

# COVID-19 Prevention Program (CPP) for Hornbrook Elementary School District

This CPP is designed to control employees' exposures to the SARS-CoV-2 virus (COVID-19) that may occur in our workplace.

**Date: August 19, 2021**

## Authority and Responsibility

**The Superintendent** has overall authority and responsibility for implementing the provisions of this CPP in our workplace. In addition, all managers and supervisors are responsible for implementing and maintaining the CPP in their assigned work areas and for ensuring employees receive answers to questions about the program in a language they understand.

All employees are responsible for using safe work practices, following all directives, policies and procedures, and assisting in maintaining a safe work environment.

## Identification and Evaluation of COVID-19 Hazards

We implement the following in our workplace:

- Conduct workplace-specific evaluations using the **Appendix A: Identification of COVID-19 Hazards** form.
- Document the vaccination status of our employees by using **Appendix E: Documentation of Employee COVID-19 Vaccination Status**, which is maintained as a confidential medical record.
- Evaluate employees' potential workplace exposures to all persons at, or who may enter, our workplace.
- Develop COVID-19 policies and procedures to respond effectively and immediately to individuals at the workplace who are a COVID-19 case to prevent or reduce the risk of transmission in the workplace. All procedures will be in accordance with CDPH and Local Public Health guidance.
- Review applicable orders and general and industry-specific guidance from the State of California, Cal/OSHA, and the local health department related to COVID-19 hazards and prevention.
- Evaluate existing COVID-19 prevention controls in our workplace and the need for different or additional controls.
- Conduct periodic inspections using the **Appendix B: COVID-19 Inspections** form as needed to identify and evaluate unhealthy conditions, work practices, and work procedures related to COVID-19 and to ensure compliance with our COVID-19 policies and procedures.

## Employee participation

Employees and their authorized employees' representatives are encouraged to participate in the identification and evaluation of COVID-19 hazards by: periodic identification/evaluations conducted via email and/or physical walkthroughs.

## Employee screening

We screen our employees and respond to those with COVID-19 symptoms by: Employees are asked to self-screen per CDPH guideline daily prior to coming to work; Upon entering the facility, employees use hand sanitizer.

## Correction of COVID-19 Hazards

Unsafe or unhealthy work conditions, practices or procedures are documented on the **Appendix B: COVID-19 Inspections** form, and corrected in a timely manner based on the severity of the hazards, as follows: The severity of the hazard will be assessed by the Superintendent and Maintenance Lead upon

identification. Correction time frames will be assigned dependent upon severity and time/materials availability. Review of correction shall be conducted no later than one week after assigned correction time.

## Control of COVID-19 Hazards

### Face Coverings

We provide clean, undamaged face coverings and ensure they are properly worn by employees when they are indoors or in vehicles, and where required by orders from the California Department of Public Health (CDPH). Face covering Guidance will be followed depending on vaccination status of: fully vaccinated and not fully vaccinated. Face coverings are available on a table at main entrance into the facility; face coverings should be replaced when dirty or contaminated; school provided cloth face coverings are cleaned on site daily. Updated signage is on all doors entering the facility with current face covering requirements by CDPH. Non-employees whom do not want to wear face coverings will need to stay outside of the facility: employees can meet them outside but need to physical distance from them and wear their mask at all times.

Employees required to wear face coverings in our workplace may remove them under the following conditions:

- When an employee is alone in a room or a vehicle.
- While eating or drinking at the workplace, provided employees are at least six feet apart and outside air supply to the area, if indoors, has been maximized to the extent feasible.
- Employees are required to wear respirators in accordance with our respirator program that meets section 5144 requirements.
- Employees who cannot wear face coverings due to a medical or mental health condition or disability, or who are hearing-impaired or communicating with a hearing-impaired person. Such employees will wear an effective, non-restrictive alternative, such as a face shield with a drape on the bottom, if their condition permits it.
- Specific tasks that cannot feasibly be performed with a face covering. This exception is limited to the time in which such tasks are being performed.

FACE-COVERING GUIDANCE FOR ADULTS IN K-12 SCHOOL DISTRICT SETTINGS		
Setting	Fully Vaccinated Employees & Visitors	Unvaccinated
Indoors at schools	Face coverings are required when sharing indoor spaces with students.	Face coverings are required.
Outdoors at schools	Face coverings are optional.	Face coverings are optional.
On school buses	Face coverings are required.	Face coverings are required.
Indoors at other District facilities (no students present)	Face coverings are optional.	Face coverings are required.
Outdoors at other District facilities	Face coverings are optional.	Face coverings are optional.
At Board Meetings	Face coverings are optional.	Face coverings are required.
This guidance is based on the <a href="#">COVID-19 safety standards for the workplace, as administered by the California Occupational Safety and Health Standards Board (CalOSHA)</a> and <a href="#">FAQ</a> , updated <a href="#">Face Covering Guidance issued by the California Department of Public Health (CDPH)</a> and <a href="#">Q &amp; A</a> and the <a href="#">COVID-19 Public Health Guidance for K-12 Schools in California, 2021-22 School Year</a> (last reviewed July 18, 2021)		

Any employee not wearing a required face covering or allowed non-restrictive alternative, will be at least six feet apart from all other persons unless the unmasked employee is either fully vaccinated or tested at least weekly for COVID-19.

We will not prevent any employee from wearing a face covering when it is not required unless it would

create a safety hazard, such as interfering with the safe operation of equipment.

Face coverings will also be provided to any employee that requests one, regardless of their vaccination status.

### **Engineering controls**

For indoor locations, using Appendix B, we identify and evaluate how to maximize, to the extent feasible, ventilation with outdoor air using the highest filtration efficiency compatible with our existing ventilation system, and whether the use of portable or mounted High Efficiency Particulate Air (HEPA) filtration units, or other air cleaning systems, would reduce the risk of transmission by:

- Increase the frequency of HVAC filter replacement and cleaning to 2-3 times per year as recommended rather than once a year as has been the practice.
- Run air purifiers 24 hours a day for all classrooms and office.
- Windows and/or doors will be opened for ventilation when practicable (Outside air needs to be minimized due to heat and wildfire smoke.) Have some windows down in bus as weather conditions allow.
- Encourage holding class outside, when feasible

### **Cleaning and disinfecting**

We implement the following cleaning and disinfection measures for frequently touched surfaces and objects, such as doorknobs, equipment, tools, handrails, handles, controls, phones, headsets, bathroom surfaces, and steering wheels:

- Daily cleaning and disinfection by school staff with disinfectants on the US Environmental Protection Agency COVID-19 list.
- Ensure safe and correct application of disinfectant and keep products away from students. Provide employees training on manufacturer's directions, on Cal/OSHA requirements for safe use and as required by the Healthy Schools Act, as applicable. Use of the electrostatic sprayer with compliant disinfectant to fog areas difficult to sanitize.
- Custodial staff with the responsibility of cleaning and disinfecting the school site must be equipped with proper personal protective equipment, including gloves, eye protection, respiratory protection and other appropriate protective equipment as required by the product instructions. All products must be kept out of children's reach and stored in a space with restricted access.
- Ensure proper ventilation during cleaning and disinfecting. Introduce fresh outdoor air as much as possible, for example, by opening windows where practicable. When cleaning, air out the space before children arrive; plan to do thorough cleaning when children are not present. If using air conditioning, use the setting that brings in fresh air if possible. Replace and check air filters and filtration systems to ensure optimal air quality.
- We will suspend the use of drinking fountains and encourage the use of non-refillable water bottles.
- Take steps to ensure that all water systems and features (for example, drinking fountains and decorative fountains) are safe to use after a prolonged facility shutdown to minimize the risk of Legionnaires' disease and other diseases associated with water.

#### *Equipment Availability*

- Plans for an ongoing supply of personal protective equipment and masks to comply with CDPH guidance for students and staff (as appropriate for each staff job classification, respectively, as well as OSHA requirements).
- Ample supply of no-touch thermal scan thermometers have been purchased and are on campus.

#### *Cleaning Supply Availability*

- All classrooms are equipped with hand washing stations.
- Plans for ongoing supply of school-appropriate cleaning supplies to comply with CDHP guidance. When choosing cleaning products, use those that are approved for use against Covid-19 on the Environmental Protection Agency (EPA) approved list and follow product instructions.

- To reduce the risk of asthma related to disinfecting, programs should aim to select disinfectant products on list N with asthma-safer ingredients (hydrogen peroxide, citric acid or lactic acid).
- Avoid products that mix these ingredients with peroxyacetic (peracetic) acid, sodium hypochlorite (bleach) or quaternary ammonium compounds, which can cause asthma.
- Use disinfectants labeled to be effective against emerging viral pathogens, following label directions for appropriate dilution rates and contact times.
- Establish a cleaning and disinfecting schedule in order to avoid both under- and over-use of cleaning products.
- Plans for ongoing supply of hand sanitizer, soap, tissues, no-touch trash cans, and paper towels.

**Should we have a COVID-19 case in our workplace, we will implement the following procedures:**

- If the facility has had a sick person with COVID-19 within the last 24 hours, a thorough cleaning AND disinfection of the spaces occupied by that person during that time.
- If common areas such as bathrooms or shared items have already been routinely cleaned and disinfected, there is no need for additional action.
- Once area has been appropriately cleaned and disinfected, it can be opened for use.

**Hand sanitizing**

To implement effective hand sanitizing procedures, we:

- Have upgraded to hands-free washing stations in each classroom and restroom
- Encourage and allow time for employee handwashing
- Provide employees with an effective hand sanitizer, and prohibit hand sanitizers that contain methanol (i.e. methyl alcohol) and contain at least 60% ethyl alcohol.
- Encouraging employees to wash their hands for at least 20 seconds each time.
- Staff should model and practice handwashing when:
  - Arriving at school
  - Before and after eating
  - After coughing, sneezing, or blowing the nose
  - After being outside
  - Before and after using the restroom
  - After having close contact with others
  - After using shared surfaces or tools

**Personal protective equipment (PPE) used to control employees' exposure to COVID-19**

We evaluate the need for PPE (such as gloves, goggles, and face shields) as required by section 3380, and provide and ensure use of such PPE as needed.

We provide and ensure use of respirators in compliance with section 5144 when deemed necessary by Cal/OSHA.

**Testing of symptomatic employees**

We make COVID-19 testing available at no cost to employees with COVID-19 symptoms who are not fully vaccinated, during employees' paid time.

**Investigating and Responding to COVID-19 Cases**

We have developed effective procedure to investigate COVID-19 cases that include seeking information from our employees regarding COVID-19 cases, close contacts, test results, and onset of symptoms. This is accomplished by using the **Appendix C: Investigating COVID-19 Cases** form.

We also ensure the following is implemented:

- Employees that had a close contact are offered COVID-19 testing at no cost during their working hours, excluding:
  - Employees who were fully vaccinated before the close contact and do not have symptoms.
  - COVID-19 cases who were allowed to return to work per our return-to-work criteria and have remained free of symptoms for 90 days after the initial onset of symptoms, or for cases who never developed symptoms, for 90 days after the first positive test.
- The information on benefits described in Training and Instruction, and Exclusion of COVID-19 Cases, below, will be provided to employees.
- Written notice within 1 day of your knowledge of a COVID-19 case that people at the worksite may have been exposed to COVID-19. This notice will be provided to all employees (and their authorized representative), independent contractors and other employers at the worksite during the high-risk exposure period. These notifications must meet the requirements of T8CCR section 3205(c)(3)(B) and Labor Code section 6409.6(a)(4); (a)(2); and (c), and in a form readily understandable by employees and can be anticipated to be received by the employee.

## System for Communicating

Our goal is to ensure that we have effective two-way communication with our employees, in a form they can readily understand, and that it includes the following information:

- Who employees should report COVID-19 symptoms, possible close contacts and hazards to, and how.  
**Report to Julie Williams in-person, email or via phone: [jwilliams@hornbrookschool.org](mailto:jwilliams@hornbrookschool.org) 530-475-3598. Possible hazards reported to Kelly Bear via in-person or email: [kbear@hornbrookschool.org](mailto:kbear@hornbrookschool.org).**
- That employees can report symptoms, possible close contacts and hazards without fear of reprisal.
- How employees with medical or other conditions that put them at increased risk of severe COVID-19 illness can request accommodations. **Contact Kelly Bear should you need accommodations (CBAs and MOUs)**
- Access to COVID-19 testing when testing is required: **Talk with Julie Williams**
- The COVID-19 hazards employees (including other employers and individuals in contact with our workplace) may be exposed to: **adults and students that could potentially have COVID-19 and spread it because the individual is asymptomatic or prior to a positive test.**

What is being done to control those hazards: Masks, physical distancing, ventilation, self-screening, quarantining when needed, hand hygiene, cleaning and disinfecting, etc.

- Covid-19 cases are confidential information. All procedures, protocols, and notifications will be handled confidentially.

## Training and Instruction

We provide effective employee training and instruction that includes:

- Our COVID-19 policies and procedures to protect employees from COVID-19 hazards, and how to participate in the identification and evaluation of COVID-19 hazards.
- Information regarding COVID-19-related benefits (including mandated sick and vaccination leave) to which the employee may be entitled under applicable federal, state, or local laws.
- The fact that:
  - COVID-19 is an infectious disease that can be spread through the air.
  - COVID-19 may be transmitted when a person touches a contaminated object and then touches their eyes, nose, or mouth.
  - An infectious person may have no symptoms.
- The fact that particles containing the virus can travel more than six feet, especially indoors, so physical distancing, face coverings, increased ventilation indoors, and respiratory protection decrease the spread of COVID-19 and are most effective when used in combination.
- The right of employees that are not fully vaccinated to request a respirator for voluntary use, without fear of retaliation, and our policies for providing the respirators. Employees voluntarily using respirators will be trained according to section 5144(c)(2) requirements:

- How to properly wear them.
- How to perform a seal check according to the manufacturer's instructions each time a respirator is worn, and the fact that facial hair can interfere with a seal.
- The importance of frequent hand washing with soap and water for at least 20 seconds and using hand sanitizer when employees do not have immediate access to a sink or hand washing facility, and that hand sanitizer does not work if the hands are soiled.
- Proper use of face coverings and the fact that face coverings are not respiratory protective equipment. Since COVID-19 is an airborne disease, N95s and more protective respirators protect the users from airborne disease, while face coverings primarily protect people around the user.
  - The conditions where face coverings must be worn at the workplace.
  - That face coverings are additionally recommended outdoors for people who are not fully vaccinated if six feet of distance cannot be maintained.
  - Employees can request face coverings and can wear them at work regardless of vaccination status and without fear of retaliation.
- COVID-19 symptoms, and the importance of obtaining a COVID-19 test and not coming to work if the employee has COVID-19 symptoms.
- Information on our COVID-19 policies and how to access COVID-19 testing and vaccination, and the fact that vaccination is effective at preventing COVID-19, protecting against both transmission and serious illness or death.

**Appendix D: COVID-19 Training Roster** in addition to **Keenan Training Rosters** and **Staff Collaboration/Training rosters** will be used to document these training.

## Exclusion of COVID-19 Cases and Employees who had a Close Contact

Where we have a COVID-19 case or close contact in our workplace, we limit transmission by:

- Ensuring that COVID-19 cases are excluded from the workplace until our return-to-work requirements are met.
- Excluding employees that had a close contact from the workplace until our return-to-work criteria have been met, with the following exceptions:
  - Employees who were fully vaccinated before the close contact and who do not develop COVID-19 symptoms.
  - COVID-19 cases who returned to work per our return-to-work criteria and have remained free of COVID-19 symptoms, for 90 days after the initial onset of COVID-19 symptoms, or for COVID-19 cases who never developed COVID-19 symptoms, for 90 days after the first positive test.
- For employees excluded from work, continuing, and maintaining employees' earnings, wages, seniority, and all other employees' rights and benefits. This will be accomplished by: **employer-provided employee sick leave benefits, payments from public sources or other means of maintaining earnings, rights and benefits, where permitted by law and when not covered by workers' compensation. Reference section 3205(c)(9)(C) for exceptions.**
- Providing employees at the time of exclusion with information on available benefits.

## Reporting, Recordkeeping, and Access

It is our policy to:

- Report information about COVID-19 cases and outbreaks at our workplace to the local health department whenever required by law, and provide any related information requested by the local health department.
- Maintain records of the steps taken to implement our written COVID-19 Prevention Program in accordance with section 3203(b).
- Make our written COVID-19 Prevention Program available at the workplace to employees, authorized employee representatives, and to representatives of Cal/OSHA immediately upon request.
- Use the **Appendix C: Investigating COVID-19 Cases** form to keep a record of and track all COVID-19 cases.
- **Julie Williams will be keeping all records and doing the recordkeeping.**

## Return-to-Work Criteria

- **COVID-19 cases with symptoms** will not return to work until all the following have occurred:
  - At least 24 hours have passed since a fever of 100.4 °F. or higher has resolved without the use of fever-reducing medications, and
  - COVID-19 symptoms have improved, and
  - At least 10 days have passed since COVID-19 symptoms first appeared.
- **COVID-19 cases who tested positive but never developed symptoms** will not return to work until a minimum of 10 days have passed since the date of specimen collection of their first positive COVID-19 test.
- A negative COVID-19 test will not be required for an employee to return to work once the requirements for “cases with symptoms” or “cases who tested positive but never developed symptoms” (above) have been met.
- Persons who had a close contact may return to work as follows:
  - Close contact but never developed symptoms: when 10 days have passed since the last known close contact.
  - Close contact with symptoms: when the “cases with symptoms” criteria (above) have been met, unless the following are true:
    - The person tested negative for COVID-19 using a polymerase chain reaction (PCR) COVID-19 test with specimen taken after the onset of symptoms; and
    - At least 10 days have passed since the last known close contact, and
    - The person has been symptom-free for at least 24 hours, without using fever-reducing medications.
- If an order to isolate, quarantine, or exclude an employee is issued by a local or state health official, the employee will not return to work until the period of isolation or quarantine is completed or the order is lifted.

**Kelly Bear, Superintendent**  
**August 23, 2021**

## Appendix A: Identification of COVID-19 Hazards

All persons, regardless of symptoms or negative COVID-19 test results, will be considered potentially infectious. Particular attention will be paid to areas where people may congregate or come in contact with one another, regardless of whether employees are performing an assigned work task or not. For example: meetings, trainings, entrances, bathrooms, hallways, aisles, walkways, elevators, break or eating areas, cool-down areas, and waiting areas.

Evaluation of potential workplace exposure will be to all persons at the workplace or who may enter the workplace, including coworkers, employees of other entities, members of the public, customers or clients, and independent contractors. We will consider how employees and other persons enter, leave, and travel through the workplace, in addition to addressing stationary work.

**Person conducting the evaluation:** \_\_\_\_\_

Date: \_\_\_\_\_

**Name(s) of employee and authorized employee representative that participated:**

[illegible]



## Appendix B: COVID-19 Inspections

Date: \_\_\_\_\_

Name of person conducting the inspection: \_\_\_\_\_

Work location evaluated: \_\_\_\_\_

Exposure Controls	Status	Person Assigned to Correct	Date Corrected
<b>Engineering</b>			
Ventilation* (amount of fresh air and filtration maximized)			
Additional room air filtration*			
Room Air Purifiers			
<b>Administrative</b>			
Surface cleaning and disinfection (frequently enough and adequate supplies)			
Hand washing facilities (adequate numbers and supplies)			
Disinfecting and hand sanitizing solutions being used according to manufacturer instructions			

Exposure Controls	Status	Person Assigned to Correct	Date Corrected
<b>PPE</b> (not shared, available and being worn)			
Face coverings (cleaned sufficiently often)			
Gloves			
Face shields/goggles			
Respiratory protection			

\*Identify and evaluate how to maximize ventilation with outdoor air; the highest level of filtration efficiency compatible with the existing ventilation system; and whether the use of portable or mounted HEPA filtration units, or other air cleaning systems, would reduce the risk of COVID-19 transmission. Review applicable orders and guidance from the State of California and local health departments related to COVID-19 hazards and prevention have been reviewed, including the CDPH Interim Guidance for Ventilation, Filtrations, and Air Quality in Indoor Environments and information specific to your industry, location, and operations. We maximize the quantity of outside air provided to the extent feasible, except when the United States Environmental Protection Agency (EPA) Air Quality Index is greater than 100 for any pollutant or if opening windows or maximizing outdoor air by other means would cause a hazard to employees, for instance from excessive heat or cold.

## Appendix C: Investigating COVID-19 Cases

All personal identifying information of COVID-19 cases or persons with COVID-19 symptoms, and any employee required medical records will be kept confidential unless disclosure is required or permitted by law. Un-redacted information on COVID-19 cases will be provided to the local health department, CDPH, Cal/OSHA, the National Institute for Occupational Safety and Health (NIOSH) immediately upon request, and when required by law.

**Date:** [enter date COVID-19 case – suspected/confirmed - became known to the employer]

**Name of person conducting the investigation:** \_\_\_\_\_

**Name of COVID-19 case (employee or non-employee\*) and contact information:**

\_\_\_\_\_

**Occupation (if non-employee\*, why they were in the workplace):** \_\_\_\_\_

\*If we are made aware of a non-employee COVID-19 case in our workplace

**Names of employees/representatives involved in the investigation:** \_\_\_\_\_

**Date investigation was initiated:** \_\_\_\_\_

**Locations where the COVID-19 case was present in the workplace during the high-risk exposure period, and activities being performed:** \_\_\_\_\_

**Date and time the COVID-19 case was last present and excluded from the workplace:**

\_\_\_\_\_

**Date of the positive or negative test and/or diagnosis:** \_\_\_\_\_

**Date the case first had one or more COVID-19 symptoms, if any:** \_\_\_\_\_

**Information received regarding COVID-19 test results and onset of symptoms (attach documentation):**

\_\_\_\_\_

**Summary determination of who may have had a close contact with the COVID-19 case during the high-risk exposure period. Attach additional information, including:**

- The names of those found to be in close contact.
- Their vaccination status.
- When testing was offered, including the results and the names of those that were exempt from testing because.
  - They were fully vaccinated before the close contact and do not have symptoms.
  - They returned to work per our return-to-work criteria and have remained symptom free for 90 days or, for those that never developed symptoms, for 90 days after the initial positive test.
- The names of those that were excluded per our Exclusion of COVID-19 Cases and Employees who had a Close Contact requirements.
- The names of those exempt from exclusion requirements because:
  - They were fully vaccinated before the close contact and did not develop COVID-19 symptoms.
  - They returned to work per our return-to-work criteria and have remained symptom free for 90 days or, for those that never developed symptoms, for 90 days after the initial positive test.

Notice given (within one business day, in a way that does not reveal any personal identifying information of the COVID-19 case) of the potential COVID-19 exposure to:

1. All employees who were in close contact
2. Their authorized representatives (If applicable, the notice required by Labor Code section 6409.6(a) (2) and (c))

Names of employees that were notified:	Names of their authorized representatives:	Date

Independent contractors and other employers present at the workplace during the high-risk exposure period.

Names of individuals that were notified:	Date

**What were the workplace conditions that could have contributed to the risk of COVID-19 exposure?**

**What could be done to reduce exposure to COVID-19?**

**Was local health department notified? Date?**

## Appendix D: COVID-19 Training Roster

**Date:**

**Person that conducted the training: Kelly Bear and Julie Williams**

[illegible]

## Appendix E: Documentation of Employee COVID-19 Vaccination Status - **CONFIDENTIAL**

Employee Name	Fully or Partially Vaccinated <sup>1</sup>	Method of Documentation <sup>2</sup>

<sup>1</sup>Update, accordingly and maintain as confidential medical record

<sup>2</sup>Acceptable options include:

- Employees provide proof of vaccination (vaccine card, image of vaccine card or health care document showing vaccination status) and employer maintains a copy.
- Employees provide proof of vaccination. The employer maintains a record of the employees who presented proof, but not the vaccine record itself.
- Employees self-attest to vaccination status and employer maintains a record of who self-attests.

# **Additional Consideration #1**

## **Multiple COVID-19 Infections and COVID-19 Outbreaks**

This addendum will stay in effect until there are no new COVID-19 cases detected in the exposed group for a 14-day period.

### **COVID-19 testing**

- We provide COVID-19 testing at no cost to all employees, during paid time, in our exposed group except for:
  - Employees who were not present during the relevant 14-day period.
  - Employees who were fully vaccinated before the multiple infections or outbreak and who do not have symptoms.
  - COVID-19 cases who did not develop symptoms after returning to work pursuant to our return-to-work criteria, no testing is required for 90 days after the initial onset of symptoms or, for COVID-19 cases who never developed symptoms, 90 days after the first positive test.
- COVID-19 testing consists of the following:
  - All employees in our exposed group are immediately tested and then again one week later. Negative COVID-19 test results of employees with COVID-19 exposure will not impact the duration of any quarantine, isolation, or exclusion period required by, or orders issued by, the local health department.
  - After the first two COVID-19 tests, we continue to provide COVID-19 testing once a week of employees in the exposed group who remain at the workplace, or more frequently if recommended by the local health department, until there are no new COVID-19 cases detected in our workplace for a 14-day period.
  - We provide additional testing when deemed necessary by Cal/OSHA.

We continue to comply with the applicable elements of our CPP, as well as the following:

1. Employees in the exposed group wear face coverings when indoors, or when outdoors and less than six feet apart (unless one of the face-covering exceptions indicated in our CPP apply).
2. We give notice to employees in the exposed group of their right to request a respirator for voluntary use if they are not fully vaccinated.
3. We evaluate whether to implement physical distancing of at least six feet between persons, or where six feet of physical distancing is not feasible, the need for use of cleanable solid partitions of sufficient size to reduce COVID-19 transmission.

### **COVID-19 investigation, review, and hazard correction**

We immediately perform a review of potentially relevant COVID-19 policies, procedures, and controls and implement changes as needed to prevent further spread of COVID-19.

The investigation and review is documented and includes:

- Investigation of new or unabated COVID-19 hazards including:
  - Our leave policies and practices and whether employees are discouraged from remaining home when sick.
  - Our COVID-19 testing policies.
  - Insufficient outdoor air.
  - Insufficient air filtration.
  - Lack of physical distancing.



- Updating the review:
  - Every thirty days that the outbreak continues.
  - In response to new information or to new or previously unrecognized COVID-19 hazards.
  - When otherwise necessary.
- Implementing changes to reduce the transmission of COVID-19 based on the investigation and review.  
We consider:
  - Moving indoor tasks outdoors or having them performed remotely.
  - Increasing outdoor air supply when work is done indoors.
  - Improving air filtration.
  - Increasing physical distancing as much as feasible.
  - Requiring respiratory protection in compliance with section 5144.

### **Buildings or structures with mechanical ventilation**

We will filter recirculated air with Minimum Efficiency Reporting Value (MERV) 13 or higher efficiency filters, if compatible with the ventilation system. If MERV-13 or higher filters are not compatible, we will use filters with the highest compatible filtering efficiency. We will also evaluate whether portable or mounted High Efficiency Particulate Air (HEPA) filtration units or other air cleaning systems would reduce the risk of transmission and, if so, implement their use to the degree feasible.