

COVID-19 Prevention Program (CPP)

Tulare Joint Union High School District

This CPP is designed to control employees' exposures to the SARS-CoV-2 virus (severe acute respiratory syndrome coronavirus 2) that causes COVID-19 (Coronavirus Disease 2019) that may occur in our workplace.

Date: October 9, 2023

Authority and Responsibility

District Administration 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 will 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

- 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.
 - Cal/OSHA-CDPH Interim Guidance for Ventilation, Filtration, and Air Quality in Indoor Environment.
 - CDPH Face Covering Requirements.
 - CDPH Isolation and Quarantine Guidance.
 - Applicable CDPH Employees & Workplaces Guidance.
- 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.

We will implement the following in our workplace:

- Evaluate employees' potential workplace exposures to all persons at, or who may enter, our workplace
- 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
- Site Maintenance & Operation Supervisors will conduct an annual inspection using the Appendix B: COVID-19 Facility Inspection Google Form to identify 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:

Employees and their authorized employees' representatives are encouraged to participate in the identification and evaluation of COVID-19 hazards. All employees will be required to complete an individual workspace evaluation bi-annually using Appendix A: Identification of COVID-19 Workplace Hazards Google Form.

Employees were provided an electronic copy of the COVID-19 Prevention Program and it is accessible to all staff on the district website: <https://www.tjuhsd.org/>

Employee Screening

We screen our employees and respond to those with COVID-19 symptoms by:

Our employees self-screen according to California Department of Public Health (CDPH) guidelines.

Correction of COVID-19 Hazards

Unsafe or unhealthy work conditions, practices or procedures will be 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 will be assessed on a case by case basis in accordance with the governing guidelines as soon as reasonably practicable.
- The Facilities Director and/or site Maintenance and Operations Supervisor will be responsible for timely corrective action.
- Incidents will be followed up with on a case by case basis; utilizing progressive discipline if deemed necessary.

Controls of COVID-19 Hazards

Face Coverings

We provide clean, undamaged face coverings and ensure they are properly worn by employees that are not fully vaccinated when they are indoors or in vehicles, and where required by orders from the California Department of Public Health (CDPH).

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.
- When 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. If their condition does not permit it, then the employee will be at least six feet apart from all other persons and either fully vaccinated or tested at least weekly for COVID-19.
- 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.

Any employee not wearing a required face covering 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:

- District Installed plexi-glass sneeze guards
- Buzz-in front entrance access to control the quantity of visitors entering facilities.
- Disposable seat covers available in all restrooms.

Hand sanitizing

In order to implement effective hand sanitizing procedures, we:
COVID-19 Prevention Program

- Educate staff and students on proper hand washing and hand sanitizing procedures
- Provide hand sanitizer throughout campuses, including classrooms and office buildings

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 CCR Title 8, section 3380, and provide such PPE as needed.

Upon request, we provide respirators for voluntary use to all employees who are not fully vaccinated and who are working indoors or in vehicles with more than one person.

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

We also provide and ensure use of eye and respiratory protection when employees are exposed to procedures that may aerosolize potentially infectious material such as saliva or respiratory tract fluids.

Testing of employees

We make COVID-19 testing available at no cost, during paid time, to all employees.

- Who had close contact in the workplace; or
- Who have COVID-19 symptoms, and
- During outbreaks and major outbreaks (see below for further details).

Investigating and Responding to COVID-19 Cases

We have developed effective procedures 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:

Persons who test positive for COVID-19: Stay home for at least 5 days after start of symptoms (Day 0) or after date of first positive test (Day 0) if no symptoms.

Isolation can end after Day 5 if: Symptoms are not present, or are mild and improving; AND Fever has been resolved for 24 hours (without the use of fever-reducing medication). If fever is present, isolation should be continued until 24 hours after fever resolves. If symptoms, other than fever, are not improving, continue to isolate until symptoms are improving or until after Day 10. If the confirmed case has severe symptoms, or is at high risk of serious disease or has questions concerning care, they should contact their healthcare provider for available treatments. Wear a well-fitting mask around others for a total of 10 days, especially in indoor settings. After ending isolation, if symptoms recur or worsen, test again and if positive, restart isolation at Day 0.

Negative: If symptomatic consider self isolation

Individual has been exposed to a positive case of COVID-19: Test within 3-5 days after last exposure. Close contacts should wear a well-fitting mask around others for a total of 10 days, especially in indoor settings and when near those at higher risk for severe COVID-19 disease. Strongly encouraged to be up to date with COVID-19 vaccines. If symptoms develop, test, and stay home.

When identifying and reporting cases for COVID-19, our site based COVID-19 tracers will complete a Google tracing form with the following questions when investigating a possible exposure or a positive case:

Section 1

Name of person conducting the investigation

Name of staff involved in the investigation

Date of investigation

Employee Name

Employee date of birth

Employee contact number

Employee home address

Employee city

Employee zip code

Employee position held

Is Individual fully vaccinated?

Was COVID-19 test offered?

Positive or negative test results?

Date of positive/negative test

Date the case first had one or more COVID-19 symptoms

Date the COVID-19 positive individual was last present in the workplace

Time the COVID-19 positive individual was last present in the workplace

Information/documentation received regarding COVID-19 test results and onset of symptoms

List all locations at the workplace that may have been visited by the COVID-19 case during the high-risk exposure period.

Based on the previous question who may have been exposed (attach additional information). (NA if none)

Section 2 - Notice Given

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:

All employees who may have had COVID-19 exposure and their authorized representatives

Date (Type NA if none)

Names of employees that were notified

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

Date (Type NA if none)

Names of employees that were notified

What were the workplace conditions that could have contributed to the risk of COVID-19 exposure? (Type none if there were none known)

What could be done to reduce exposure to COVID-19? (Type none if there were none known)

Was the local health department notified?

Date health department was notified

Section 3 - Action Taken

Employee has tested positive for COVID-19 or is symptomatic and does not have proof of a negative COVID-19 test.

Expected date to return to work

Was the employee hospitalized?

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 and possible hazards to, and how:
 - Employees should contact their site designated COVID coordinator to report COVID-19 symptoms by email or phone.
 - Tulare Union - Shanelle Herrera (Shanelle.herrera@tulare.k12.ca.us) / (559) 686-4761
 - Tulare Western - Damian Romero (damian.romero@tulare.k12.ca.us) / (559) 686-8751
 - Mission Oak - Armando Martin (armando.martin@tulare.k12.ca.us) / (559) 687-7308
 - Tech Prep/Countryside-Jonathan Farley (jonathan.farley@tulare.k12.ca.us) / (559) 687-7400
 - Sierra Vista - Daniel Dutto (daniel.dutto@tulare.k12.ca.us) / (559) 687-7384
 - Accelerated Charter - Wendi Powell (wendi.powell@tulare.k12.ca.us) / (559) 687-7303
 - Adult Ed - Robert Owen (robert.owen@tulare.k12.ca.us) / (559) 686-0225
 - District (employees) - Carrie Nelson (carrie.nelson@tulare.k12.ca.us) / (559) 688-2021
 - District (students) - Dereck Domingues (dereck.domingues@tulare.k12.ca.us) / (559) 688-2021
- That employees can report symptoms 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.
- Access to COVID-19 testing when testing is required:
 - If an employee needs accommodation due to medical or other conditions that put them at increased risk of severe COVID-19 illness they can contact Tammy Aldaco, Assistant Superintendent of Human Resources to start an Interactive Process.
 - The Tulare Joint Union High School District Provides At-Home COVID Antigen Tests to employees.
- The COVID-19 hazards employees (including other employers and individuals in contact with our workplace) may be exposed to, what is being done to control those hazards, and our COVID-19 policies and procedures.

- Information about COVID-19 hazards employees (including other employers and individuals in contact with our workplace) may be exposed to, what is being done to control those hazards, and our COVID-19 policies and procedures can be found on our District website.

Training and Instruction

We will provide effective 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 will be used to document this training.

Exclusion of COVID-19 Cases

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

- Ensuring that COVID-19 cases are excluded from the workplace until our return-to-work requirements in section 3205(c)(10) are met
- Reviewing current CDPH guidance for persons who had close contacts, including any guidance regarding quarantine or other measures to reduce transmission.
- Developing, implementing, and maintaining effective policies to prevent transmission of COVID-19 by persons who had close contacts.
- For employees excluded from work, continuing, and maintaining employees' earnings, wages, seniority, and all other employees' rights and benefits. This will be accomplished by

Individual who has symptoms and test results for COVID-19:

Positive:

Persons who test positive for COVID-19: Stay home for at least 5 days after start of symptoms (Day 0) or after date of first positive test (Day 0) if no symptoms. Isolation can end after Day 5 if: Symptoms are not present, or are mild and improving; AND Fever has been resolved for 24 hours (without the use of fever-reducing medication). If fever is present, isolation should be continued until 24 hours after fever resolves. If symptoms, other than fever, are not improving, continue to isolate until symptoms are improving or until after Day 10. If the confirmed case has severe symptoms, or is at high risk of serious disease or has questions concerning care, they should contact their healthcare provider for available treatments. Wear a well-fitting mask around others for a total of 10 days, especially in indoor settings. -After ending isolation, if symptoms recur or worsen, test again and if positive, restart isolation at Day 0.

Negative: If symptomatic consider self isolation

Individual has been exposed to a positive case of COVID-19: Test within 3-5 days after last exposure. -Close contacts should wear a well-fitting mask around others for a total of 10 days, especially in indoor settings and when near those at higher risk for severe COVID-19 disease. -Strongly encouraged to be up to date with COVID-19 vaccines. -If symptoms develop, test, and stay home.

If no symptoms employee can remain at work.

- 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.

Return-to-Work Criteria

We will meet the following return to work criteria for COVID-19 cases and employees excluded from work:

- **COVID-19 cases, regardless of vaccination status or previous infection and who do not develop symptoms or symptoms are resolving**, cannot return to work until we can demonstrate that all of the following criteria have been met:
 - At least five days have passed from the date that COVID-19 symptoms began or, if the person does not develop COVID-19 symptoms, from the date of first positive COVID-19 test;
 - At least 24 hours have passed since a fever of 100.4 degrees Fahrenheit or higher has resolved without the use of fever reducing medications; and
 - A negative COVID-19 test from a specimen collected on the fifth day or later is obtained; or, if unable to test or the employer chooses not to require a test, 10 days have passed from the date that COVID-19 symptoms began or, if the person does not develop COVID-19 symptoms, from the date of first positive COVID-19 test.
- **COVID-19 cases, regardless of vaccination status or previous infection, whose COVID19 symptoms are not resolving**, may not return to work until:
 - At least 24 hours have passed since a fever of 100.4 degrees Fahrenheit or higher has resolved without the use of fever-reducing medication; and
 - 10 days have passed from when the symptoms began.
- COVID-19 tests may be self-administered and self-read only if the following independent verification of the results can be provided.
- Regardless of vaccination status, previous infection, or lack of COVID-19 symptoms, a COVID-19 case shall wear a face covering in the workplace until 10 days have passed since the date that COVID-19 symptoms began or, if the person did not have COVID-19 symptoms, from the date of their first positive COVID-19 test.
- The return to work requirements for COVID-19 cases who do or do not develop symptoms apply regardless of whether an employee has previously been excluded or other precautions were taken in response to an employee's close contact or membership in an exposed group.
- 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.

Title of Owner or Top Management Representative

Signature

Date

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 Employees and Authorized Employee Representative that Participated:

Interaction, area, activity, work task, process, equipment and material that potentially exposes employees to COVID-19 hazards	Places and times	Potential for COVID-19 exposures and employees affected, including members of the public and employees of other employers	Existing and/or additional COVID-19 prevention controls, including barriers, partitions and ventilation

Appendix B: COVID-19 Inspections

Date:

Name of Person Conducting the Inspection:

Work Location Evaluated:

Exposure Controls	Status	Person Assigned to Correct	Date Corrected
Engineering			
Ventilation (amount of fresh air and filtration maximized)			
Additional room air filtration			

Exposure Controls	Status	Person Assigned to Correct	Date Corrected
Administrative			
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
PPE (not shared, available and being worn)			
Face coverings (cleaned sufficiently often)			
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:

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):	
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 returned to work per our return-to-work criteria and have remained symptom free for 90 days (or a different period than 90 days if it is required by a CDPH regulation or order) or, for those that never developed symptoms, for 90 days (or a different period than 90 days if it is required by a CDPH regulation or order) after the initial positive test.
- The names of those close contacts that were excluded per our Exclusion of COVID-19 Cases and Employees who had a Close Contact requirements.
- The names of those close contacts exempt from exclusion requirements because:
 - They were fully vaccinated before the close contact and did not develop COVID-19 symptoms, and are required to wear a face covering and maintain six feet of distance from others at the workplace for 14 days following

the last date of close contact.

- They returned to work per our return-to-work criteria and have remained symptom free, and are required to wear a face covering and maintain six feet of physical distance from others at the workplace for 14 days following the last date of close contact.
- They never developed symptoms and are required to wear a face covering and maintain six feet of physical distance from others at the workplace for 14 days following the last date of close contact.

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:			
All employees who may have had COVID-19 exposure and their authorized representatives.	Date:		
	Names of employees that were notified:		
Independent contractors and other employers present at the workplace during the high-risk exposure period.	Date:		
	Names of individuals that were notified:		
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:	

*Should an employer be made aware of a non-employee infection source COVID-19 status.

Appendix D: COVID-19 Training Roster

Date:

Name of Person Conducting the Training:

Employee Name	Signature

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

Employee Name	Fully or Partially Vaccinated	Method of Documentation

1. Update, accordingly and maintain as confidential medical record. T8CCR section 3205(b)(9) definition of “fully vaccinated” will be applied.

2. 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.
- 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 will 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 possible.
 - Respiratory protection.

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.

Additional Consideration #2

Major COVID-19 Outbreaks

This addendum will stay in effect until there are fewer than three COVID-19 cases detected in our exposed group for a 14-day period.

We continue to comply with the Multiple COVID-19 Infections and COVID-19 Outbreaks addendum, except that the COVID-19 testing, regardless of vaccination status, is made available to all employees in the exposed group twice a week, or more frequently if recommended by the local health department.

In addition to complying with our CPP and Multiple COVID-19 Infections and COVID-19 Outbreaks addendum, we also:

- Provide employees in the exposed group with respirators for voluntary use in compliance with section 5144(c)(2) and determine the need for a respiratory protection program or changes to an existing respiratory protection program under section 5144 to address COVID-19 hazards.
 - Separate by six feet (except where we can demonstrate that six feet of separation is not feasible and there is momentary exposure while persons are in movement) any employees in the exposed group who are not wearing respirators required by us and used in compliance with section 5144. When it is not feasible to maintain a distance of at least six feet, individuals are as far apart as feasible
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- Install cleanable solid partitions that effectively reduce transmission between the employee and other persons at workstations where an employee in the exposed group is assigned to work for an extended period, such as cash registers, desks, and production line stations, and where the physical distancing requirement (described above) is not always maintained.
 - Evaluate whether to halt some or all operations at the workplace until COVID-19 hazards have been corrected.
 - Implement any other control measures deemed necessary by Cal/OSHA.

Additional Consideration #3

COVID-19 Prevention in Employer-Provided Housing

Assignment of housing units

We, to the extent feasible, reduce employee exposure to COVID-19 by assigning employee residents to distinct groups and ensure that each group remains separate from other such groups during transportation and work. Shared housing unit assignments are prioritized in the following order:

- Residents who usually maintain a household together outside of work, such as family members, will be housed in the same housing unit without other persons.
- Residents who work in the same crew or work together at the same workplace will be housed in the same housing unit without other persons.
- Employees who do not usually maintain a common household, work crew, or workplace will be housed in the same housing unit only when no other housing alternatives are feasible.

Ventilation

We ensure maximization of the quantity and supply of outdoor air and increase filtration efficiency to the highest level compatible with the existing ventilation system in housing units. If there is not a Minimum Efficiency Reporting Value (MERV) 13 or higher filter in use, portable or mounted HEPA filtration units are used, where feasible, in all sleeping areas.

Face coverings

We provide face coverings to all residents and provide information to residents on when they should be used in accordance with state or local health officer orders or guidance.

Cleaning and disinfection

We will ensure that:

- Housing units, kitchens, bathrooms, and common areas are effectively cleaned to prevent the spread of COVID-19. Housing units, kitchens, bathrooms, and indoor common areas are cleaned and disinfected after a COVID-19 case was present during the high-risk exposure period, if another resident will be there within 24 hours of the COVID-19 case.
- Cleaning and disinfecting is done in a manner that protects the privacy of residents.
- Residents are instructed to not share unwashed dishes, drinking glasses, cups, eating utensils, and similar items.

Screening

We will encourage residents to report COVID-19 symptoms to:

COVID-19 testing

We establish, implement, maintain and communicate to residents' effective policies and procedures for COVID-19 testing of residents who had a close contact. All residents will be tested should there be three or more COVID-19 cases in 14 days.

COVID-19 cases and close contacts

We:

- Effectively quarantine residents who have had a close contact from all other residents. Effective quarantine includes providing residents who had a close contact with a private bathroom and sleeping area, except for COVID-19 cases who have met our return-to-work criteria and have remained asymptomatic:
 - For 90 days after the initial onset of symptoms,
 - For 90 days after the first positive test for COVID-19 cases who never developed symptoms.
- Effectively isolate COVID-19 cases from all residents who are not COVID-19 cases. Effective isolation includes housing COVID-19 cases only with other COVID-19 cases and providing COVID-19 case residents with a sleeping area and bathroom that is not shared by non-COVID-19-case residents.
- Keep confidential any personal identifying information regarding COVID-19 cases and persons with COVID-19 symptoms, in accordance with our CPP **Investigating and Responding to COVID-19 Cases**.
- End isolation in accordance with our CPP **Exclusion of COVID-19 Cases** and **Return to Work Criteria**, and any applicable local or state health officer orders

Additional Consideration #4

COVID-19 Prevention in Employer-Provided Transportation to and from Work

Assignment of transportation

To the extent feasible, we reduce exposure to COVID-19 hazards by assigning employees sharing vehicles to distinct groups and ensuring that each group remains separate from other such groups during transportation, during work activities, and in employer-provided housing. We prioritize shared transportation assignments in the following order:

- Employees residing in the same housing unit are transported in the same vehicle.
- Employees working in the same crew or workplace are transported in the same vehicle.
- Employees who do not share the same household, work crew or workplace are transported in the same vehicle only when no other transportation alternatives are feasible.

Face coverings and respirators

We will ensure that the:

- Face covering requirements of our CPP **Face Coverings** are followed for employees waiting for transportation, if applicable.
- All employees are provided with a face covering, which must be worn unless an exception under our CPP Face Coverings applies.
- Upon request, we provide respirators for voluntary use in compliance with subsection 5144(c)(2) to all employees in the vehicle who are not fully vaccinated.

Screening

We develop, implement, and maintain effective procedures for screening and excluding drivers and riders with COVID-19 symptoms prior to boarding shared transportation.

Cleaning and disinfecting

We will ensure that:

- All high-contact surfaces (door handles, seatbelt buckles, armrests, etc.) used by passengers are cleaned to prevent the spread of COVID-19 and are cleaned and disinfected if used by a COVID-19 case during the high-risk exposure period, when the surface will be used by another employee within 24 hours of the COVID-19 case.
- All high-contact surfaces used by drivers, such as the steering wheel, armrests, seatbelt buckles, door handles and shifter, are cleaned to prevent the spread of COVID-19 between different drivers and are disinfected after use by a COVID-19 case during the high-risk exposure period, if the surface will be used by another employee within 24 hours of the COVID-19 case.

- We provide sanitizing materials, training on how to use them properly, and ensure they are kept in adequate supply.

Ventilation

We ensure that vehicle windows are kept open, and the ventilation system is set to maximize outdoor air and not set to recirculate air. Windows do not have to be kept open if one or more of the following conditions exist:

- The vehicle has functioning air conditioning in use and excessive outdoor heat would create a hazard to employees.
- The vehicle has functioning heating in use and excessive outdoor cold would create a hazard to employees.
- Protection is needed from weather conditions; such as rain or snow.
- The vehicle has a cabin air filter in use and the U.S. EPA Air Quality Index for any pollutant is greater than 100.

Hand hygiene

We provide hand sanitizer in each vehicle and ensure that all drivers and riders sanitize their hands before entering and exiting the vehicle. Hand sanitizers with methyl alcohol are prohibited.