YES	r othe	er Covid or	a-19 syı NO	npton	ns impro N/A	ved?
							-	_
	Shortness of Breath	YES		or	NO		N/A	
	Other Symptoms	YES		or	NO		N/A	
11.	If you answered "No" to question 7, have you (performed more than 5 days after your sympto been free from any COVID-19 symptoms for at symptom-altering medications?	ms firs	t appe	eared th	nat cam	e bac	k negativ	ve <u>and</u> (b)
		YES		or	NO		N/A	
12.	If you answered "Yes" to question 6, please att physician stating you are cleared to return to w		medic	al relea	se forn	n from	your tre	ating
Em	ployee signature:	_Date:						
Ret	turn to work accepted:	YES		or	NO			
HR	Representative or Superintendent:				Date:_			



NΑ	ME:
	EMPLOYEE: YES NO TRADE CONTRACTOR: YES NO SITE OR OFFICE LOCATION:
SU	PERVISOR:
1.	Were you on self-quarantine from a KA jobsite or office related to travel?
	YES or NO N/A
2.	If the involved travel was to a Level 2 or Level 3 travel country, have you completed your self- quarantine for the full 14 days after your last date of travel exposure?
	YES or NO N/A
3.	If you answered "Yes" to question 2, have you been free from any COVID-19 symptoms for at least 24 hours (for example, fever (100.4 F or higher), cough or shortness of breath)?  YES OR NO NA
4.	If the involved travel was <u>domestic</u> air travel, have you completed your self-quarantine for the full 10 days after your last date of travel exposure?
5.	YES or NO N/A If you answered "No" to question 4 and the involved travel was <u>domestic</u> air travel, have you received a medically-approved COVID-19 test performed more than 5 days after the completion of <u>domestic</u> air travel that came back negative?
	YES Or NO N/A
6.	If you answered "Yes" to question 5, have you completed 7 days of quarantining after your last date of travel exposure?
	YES Or NO N/A
7.	If you answered "Yes" to question 6, have you been free from any COVID-19 symptoms for at least 24 hours (for example, fever (100.4 F or higher), cough or shortness of breath)?
	YES or NO N/A
En	ployee signature:Date:
Re	turn to work accepted: YES or NO
ЦΒ	Paragontative or Superintendents