



BXP Health Security Plan Update

Moving Forward Together

March 2021

Your Health Security Remains Our Top Priority

To Our Valued Customers:

It has been more than a year since the first case of COVID-19 in the U.S. was confirmed by the Centers for Disease Control and Prevention. As we begin to emerge from the shadow of the historic COVID-19 pandemic, we look forward to brighter days ahead, keeping in mind the far-reaching impacts of personal loss, economic uncertainty, and social dislocation. We are encouraged by recent trends, including reduced case levels and fatalities, and increased rates of vaccination. There is light at the end of the tunnel and we are confident that this experience will strengthen our collective resilience.

Your health security remains our top priority. Since the release of our comprehensive Health Security Plan in May of last year, we have implemented a science-based set of measures intended to provide healthy workplaces. In consultation with industry experts and in response to guidance from public health authorities, we will continue to operate under the necessary restrictions and operational practices to mitigate the risk of infectious disease transmissions at our properties.

This public health crisis has exposed the vulnerability of our population and of the communities in which we live and work. It has also revealed the remarkable potential we have to adapt, innovate, and come together to support the measures necessary to create a better tomorrow. We are committed to continuing to do the work necessary to maintain the health security of our properties and our communities, and are confident that, guided by the measures included in this plan, we can move forward together.

Owen Thomas & Doug Linde

Continuing Adherence to Public Health Guidance

The continued adoption of health security measures in response to the COVID-19 pandemic at individual properties will be guided by public health authorities, federal, state, and local laws, guidelines and/or advisories. Measures are intended to be reasonable responses based on the best information available to BXP and may change without notice based on evolving information, circumstances, and public health guidance. Given the uncertainties regarding the coronavirus and the COVID-19 pandemic, there can be no assurance that these measures will be effective in controlling the spread or limiting the effects of this pandemic. BXP's Health Security Task Force and Senior Management will work to adjust health security measures over time. Since infectious disease pandemic situations are fluid, we must remain responsive and flexible; this plan outlines the framework within which our decisions will be made.

Testing & Vaccines

Widespread testing to identify infection, and vaccination to increase effective immunity combined with interventions that reduce transmission risk promise to bring about the end of the COVID-19 pandemic. As more of the population is vaccinated and community case loads drop to very low levels, we expect antigen rapid testing will be reserved for higher-risk activities involving larger groups and occasional PCR testing may be required in certain increasingly rare circumstances of suspected close contact or symptoms. We intend to support the efforts of local communities to scale testing and vaccine distribution at or near our properties. We strongly encourage our employees to get vaccinated and our customers to encourage the vaccination of their employees.

As the rollout of the COVID-19 vaccines continues to evolve in our communities, it is important that we remain vigilant, maintaining interventions and avoiding exposure to the virus. It is possible that the progress could be slowed or reversed with the continued spread of the SARS-CoV-2 virus, potentially accelerated by variants and the return to normal social activity. For your safety and the safety of our employees, contractors, service providers and other visitors at our properties, **we remain focused on interventions that reduce transmission risk.**



We have partnered with 9 Foundations, Inc., a consulting company founded by **Dr. Joseph Allen** that provides expert consulting services. In addition to his role as CEO of 9F, Dr. Allen is an associate professor at the Harvard T.H. Chan School of Public Health and an internationally renowned expert on healthy buildings. Dr. Allen and his team have significant experience in industrial hygiene, epidemiology, and infectious disease, and have reviewed and guided our cleaning and air and water quality practices.

Transmission Methods and Recommended Intervention Methods

BXP's health security measures are grounded in the science of infectious disease transmission overall, and in the context of the most current research surrounding COVID-19 transmission specifically. There are three primary modes of infectious disease transmission: direct, indirect, and aerosol. BXP's Health Security Plan has been informed by these transmission methods and recommended intervention methods.

Direct Transmission

Large virus-laden particles quickly fall out of the air and settle on surfaces close to the source. Physical means of intercepting these large droplets from the noses and mouths of infected people can prevent disease transmission directly. Therefore, the primary means of preventing large droplet transmissions is through the use of face masks, covering coughs and sneezes, and maintaining physical distance of six feet between individuals.

Indirect Transmission

When large particles and secretions containing viruses land on surfaces, they can contaminate them for a period of time based on the type of surface. These contaminated surfaces are called fomites. Scientists have noted that while there is limited evidence of transmission through fomites, fomite transmission remains a possible mode of transmission, so it cannot be ruled out completely. People may become infected when they come into contact with fomites and subsequently touch their contaminated hands to their eyes, nose, or mouth. The transmission of disease indirectly requires a chain of events to occur. The SARS-CoV-2 virus must be deposited onto a surface, survive on that surface, be transferred to a susceptible individual's hands and then to the mucosal membranes of the susceptible individual. Cleaning and hand washing are the most effective ways to break the infection chain.

Aerosol Transmission

Small virus-laden particles, also known as aerosols, from the nose and mouth may remain suspended in the air for minutes to hours and travel long distances when wafted on air currents. Control strategies that impact the air can reduce the risk of aerosol transmission. The amount of fresh air provided to a space and airflow patterns are known to impact the concentration and transport of airborne pathogens, respectively. Decreasing or eliminating the recirculation of indoor air may help reduce the amount of infectious aerosols from buildings. Therefore, increasing ventilation rates, enhancing filtration levels in recirculated air, decreasing population density, and the use of face masks can play important roles in reducing aerosol transmission.

| | | |
|-----------------|--|---|
| Direct | Face-to-face contact or the ejection of large droplets (>5 µm) from the infected persons through sneezing or coughing directly into the mouth, nose, and/or possibly eyes of the uninfected person | Interventions: Physical distancing Masks |
| Indirect | Contact with surfaces contaminated by infected persons (fomites), with subsequent touching of the mouth, nose and/or possibly eyes of uninfected person. Surfaces may be contaminated from large droplets (>5 µm) or other respiratory secretions. | Interventions: Hand washing, Surface cleaning and disinfection |
| Aerosol | Release of small droplets (<5µm) that remain suspended in the air for minutes to hours which are wafted on air currents allowing transmission over short and long distances. | Interventions: Increased ventilation, Enhanced filtration, Physical distancing and decreased population density |

Health Security is a Shared Responsibility

We must continue to be diligent about protecting our health, as well as the health of those around us. Everyone in our buildings is expected to adhere to these precautions from the CDC and to do their part in addressing this pandemic. No one intervention alone is sufficient.

| | |
|---|---|
| Clean Hands Often | <ul style="list-style-type: none">• Wash your hands often with soap and water for at least 20 seconds especially after you have been in a public place, or after blowing your nose, coughing, or sneezing.• If soap and water are not readily available, use sanitizer that contains at least 60% alcohol. Cover all surfaces of your hands and rub them together until they feel dry. If available, use a hand dryer.• Avoid touching your eyes, nose, and mouth with unwashed hands. |
| Maintain Physical Distance | <ul style="list-style-type: none">• Avoid close contact with people.• Remember that people without symptoms may be able to spread virus.• Keeping distance from others is especially important for people who are at higher risk of getting very sick. |
| Wear a Face Covering | <ul style="list-style-type: none">• The Center for Disease Control (CDC) recommends that everyone should wear a cloth face cover over their mouth and nose when they have to go out in public.• You could spread COVID-19 to others even if you do not feel sick.• The cloth face cover is meant to protect other people in case you are infected.• Continue to keep at least 6 feet between yourself and others. The cloth face cover is <u>not</u> a substitute for physical distancing.• Adding more layers of material to a face covering (layering) is a good way to reduce the number of respiratory droplets containing the virus that come through the face covering. One layering strategy is to use a cloth face covering that has multiple layers of fabric. Another strategy is to wear two face coverings or a “double face covering.” |
| Cover Coughs and Sneezes | <ul style="list-style-type: none">• If you are in a private setting and do not have on your cloth face covering, remember to always cover your mouth and nose with a tissue when you cough or sneeze, or use the inside of your elbow.• Throw used tissues in the trash.• Immediately wash your hands with soap and water for at least 20 seconds. If soap and water are not readily available, clean your hands with a hand sanitizer that contains at least 60% alcohol. |
| Clean and Disinfect | <ul style="list-style-type: none">• Clean and disinfect frequently touched surfaces daily.• If surfaces are dirty, clean them. Use detergent or soap and water prior to disinfection.• Then, use a household disinfectant. Most common EPA-registered household disinfectants will work. |
| If Potentially Exposed, Stay Home and Self-Quarantine | <ul style="list-style-type: none">• Take your temperature twice a day and watch for symptoms (fever, cough or shortness of breath).• Practice physical distancing. Maintain at least 6 feet of distance from others and stay out of crowded places.• Follow current CDC guidance if symptoms develop, including quarantine, isolation and self monitoring requirements. |

Maintaining and Phasing Out Health Security Measures

BXP's plan can and will be implemented based on property-specific needs. There is no 'one size fits all' solution. Measures will be phased out over time in coordination with health and governmental authorities. The intensity of health security measures will be commensurate with the need for measures given local conditions. The designation will be determined by asset type, location, applicable law, guidance from health authorities, and customer needs. Your health security is our top priority, and we reserve the right to maintain measures more restrictive than local guidelines in service of public health and the health of others at our properties.

“You don’t make the timeline, the virus makes the timeline.” Dr. Anthony Fauci

Our Expectations Today

We have all learned to adjust our plans and expectations based on the virus' timeline and not our own. Based on available information today from public health authorities, discussions with our customers, the trajectory of case levels in our communities, and increasing collective immunity supported by ramping-up vaccinations, we expect the following:

- Many jurisdictions will ease restrictions and occupancy limits on commercial office spaces through the coming months;
- A robust return to the office should commence later this year;
- Face coverings and physical distancing in common areas will continue to be required, and will be consistent with public health authorities and local guidelines;
- Until further notice, amenity fitness centers that we control will be closed;
- We believe that getting vaccinated will help keep our community healthy. We are strongly encouraging all BXP employees to get vaccinated once the vaccine becomes available to them.
- Proof of vaccination or recovery from infection (acquired immunity) will not be required for access to the common areas of our properties and BXP offices; and
- Certain customers may impose additional screening requirements for their employees, visitors and/or service providers accessing their spaces.

Health Security Plan Components

BXP's Health Security Plan is divided into five core areas of focus: Cleaning, Air & Water Quality, Physical Distancing, Screening & PPE, and Communications. Health security is a shared responsibility. Where appropriate, we have highlighted the need for coordination and cooperation with customers, visitors, vendors, service providers, and our employees. While no one measure is meant to create health security, these are the areas in our sphere of influence, which we believe in aggregate will provide an industry-leading health security outcome that will reduce the risk of disease transmission.



BXP has received Fitwel Viral Response Module enterprise certification from the Center for Active Design. The module provides annual, third-party certification of policies and practices informed by the latest public health research on mitigating the spread of contagious diseases, and reflects the quick progress Fitwel and its industry and academic advisors have made to prepare the module for widespread implementation. The module's comprehensive guidance and turnkey policies were designed to be efficiently implemented across commercial and residential portfolios or individual assets, helping companies to build trust with customers and employees.

Cleaning

Standard Operating Procedures (SOPs)

Chemicals & Methods

**Non-Routine Deep Cleaning & Infection
Control of Contaminated Spaces**

Janitorial Training & PPE

Scientists have noted that while there is limited evidence of transmission through fomites, fomite transmission remains a possible mode of transmission, so it cannot be ruled out completely. One cause for this is the reported discovery of SARS-CoV-2 RNA near infected individuals. While the risk of fomite transmission has been downgraded, we continue to practice enhanced routine cleaning and disinfection.

Cleaning activities can be divided into “**routine**” and “**non-routine**” based on the nature of the transmission threat. Routine cleaning should occur multiple times throughout the day and focus on high-touch areas conducive to contact transmission of COVID-19.

Increase Routine Cleaning & Disinfection Standard Operating Procedures (SOP)

- Cleaning SOP has been updated to include more frequent cleaning of building common spaces, lobbies, shared conference rooms, and other areas of congregation.
- Additional cleaning services and staffing will be provided as necessary to execute regular cleaning of high-touch surfaces throughout the day.
- In common areas, three levels of cleaning will be performed as necessary, per the chart below. We anticipate continuing to modify cleaning specifications for customer spaces.

| Cleaning Levels | | |
|--|--|---|
| LEVEL 1 Enhanced Routine Cleaning and Disinfection Routine cleaning with increased frequency and upgraded EPA-registered disinfectants | LEVEL 2 Non-Routine Advanced Disinfecting Application of EPA-registered disinfectant to all surfaces up to 8’ above finished floor | LEVEL 3 Non-Routine Infection Control Use of electrostatic technology and fogging with EPA-registered disinfectant to treat entire area and secondary application to high touch areas |

Use Only Approved Chemicals & Approved Cleaning Methods for Both Routine & Non-Routine Cleaning

- All chemicals must be registered with EPA COVID-19 disinfectants and/or city and state registries.

Non-Routine Elective Advanced Disinfecting & Infection Control of Contaminated Common/ Customer Spaces

- Enable deep cleaning and disinfection (Level 2 and Level 3), fogging and/or electrostatic cleaning on an as-needed basis.
- Promptly address non-routine cleaning needs and maintain non-routine cleaning supply chains and services.

Janitorial Training & PPE

- Pandemic-response and general training programs for janitorial service providers updated, including:
 - Regulatory: Global Harmonization Standard: How to read SDS sheets, labeling of bottles, HMIS codes
 - Blood-Bourne Pathogens and how-to pick-up blood
 - Regulatory: Sexual Harassment Training for Managers and Employees
 - Sharps Disposal: Proper procedures for disposal of sharps and needles
 - Chemical Safety: Protective devices, mixing
 - Dilution control: Prepare cleaning products for use
 - Restroom/Shower Room Cleaning: Proper procedures, Hands-On cleaning, product usage, odor control
 - Carpet Care
 - Trash and Recycle: Processing and removal
 - Fall Protection including ladder and scaffolding safety – site specific
 - Electrical Safety
 - Routine Cleaning of Environment – site specific
 - Personal Protective Equipment (PPE)
- New training deployed guidance on proper hand washing and how to use PPE – gloves, face coverings, physical distancing in accordance with CDC guidelines.
- Deployment in English and Spanish:
 - Email Blast
 - Manager Distribution
 - Onsite Signage
 - Rollout on Training Platforms

Air & Water Quality

Ventilation & Air Changes

Filtration Level & Maintenance

**Repopulation Operating Procedures
for Air & Water Systems**

Advanced Treatment Technologies

Air & Water Quality Testing

Small particles, also known as aerosols, from the nose and mouth may remain suspended in the air for minutes to hours and may travel long distances. Control strategies that impact the air can reduce the risk of aerosol transmission. The amount of fresh air provided to a space and airflow patterns are known to impact the concentration and transport of airborne pathogens, respectively. Decreasing or eliminating the recirculation of indoor air may help reduce the amount of infectious aerosols from buildings.

Increase Ventilation Rates & Air Changes, Reduce Air Recirculation

- Increase outside air delivery during regularly occupied hours.
- Disable demand response ventilation controls and reduce return air mixing.
- Operate in economizer mode and maximize use of heat recovery systems.
- Maintain higher humidity of 40-60% RH where feasible.

Provide Indoor Air Quality That Has Been Filtered to Remove Particles

- Filters at air handling equipment have been replaced.
- Filtration level upgraded to a minimum level of MERV-13.
- We have already installed and/or ordered supplemental HEPA filtration units and are adding them to higher traffic areas and/or areas of congregation (e.g. lobbies, fitness centers, common area conference rooms, and back of house engineering and janitorial spaces). Portable HEPA filtration units are meant to augment comprehensive central HVAC air quality measures, including MERV-13 minimum air filtration.

Explore & Pilot Commercial HVAC Technologies









- We continue to maintain an indoor air quality (IAQ) working group of BXP's Sustainability Committee and proptech experts dedicated to researching the efficacy and feasibility of implementing health security emerging technologies.
- Indoor air quality conclusions are summarized on Page 13.

Purge Systems & Test Water Quality

- Prevent abnormal biological growth in standing water by periodically opening faucets and flushing valves and other water lines and equipment to purge water from distribution systems and equipment.
- Conduct water sampling, checking residual chlorine and pH.
- Certain food service equipment and kitchen areas within tenant spaces may not be included in BXP's maintenance scope. Customers are advised to follow ASHRAE Standard 188 as described in the Building Repopulation Engineering Checklist on Page 14.

Conduct Indoor Air Quality Testing

- Testing is ongoing biannually and results will be made available upon request.

| Strategy | Ventilation | Filtration | Testing | Monitoring | Ionization (NPBI, UL) | Ionization (Other) | UV-C | Other Treatment |
|--------------|---|--|---|---|--|--|---|--|
| Efficacy |  |  |  |  |  |  |  |  |
| Description | Ventilation (fresh air) supply | Filtration of supply and return air | Third-party HVAC inspections, air and water quality testing | Air quality monitoring using sensors and the Building Management System (BMS) | Needlepoint bipolar ionization technology with UL 2998 ozone free technology certification | Other ionization technologies | Ultraviolet germicidal irradiation (UVGI) aka short-wave ultraviolet (UV-C) light | Emerging treatment technology like photocatalytic oxidation, far UV-C and hydroxyl-generating systems |
| The Why | Adequate and increased ventilation in commercial buildings is widely recognized as an effective infectious disease engineering control strategy (CDC, WHO, OSHA, ASHRAE, Public Health Authorities) and has been shown to have cognitive function benefits to the extent ventilation mitigates CO2 concentration. | Filtration removes small particles from supply air (outside air and recirculated air). ASHRAE currently recommends using a minimum MERV 13 filter, which is at least 85% efficient at capturing particles in 1 µm to 3µm size range. The SARS-CoV-2 virus is trapped in respiratory droplets and droplet nuclei (dried respiratory droplets) that are predominantly 1 µm in size and larger. | Testing assures that air quality meets third-party standards. Testing includes visual inspection of HVAC systems and filtration, CO2 concentration, respirable dusts, volatile organic compounds (VOCs), temperature and relative humidity. | Monitoring is meant to provide realtime air quality management and greater transparency. Monitoring can verify the effectiveness of ventilation and filtration systems using indicators like CO2 and PM2.5. | Creates charged atoms that attach to and deactivate bacteria, mold, allergens and viruses. Not endorsed by ASHRAE, CDC, EPA or other leading independent leading healthy building experts. | Same as NPBI. | Ultraviolet germicidal irradiation (UVGI) uses short-wave ultraviolet (UV-C) energy to inactivate viral, bacterial and fungal organisms so they are unable to replicate and potentially cause disease. Given the lack of third-party data, and known effectiveness and safety concerns, we are not considering adoption at this time. | Treatment technology providers claim to remove and/or destroy airborne pathogens. Given the lack of third-party data, endorsement from ASHRAE, CDC, EPA or leading healthy building experts combined with known effectiveness and safety concerns, we are not considering adoption at this time. |
| BXP Practice | <ul style="list-style-type: none"> Density-responsive ventilation above the ASHRAE requirement Increased ventilation Provide ventilation ASHRAE 62.1 analysis to customers | <ul style="list-style-type: none"> Replacement and improvement of filtration level (MERV-13 minimum) Addition of portable HEPA filter units in densely occupied, potentially under-ventilated spaces | <ul style="list-style-type: none"> Comprehensive inspections and air quality testing (2x per year, minimum) Provide air quality testing results to customers upon request | <ul style="list-style-type: none"> The level of monitoring varies by building Use existing sensors and consider adding sensors to monitor airflow, CO2, RH and fine particulate | <ul style="list-style-type: none"> Continue to evaluate technology Review industry best practices for installation in air handling units and elevator cabs | <ul style="list-style-type: none"> Discontinue assessment of ozone-producing ionization systems | <ul style="list-style-type: none"> Continue to evaluate UV-C applications, including: system size, dwell time, integrity of exposed materials and operator safety | <ul style="list-style-type: none"> Continue to evaluate technologies and the conclusions of air quality and infectious disease experts |

Building Repopulation Engineering Checklist

HVAC: INCREASED VENTILATION

- ☐ Maximize OA ventilation rates based on air distribution system type and configuration.
- ☐ Disable demand control ventilation (as needed).
- ☐ Ensure PM program compliance with “ASHRAE Standard 180-2018, “Standard Practice for the Inspection and Maintenance of Commercial HVAC Systems.”

HVAC: FILTRATION

- ☐ Replace pre-filters and final filters in base-building air distribution equipment.
- ☐ Verify filters in operating central equipment are MERV-13 (minimum).
- ☐ Confirm on-hand filter inventory for future filter changes.

HYDRONIC & DOMESTIC WATER SYSTEMS

- ☐ Follow guidance in ASHRAE Standard 188-2018, “Legionellosis: Risk Management for Building Water Systems.” Incorporate additional local requirements from authority having jurisdiction (AHJ) as necessary.
- ☐ Flush unused domestic water fixtures on a weekly basis prior to repopulation.
- ☐ Verify domestic hot water set point.
- ☐ Ensure all plumbing traps remain wet.

INDEPENDENT TESTING

- ☐ Post-Occupancy independent third party IAQ/water consultant to provide periodic testing and validation/verification of implemented procedures and protocols.

BUILDING CONTROLS

- ☐ Where possible, operate central air distribution systems to achieve overall positive pressure relative to outside environment.
- ☐ Where possible, pressurize lobbies relative to outside environment.
- ☐ Validate building automation system operating schedules and set points.
- ☐ Ensure exhaust fans/systems are properly scheduled and can be controlled via the building automation system.
- ☐ Operate toilet exhaust systems continuously throughout operating hours.
- ☐ Verify operational schedule of garage exhaust fans.
- ☐ Where possible, operate central air distribution systems to maintain RH between 40-60%.

BXP AND CONTRACTOR WORKER SAFETY/PPE PROTOCOLS

- ☐ Continue to follow CDC guidelines and recommendations.
- ☐ Continue increased cleaning of high-touch objects and surfaces in shared spaces/break areas (workstations, keyboards, phones, radios, tables, fridge, etc.).
- ☐ Identify special customer space entry protocols and verify appropriate PPE is available for employee/technician use.
- ☐ Ensure proper PPE is worn for filter changes and all other maintenance activities where potential exposure exists.
- ☐ Dispose or reuse PPE in accordance with established OSHA and internal protocols

Physical Distancing

Occupant Density Control

Access & Elevators

**Temporary Acrylic Barrier, Sneeze Guards
and/or Splash Shields**

**Shared Conference Rooms,
Amenity Spaces & Food Service**

Events & Visitors

Interior Construction Activity

We expect physical distancing requirements to be an ongoing response to the pandemic, until we achieve low levels of community transmission. We expect thresholds for low levels of transmission and the rate of easing physical distancing restrictions will vary by jurisdiction. Successful physical distancing is a shared responsibility and we look forward to working with you to implement the measures below, which may be applicable to your operations.

Stagger Start Times & Shift Schedules to Reduce Occupant Density & Congestion During Peak Periods

- Facilitate starting time adjustments and provide flexible shifts to minimize congregation in common spaces.
- BXP will work with customers on a case-by-case basis to accommodate the staggering of start times and flexible work shifts.

Maintain a Zero-Tolerance Policy to Keep Sick & Symptomatic People Home

- Require sick employees to stay home and enforce this policy consistently.
- Require workers to self-monitor for symptoms of COVID-19 and perform daily health screening prior to allowing on-site work.
- Follow current CDC guidance if in the case of close contact or if symptoms develop, including quarantine, isolation, and self monitoring requirements.
- Post signage and issue communications with the zero tolerance message.

Implement Physical Distancing

- Reconfigure seating arrangements and remove seating to allow at least 6 feet of physical distancing.
- Provide stanchions and queuing areas to facilitate and allow distancing.
- Consider all travel pathways and create one-directional travel where possible (e.g. counter-clockwise).
- Discourage in-person meetings and visitors.
- Limit access to common area amenities that we control, including common conference rooms, fitness centers, food service amenities, and other areas of congregation consistent with local regulations.

Enable Hands-Free, Touchless Operations Wherever Possible

- Make efforts to eliminate and/or improve processes that require manual operation.
- More frequently disinfect high touch surfaces in key spaces: lobby entries, turnstiles, elevators, stairwells, loading docks, garages, and customer space entrances.
- Implement hands-free technologies and processes as possible.

Manage Physical Distancing at Elevators & Escalators

- Provide queue management and instructional signage displaying healthy elevator use protocols including passenger limits and safe distances in elevator cabs, including a recommended limit of up to four (4) maximum per typical passenger cab (standing in corners) that are equipped with a face covering and as few as two (2) maximum in smaller passenger

cabs. As many as six (6) passengers will be allowed in freight elevators. As repopulation progresses, we will revisit and adjust passenger limits as necessary.

- Signage has been installed inside elevator cabs and floor stickers to establish distancing zones and describe where and how to stand.
- Increased frequency of cleaning of high-touch surfaces like elevator panels and buttons.
- Signage has been installed at escalators directing passengers where to stand and not to pass.
- Encourage use of stairs and limit floor-to-floor elevator trips where possible.

Portable Temporary Shields & Sneeze Guards

- BXP will install temporary shields and sneeze guards to protect front-line building staff. Temporary guards have been installed at security desks, lobby desks, loading dock security, management office front desks, food service counters, and other workstations, kiosks and/or customer-facing stations.

Provide Clear Signage & Set Clear Expectations

- Signage has been installed at access points (lobbies, loading docks, garages, and other portals) that direct safe behavior and physical distancing.
- Pre-repopulation materials have been provided to customers to include one-sheet of new physical distancing policies and procedures to maximize employee education.
- Signage includes: health safety reminders, floor decals, elevator occupancy limits, security desk health security information, status of amenities, and limits on occupancy and hours of operations where appropriate.

Limit and/or Restrict Spaces & Activities

- Limitations will be largely dependent on local restrictions on public gatherings. There will be restricted access to shared conference rooms, fitness centers, food service, and other areas of congregation that we control to allow at least 6 feet of distance between occupants and comply with limitations on public gatherings.
- Limit in-person meetings, visitors, and events.
- Limitations will be relaxed over time, in accordance with guidance from public health authorities and local officials.

Food Service (provided as an amenity in the building)

- Add acrylic dividers between service provider and users.
- Offer pre-packaged foods only.
- Reduce self-service access to foods.
- Clearly post signage in queuing areas.
- Remove or rearrange furniture to promote physical distancing.

Fitness Centers (provided as an amenity in the building)

- Until further notice, fitness centers that we control will be closed.
- Rearrange equipment to achieve physical distancing.

- Limit fitness center occupants and require the use of face coverings in fitness facilities once reopened.
- Add portable supplemental HEPA filtration units.

Shipping/Receiving & Mailroom Procedures

- Review process of receiving and sending inbound and outbound deliveries. Arrange deliveries to minimize contact with the larger building population.
- Require personnel handling mail and parcels to wear appropriate PPE to receive parcels, mail, and other deliveries.
- Install signage detailing occupancy limits and required PPE.

Update Service & Construction Agreements

- COVID-19 riders and amendments have been included in service agreements and construction contracts.

Screening & PPE

Personal Protective Equipment (PPE)

Health Screening

Hand Hygiene

Health security in common areas will involve proper use of PPE, hand hygiene, and protection of front-line building staff.

Require Recommended Personal Protective Equipment (PPE)

- PPE standards will be consistent with guidance from public health authorities. Individuals will be required to wear face coverings in compliance with local regulations, guidelines and/or advisories when accessing common areas within each property.
- According to the CDC, face coverings help prevent people who have COVID-19, including those who are pre-symptomatic or asymptomatic, from spreading the virus to others. Face coverings are most likely to reduce the spread of COVID-19 when they are widely used by people in public settings.
 - Wear the face covering over your nose and mouth and secure it under your chin.
 - Reusable face coverings should be washed regularly. Always remove face coverings correctly and wash your hands after handling or touching a used face covering.
 - Adding more layers of material to a face covering (layering) is a good way to reduce the number of respiratory droplets containing the virus that come through the face covering. One layering strategy is to use a cloth face covering that has multiple layers of fabric. Another strategy is to wear two face coverings or a “double face covering.”
 - Single use face coverings and gloves shall be disposed after each use.
- Face coverings will continue to be required in high density areas and/or anytime distancing of at least 6 feet cannot be maintained, including building lobbies, elevators, shared restrooms, and other common spaces as applicable. Individuals without face coverings will not be permitted if face coverings are required.
- All visitors are expected to furnish their own PPE, including face coverings.
- BXP employees will be provided with face coverings and instructions on expected usage. BXP will not be providing face coverings to other individuals.
- BXP will keep an inventory and stockpile required PPE onsite for BXP employees.
- BXP requires appropriate PPE be utilized by all vendors and service providers working within our properties.
- Operations, Maintenance, Engineering Staff, and Third-Party Contractors must wear PPE on site, including face coverings, reusable gloves, and eye protection.
 - Third-Party Contractors shall provide PPE to staff.
 - Annual PPE training shall be provided through a virtual module. PPE training shall also be shared upon first hire.
 - PPE training topics include proper use, care, storage, disposal, and health benefits of PPE.
- Where we operate garages, PPE requirements apply, particularly at elevators.
- Valet parking will be suspended until there is sufficient parking demand. When valet parking resumes, service providers will be required to wear face coverings and will use hand sanitizer before and after vehicle operation.

Implement Health Screening in Accordance with Guidance from Public Health Authorities, Local Officials & the Needs of Our Customers

- Prior to coming to the workplace, all individuals should be encouraged to self-monitor and identify symptoms and to act on those symptoms per CDC, state, and local guidance.
- Where additional screening is planned by our customers, we will provide support to implement the screening activities of our customers where feasible.

Hand Hygiene

- At some common area locations, BXP will provide, and customers should use, hand sanitizer dispensers with sanitizer containing at least 60% alcohol. No methanol, triclosan, or triclocarbon should be present in sanitizer. The sanitizer used will not be on the FDA List of recalled products.
- BXP will provide pump bottles and/or dispensers at all entryways, break rooms, security, reception, and management offices under BXP control. A minimum of one sanitizer method will be provided on each floor under BXP control. Sanitizer stations will also be located outside lobby door entrances and common area elevator lobbies. Customers are encouraged to provide hand sanitizer within their space, including individual desktop bottles.
- Hand sanitizer is not required in bathrooms; effective handwashing with hands-free soap is recommended.
- Soap and drying methods are provided in all bathrooms and at all sinks under BXP control, including break areas and kitchens. All soap is plain, antibacterial soap, dispensed in liquid, foam, or powder form. Drying methods provided are either paper towels or hand dryers with HEPA filtration that are maintained per the manufacturer's instructions.
- Inventory of hand hygiene supplies should be taken weekly. Restocking of supplies at all hand hygiene station should be performed on demand and at least once daily.
- All sinks, faucets, soap dispensers, towel dispensers, counters, door handles, and countertops under BXP control will be cleaned twice daily.

Communications

**Communication Channels & Messaging
Pre-repopulation**

On-Premise Signage Standards

Ongoing Communication

**Customer Request Transparency &
Proactive Engagement**

Public Statements

As Health Security policies and procedures are developed and implemented, clear communication will be essential to ensure an efficient repopulation. Signage standards and pre-repopulation communication materials, as well as ongoing communications, will be key to establishing the shared responsibility and behavior changes necessary to ensure a healthy and productive workplace for all.

Establish Open, Clear & Consistent Lines of Communication

- Provide timely COVID-related notifications and information as applicable to customers, visitors, employees, and service providers.
- Centralize the collection and cataloging of COVID-related requests by building to make sure we are adequately considering and addressing the concerns of our customers.

Create & Implement Signage to Promote Safe Behavior & Physical Distancing

- Provide clear signage at access points (lobbies, loading docks, garages, and other portals) that direct safe behavior and physical distancing.
- Signage includes: health safety reminders, floor decals, elevator occupancy limits, security desk health security information, status of amenities, and limits on occupancy and hours of operations where appropriate.
- Provide pre-repopulation materials to customers to include one-sheet of new physical distancing policies and procedures to maximize employee education.
- Develop signage standards and post recommended and/or required signage from health authorities and local government. Update signage as necessary.
- Promptly support the reasonable signage needs and requests of customers.
- Disclose health security measures to stakeholders: customer business contacts, service provider contacts, and visitors. Prioritize hands-free message distribution, including social media, email newsletters, and Captivate.

Facilitate Timely, Clear Communication & Public Statements

- Establish process to provide clear and timely communications of ongoing policies and changes within building guidelines to facilitate customers' communications to all employees.
- Provide materials to support health security operations within each property.

Health Security Task Force

Executive Sponsors

Owen Thomas
CEO
Doug Linde
President

Chair

Ben Myers
VP, Sustainability

Expert Consultant

Dr. Joe Allen
9 Foundations

Communications

Laura Sesody
VP, Corporate Marketing & Communication
Stephanie Rodgers
VP, Human Resources
Helen Han
Marketing Director
Rebecca Stoddard
Marketing Director
Sapna Yathiraj
Marketing Director
Alexis Devaney
Executive Associate

Technology

Jim Whalen
SVP, CIO
Tom Marcucella
VP, IT Services

Cleaning

Dan Shanahan
Regional Property Manager
Steve Colvin
SVP, Property Management
Danny Murtagh
VP, Engineering
Amber Brown
Senior Property Manager
Tom Hill
SVP, Property Management
Keith Spadaro
Director, Safety & Security
Mark Hockenjos
VP, Property Management
Dave Connolly
COO, Janitronics
Stu Collins
Senior Director of Ops, Able Services

Physical Distancing, Screening and PPE

Laura McNulty
SVP, Property Management
Alan Snow
Director, Safety & Security
Matt Burke
Senior Project Manager, Security
Stephen Bertoni
Senior Project Manager, Security
Tom Hill
SVP, Property Management
Keith Spadaro
Director, Safety & Security
Dan Shanahan
Regional Property Manager
Kenyetta Price
VP, Regional Property Manager
Steve Colvin
SVP, Property Management
Stephen MacNeil
Construction Manager
Mark Hockenjos
VP, Property Management
Josh Kline
Assistant Construction Manager

Air and Water Quality

Danny Murtagh
VP, Engineering
Mike Fitzgerald
VP, Engineering
Matt Sexton
Chief Engineer
Jeff Garner
VP, Engineering
Bill Atkinson
Regional Engineer
Tom Hill
SVP, Property Management
Kevin McGrath
Director, Engineering

Legal

Frank Burt
SVP, Chief Legal Officer and Secretary
Madeleine Timin
SVP, Regional General Counsel



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Properties