



COVID-19 Prevention Program

An Addendum to the Injury and Illness Prevention
Program

*In accordance with TITLE 8, DIVISION 1, CHAPTER 4, Subchapter 7. General Industry
Safety Orders Section 3205, COVID-19 Prevention*

Sacramento County Office of Education

Updated January 11, 2024

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(a) Scope of program.

(1) This section shall apply until February 3, 2025, except for the recordkeeping subsections 3205(j), which shall apply until February 3, 2026.

(2) This program applies to all employees and all Sacramento County Office of Education worksites, with the following exceptions:

- (A) Worksites with one employee who does not have contact with other people.
- (B) District-owned worksites (district plans and protocols will apply).
- (C) Employees working from home.
- (D) Employees when covered by section [5199, Aerosol Transmissible Diseases](#).
- (E) Employees working from a location chosen by the employee that is not under the control of the employer

(3) Nothing in this section or sections 3205.1 through 3205.3 is intended to limit more protective or stringent state or local health department orders or guidance.

(b) Definitions. The following definitions apply to this section and to the sections 3205.1 through 3205.3:

“Close Contact” means the following, unless otherwise defined by regulation or order of the California Department of Public Health (CDPH), in which case the CDPH definition shall apply:

- (1) In indoor spaces of 400,000 or fewer cubic feet per floor, close contact is defined as sharing the same indoor airspace as a COVID-19 case of a cumulative total of 15 minutes or more over a 24-hour period during the COVID-19 case’s infectious period, as defined this section, regardless of the use of face coverings.
- (2) In indoor spaces of greater than 400,00 cubic feet per floor, close contact is defined as being within six feet of the COVID-19 case for a cumulative total of 15 minutes or more over a 24-hour period during the COVID-19 Case’s infectious period, as defined by this section, regardless of the use of face coverings.
- (3) Offices, suites, rooms, waiting areas, break or eating areas, bathrooms or other spaces that are separated by floor-to-ceiling walls shall be considered distinct indoor spaces.

EXCEPTION: Employees have not had close contact if they wore a respirator required by the employer and used in compliance with section 5144 whenever they would otherwise have had close contact under subsections 3205(b)(1)(A) or (b)(1)(B).

“COVID-19” means coronavirus disease, an infectious disease caused by the severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2).

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“COVID-19 case” means a person who:

- (1) Has a positive “COVID-19 test” as defined in this section; or
- (2) Has a positive “COVID-19 diagnosis from a licensed health care provider: or
- (3) Is subject to COVID-19-related order to isolate issued by a local or state health official; or
- (4) Has died due to COVID-19, in the determination of a SCPH or per inclusion in the COVID-19 statistics of a county.

“COVID-19 hazard” means exposure to potentially infectious material that may contain SARS-CoV-2, the virus that causes COVID-19. Potentially infectious materials include airborne droplets, small particle aerosols, and airborne droplet nuclei, which most commonly result from a person or persons exhaling, talking or vocalizing, coughing, sneezing, or procedures performed on persons which may aerosolize saliva or respiratory tract fluids, among other things. This also includes objects or surfaces that may be contaminated with SARS-CoV-2.

“COVID-19 symptoms” means the following unless a licensed health care professional determines the person’s symptoms were caused by a known condition other than COVID-19.

- Fever of 100.4 degrees Fahrenheit or higher
- New loss of taste or smell
- Cough
- Muscle or body aches
- A sore throat
- Congestion or a runny nose
- Shortness of breath or difficulty breathing
- Chills
- Headache
- Nausea or vomiting, or diarrhea

“COVID-19 test” means a viral test for SARS-CoV-2 that is:

- (1) Approved by the United States Food and Drug Administration (FDA) or has an Emergency Use Authorization from the FDA to diagnose current infection with the SARS-CoV-2 virus; and
- (2) Administered in accordance with the FDA approval or the FDA Emergency Use Authorization as applicable.

“Exposed group” means all employees at a work location, working area, or a common area at work, within employer-provided transportation covered by section 3205.3, or residing within housing covered by section 3205.2, where an employee COVID-19 case was present at any time during the infectious period. Common areas at work include

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bathrooms, walkways, hallways, aisles, break or eating areas, and waiting areas. The following exceptions apply:

- (1) For the purpose of determining the exposed group, a place where persons momentarily pass through, without congregating, is not a work location, working area, or a common area at work.
- (2) If the COVID-19 case was part of a distinct group of employees who are not present at the workplace at the same time as other employees, for instance a work crew or shift that does not overlap with another work crew or shift, only employees within that distinct group are part of the exposed group.
- (3) If the COVID-19 case visited a work location, working area, or a common area at work for less than 15 minutes during the infectious period, and the COVID-19 case was wearing a face covering during the entire visit, other people at the work location, working area, or common area are not part of the exposed group.

NOTE: An exposed group may include the employees of more than one employer. See Labor Code sections 6303 and 6304.1.

“Face covering” means a surgical mask, a medical procedure mask, a respirator worn voluntarily, or a tightly woven fabric or non-woven material of at least two layers that completely covers the nose and mouth and is secured to the head with ties, ear loops, or elastic bands that go behind the head. If gaiters are worn, they shall have two layers of fabric or be folded to make two layers. A face covering is a solid piece of material without slits, visible holes, or punctures, and must fit snugly over the nose, mouth and chin with no large gaps on the outside of the face. A face covering does not include a scarf, ski mask, balaclava, bandana, turtleneck, collar, or single layer of fabric.

This definition includes clear face coverings or cloth face coverings with a clear plastic panel that otherwise meet this definition, and which may be used to facilitate communication with people who are deaf or hard of hearing or others who need to see a speaker’s mouth or facial expressions to understand speech or sign language respectively.

“Infectious Period” means the following period unless otherwise defined by CDPH regulation or order, in which case the CDPH definition shall apply:

- (1) For cases who develop COVID-19 symptoms: it is a minimum of 24 hours from the day of symptom onset:
 - a. COVID-19 Cases may return if 24 hours have passed with no fever, without the use of fever-reducing medications, AND their symptoms are mild and improving.

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(2) COVID-19 cases with no symptoms, there is no infectious period for the purpose of isolation or exclusion. If symptoms develop, then they follow the criteria for cases who develop COVID-19 symptoms.

“Respirator” means a respiratory protection device approved by the National Institute for Occupational Safety and Health (NIOSH) to protect the wearer from particulate matter, such as an N95 filtering facepiece respirator.

“Returned case” means a COVID-19 case who was excluded from work but returned pursuant to subsection 3205(c)(5)(A) and did not develop any COVID-19 symptoms after returning. A person shall only be considered a returned case for 30 days after the initial onset of COVID-19 symptoms or, if the person never developed COVID-19 symptoms, for 30 days after the first positive test. If a period of other than 30 days is required by a CDPH regulation or order, that period shall apply.

“Worksite” for the limited purposes of this section and section 3205.1, means the building, store, facility, agricultural field, or other location where a COVID-19 case was present during the infectious period. It does not apply to buildings, floors, or other locations of the employer that a COVID-19 case did not enter.

(c) Written COVID-19 Prevention Program Components.

SCOE has developed this written COVID-19 Prevention Program, in accordance with TITLE 8, DIVISION 1, CHAPTER 4, Subchapter 7. General Industry Safety Orders Section 3205, COVID-19 Prevention.

SCOE’s Prevention Program has been developed in accordance with the issued guidance from the State of California Department of Public Health, the Sacramento County Public Health Department, and Cal/OSHA (Appendix A).

SCOE has a COVID Response Team comprised of: The Chief Administrator, Human Resources, Personnel Coordinator, Personnel Analyst (Leaves Management), and the Director III, Business, Technology Operations and Facilities Development. The COVID response team is responsible for responding to COVID related issues.

Elements of the COVID-19 Prevention Program include:

(1) System for communicating.

SCOE will do all the following in a form readily understandable by employees:

(A) Employee Reports:

All employees of SCOE are to, without fear of reprisal, report to their supervisor or manager any of the following:

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1. **COVID-19 symptoms:** If any employee is experiencing any of the identified symptoms of COVID-19 they are to contact their supervisor and then contact the [Personnel Department](#) at (916) 202-5725
2. **Possible COVID-19 exposures:** If any employee has been exposed or possibly exposed to an individual who is positive for or has been diagnosed with COVID-19, they should contact [the Personnel Department](#) at (916) 202-5725 immediately.
3. **Possible COVID-19 hazards at the workplace:** If any employee becomes aware of a possible hazard in the workplace that could increase the likelihood of exposure to COVID-19, please complete the COVID Hazard Alert Form located on SCOE SharePoint under Forms and Documents/Health and Safety/COVID-19 Hazard Alert Form. Complete the form and send it to supportservices@scoe.net. A Support Services representative will review the hazard alert form and assess the condition for possible corrective action.

(B) Procedures for accommodating employees with medical or other conditions that put them at increased risk of severe COVID-19 illness.

Employees requesting reasonable accommodation should inform their supervisor and then contact the Personnel Department at 916-228-2365. An interactive meeting may be held to discuss work restrictions and reasonable accommodation.

(C) Access to COVID-19 testing.

If testing is required in accordance with this written program, SCOE shall inform any affected employees of the reason for the COVID-19 testing and the possible consequences of a positive test.

Employees who may have been exposed to COVID-19 will be notified by the Personnel Department and provided the most up-to-date guidelines and requirements of the California Department of Public Health and California Division of Occupational Safety (DOSH), better known as CalOSHA. The Sacramento County Public Health Department (SCPH) provides information on COVID-19 testing. [Testing Sites List](#)

(D) COVID-19 hazards and SCOE's COVID-19 policies and procedures to protect employees and other employers, persons, and entities within or in contact with the employer's workplace.

If an employee has come into close contact with someone who has been diagnosed with COVID-19 or been asked by their physician to isolate or quarantine within the last two weeks, they should consult with the Personnel Department regarding protocols.

SCOE's Workplace Wellness Document is located on the SCOE SharePoint under Forms and Documents/Health and Safety. SCOE's Injury and Illness Protection Program (IIPP) document is located in the same location on SharePoint. A hard copy of both documents may be provided by Personnel upon request.

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(2) Identification and evaluation of COVID-19 hazards.

(A) Identification and evaluation of COVID-19 hazards

SCOE will include opportunities for employees and authorized employee representatives to participate in the identification and evaluation of COVID-19 hazards as follows:

At the onset of the pandemic, the SCOE Support Services Department evaluated each SCOE work site for potential COVID-19 hazards. Higher risk work areas were identified, and mitigation steps were taken such as purchasing and installing clear, cleanable plastic barriers in reception areas, closing bathroom stalls and sinks to provide six feet of space and creating socially distanced break room seating areas by removing tables and chairs.

SCOE continues to evaluate worksites periodically and adjust where necessary. Support Services reacts quickly to incoming feedback regarding potential COVID-19 hazards via the COVID-19 Hazard Alert form or other feedback mechanism.

SCOE provides opportunities for employees and authorized employee representatives to participate in the identification and evaluation of COVID-19 hazards by utilizing the existing process detailed in our bargaining unit contracts; CSEA Section 23.01 and SCOETA Section 13.01, 13.02.

(B) Employee Symptom Screening

SCOE has implemented a process for screening and responding to employees with COVID-19 symptoms.

SCOE employees should self-screen for COVID-19 related symptoms before leaving home to enter a SCOE worksite and at various times throughout the workday. Signage at entrances at SCOE worksites includes a symptoms checklist.

The symptoms currently associated with COVID-19 are:

- Fever (100.4° F or greater)
- Loss of smell or taste
- A cough
- Muscle aches
- A sore throat
- Congestion or a runny nose
- Shortness of breath
- Chills
- Headache
- Nausea, vomiting, diarrhea

This list is not all possible symptoms. Employees should contact their medical provider for any other symptoms that are severe or concerning.

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IMPORTANT: SCOE employees are encouraged to seek emergency medical attention if showing any of the following signs:

- Trouble breathing
- Persistent pain or pressure in the chest
- New confusion
- Inability to wake or stay awake
- Bluish lips or face

(C) Response to COVID-19 case

SCOE has developed COVID-19 policies and procedures to respond effectively and immediately to individuals at the workplace who are positive for COVID-19 to prevent or reduce the risk of transmission of COVID-19 in the workplace.

SCOE has a contact tracing system in place. If an employee has come into close contact with someone who has tested positive or been diagnosed with COVID-19 or been asked by their physician to isolate or quarantine within the last two weeks, should consult with Personnel regarding protocols.

(D) Workplace Assessment

SCOE will conduct a workplace-specific assessment of SCOE worksites to identify all interactions, areas, activities, processes, equipment, and materials that could potentially expose employees to COVID-19 hazards.

SCOE will take universal precautions and treat all persons, regardless of symptoms or negative COVID-19 test results, as potentially infectious:

1. This shall include identification of places and times when people may congregate or come into contact with one another, regardless of whether employees are performing an assigned work task or not, for instance during meetings or training and including in and around entrances, bathrooms, hallways, aisles, walkways, elevators, break or eating areas, cool-down areas, and waiting areas.
2. This shall include an evaluation of employees' potential workplace exposure 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. Employers shall consider how employees and other persons enter, leave, and travel through the workplace, in addition to addressing fixed work locations.

SCOE has developed a Workplace Assessment document (for SCOE worksites) that will help administrators validate that they are protecting employees from COVID-19. The assessment can be found in Appendix B of this program document.

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(E) Ventilation Systems

For indoor locations, SCOE will evaluate how to maximize the quantity of outdoor air and whether it is possible to increase filtration efficiency to the highest level compatible with the existing ventilation system.

The SCOE facilities development team has analyzed the ventilation systems at each of its operating sites. In consultation with our HVAC service vendor, Air Systems, we have increased the intake of outside air and reduced recirculation at all worksites where SCOE maintains the HVAC systems. We have also worked with our district partners to make sure they are taking similar steps. Where feasible and safe, site staff have been instructed to prop outside doors open as well as open windows.

(F) Ongoing monitoring and review of orders and guidance

SCOE will monitor and review applicable orders and guidance from the State of California and the SCPH related to COVID-19 hazards and prevention, including information of general application and information specific to the employer's industry, location, and operations.

SCOE administration, including the Superintendent, the Deputy Superintendent, and the Chief Administrator of Human Resources communicate regularly with the SCPH. Executive Orders, Health Orders, and updated guidance is reviewed and implemented as conditions change. SCOE's COVID Response Team will update protocols as necessitated by new orders and guidance.

(G) Evaluate existing prevention controls

The SCOE COVID Response Team will regularly evaluate COVID-19 prevention controls. These controls include:

Employee Communication

- Are employees being provided with information on SCOE's preventative measures and mandates? Does this communication include instructions on the proper use of PPE and wellness self-checks?

Signage

- Are informational posters up-to-date and relevant for the worksite function? Are posters visible, clear and concise?

Policies

- Are SCOE's leave policies compatible with the goal of having employees stay at home when they are feeling ill or experiencing any of the symptoms associated with COVID-19?

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Leadership

- Are supervisors advising employees to stay at home when they are feeling ill or experiencing any of the symptoms associated with COVID-19?
- Are supervisors aware of the proper protocols when an employee discloses the following:
 - They tested positive for COVID-19.
 - They are feeling ill or displaying symptoms of COVID-19.
 - They are aware of a co-worker who is feeling ill or displaying symptoms of COVID-19.
 - They were in close contact with someone who has tested positive or is suspected of having COVID-19.
 - They know a co-worker who was in close contact with someone who has tested positive or is suspected of having COVID-19.
- Are departments taking steps to stagger the number of employees who are working in the office and performing remote work?

Facilities

- Determine if further steps can be taken to prevent COVID-19 above and beyond wiping down high-touch surfaces and sanitizing work areas, common areas and restrooms. If so, implement increased precautions.

(H) Periodic Inspections

SCOE will conduct periodic inspections of SCOE worksites as needed to identify unhealthy conditions, work practices, and work procedures related to COVID-19 and to ensure compliance with employers' COVID-19 policies and procedures.

The inspection will include the following:

1. Checking each entrance for up-to-date signage that details SCOE's wellness self-check policies.
2. Checking restrooms to make sure they are fully stocked with hand soap, paper towels and toilet paper. Checking soap dispensers and paper towel dispensers to make sure they are functional.
3. Checking that common areas have an adequate supply of face masks, hand sanitizer, and sanitizing wipes.

(3) Investigating and responding to COVID-19 cases in the workplace.

(A) Procedure to investigate COVID-19 cases in the workplace.

The Personnel Department conducts contact tracing for any known or suspected COVID-19 case. Information received from employees, the SCPH, or their physician regarding symptoms, test results or medical diagnosis is treated confidentially. The identity of any employee COVID-19 case is not shared with other employees. COVID-19 tracking data is kept in a confidential electronic file.

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(B) Response to a COVID-19 case in the workplace:

SCOE will take all of the following steps in response to a COVID-19 case in the workplace:

1. Determine the date the COVID-19 case was last present and, to the extent possible, the date of the positive COVID-19 test(s) and/or diagnosis, and the date the COVID-19 case first had one or more COVID-19 symptoms, if any were experienced.
2. Determine who may have had COVID-19 exposure. This requires an evaluation of the activities of the COVID-19 case and all locations at the workplace which may have been visited by the COVID-19 case during the high-risk exposure period.

Note: See subsection (c)(10) for exclusion requirements for employees with COVID-19 exposure.

3. Give notice of the potential COVID-19 exposure, within one business day, in a way that does not reveal any personal identifying information of the COVID-19 case, to the following:
 - a. All employees who work at the worksite where the COVID-19 case was located.
 - b. The exclusive labor representatives of the above employees.
 - c. Independent contractors and other employers that are present at the workplace during the high-risk exposure period.
4. Offer COVID-19 testing at no cost to employees during their working hours to all employees who had potential COVID-19 exposure in the workplace and provide them with the information on benefits described in subsections (c)(5)(B) and (c)(10)(C).
5. Investigate whether any workplace conditions could have contributed to the risk of COVID-19 exposure and what could be done to reduce exposure to COVID-19 hazards. See Appendix B for the SCOE COVID-19 Workplace Investigation Form sample.

(C) Confidentiality of Personal Identifying Information

All personally identifying information regarding COVID-19 cases or persons with COVID-19 symptoms shall be kept confidential. All COVID-19 testing, or related medical services provided by the employer under this section and sections 3205.1 through 3205.4 shall be provided in a manner that ensures the confidentiality of employees.

EXCEPTION to subsection (c)(3)(C): Unredacted information on COVID-19 cases shall be provided to the SCPH, CDPH, the Division, the National Institute for Occupational Safety and Health (NIOSH), or as otherwise required by law immediately upon request.

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(D) Confidentiality of Employee Medical Records

All Employee medical records are kept confidential and are not disclosed or reported without the employee's express written consent to any person within or outside the workplace.

EXCEPTION 1 to subsection (c)(3)(D): Unredacted medical records shall be provided to the SCPH, CDPH, the Division, NIOSH, or as otherwise required by law immediately upon request.

EXCEPTION 2 to subsection (c)(3)(D): This provision does not apply to records that do not contain individually identifiable medical information or from which individually identifiable medical information has been removed.

(4) Correction of COVID-19 hazards.

SCOE has implemented policies and/or procedures for correcting unsafe or unhealthy conditions, work practices, policies and procedures in a timely manner based on the severity of the hazard.

If a SCOE employee recognizes a potential COVID-19 hazard:

- Report the hazard by completing a COVID-19 Hazard Alert form and emailing it to supportservices@scoe.net. The form can be found on SCOE SharePoint under Forms and Documents/Health and Safety. See Appendix B for the SCOE COVID-19 Hazard Alert Form sample.
- The originator should inform their supervisor of the hazard and provide them with a copy of the completed hazard alert.
- A member of the Support Services team will review the alert form and investigate the potential hazard. If warranted, steps will be taken to correct the hazardous condition.
- Regardless of the outcome, a Support Services representative will provide feedback to the originator and their supervisor.

Support Services will maintain a spreadsheet of all reported hazards that includes the results of the investigation and the steps that were taken if there were any, to correct the hazardous condition.

(5) Training and instruction.

SCOE has developed a training program for all employees with instructions to employees including, but not limited to, the following:

- The District's COVID-19 policies and procedures to protect employees from COVID-19 hazards.
- The fact that COVID-19 is an infectious disease that can be spread through the air when an infectious person talks or vocalizes, sneezes, coughs, or exhales; that COVID-19 may be transmitted when a person touches a contaminated

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object and then touches their eyes, nose, or mouth, although that is less common; and that 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 but are most effective when used in combination.
- The employer's policies for providing respirators, and the right of employees to request a respirator for voluntary use as stated in this section, without fear of retaliation and at no cost to employees. Whenever respirators are provided for voluntary use under this section or sections 3205.1 through 3205.4, the district shall provide effective training and instruction to employees regarding:
 - How to properly wear the respirator provided.
 - How to perform a seal check according to the manufacturer's instructions each time a respirator is worn, and the fact that facial hair interferes 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. 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.
 - COVID-19 symptoms, and the importance of not coming to work and obtaining a COVID-19 test if the employee has COVID-19 symptoms.
 - Information on the employer's COVID-19 policies; 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.
- The conditions under which face coverings must be worn at the workplace and that employees can request face coverings from the employer at no cost to the employee and can wear them at work, regardless of vaccination status, without fear of retaliation

(6) Face coverings

(A) SCOE will provide face coverings and ensure they are worn by employees when required by a CDPH regulation or order. When a CDPH regulation or order requires face coverings indoors, that includes spaces within vehicles. Face coverings shall be clean, undamaged, and worn over the nose and mouth.

(B) When employees are required to wear face coverings under this section or sections 3205.1 through 3205.3, the following exceptions apply:

- When an employ is alone in a room or vehicle

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- While eating or drinking at the workplace, provided employees are at least six feet apart and, if indoors, the supply of outside or filtered air has been maximized to the extent feasible.
- While employees are wearing respirators required by the employer and used in noncompliance with section 5144.
- 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 shall wear an effective non-restrictive alternative, such as a face shield with a drape at the bottom, if the condition or disability permits it.
- During specific tasks which cannot feasibly be performed with a face covering. This exception is limited to the period in which such tasks are actually being performed.
- If an employee is not wearing a face covering pursuant to the exceptions in subsections 3205(f)(2)(D) and (f)(2) € SCOE shall assess COVID-19 hazards and act as necessary based on subsection 3205(c) and on section 3203.
- SCOE shall not prevent any employee from wearing a face covering, including a respirator, when not required by this section, unless it creates a safety hazard.

(8) Other engineering controls, administrative controls, and personal protective equipment.

(A) Maximize Outdoor Air

For buildings with mechanical or natural ventilation, or both, SCOE will 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 letting in outdoor air by other means would cause a hazard to employees, for instance from excessive heat or cold.

SCOE has taken steps to increase airflow and maximize filtration. Employees have been instructed to open windows and doors where possible and safe. The environmental controls have been adjusted to increase the circulation of outside air and to reduce the amount of air that is recirculated at sites where SCOE maintains the HVAC systems. This is all done in coordination with our HVAC experts at Air Systems.

(B) Cleaning and Disinfecting

SCOE has implemented cleaning and disinfecting procedures at SCOE worksites, which require:

1. Identifying and regularly cleaning and disinfecting frequently touched surfaces and objects, such as doorknobs, elevator buttons, equipment, tools, handrails, handles, controls, bathroom surfaces, and steering wheels. SCOE will inform employees and authorized employee representatives of cleaning and disinfection protocols, including the planned frequency and scope of regular cleaning and disinfection.

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An Addendum to the Injury and Illness Program: *In accordance with TITLE 8, DIVISION 1, CHAPTER 4, Subchapter 7. General Industry Safety Orders Section 3205, COVID-19 Prevention*

2. Prohibiting the sharing of personal protective equipment and, to the extent feasible, items that employees come in regular physical contact with such as phones, headsets, desks, keyboards, writing materials, instruments, and tools. When it is not feasible to prevent sharing, sharing shall be minimized, and such items and equipment shall be disinfected between uses by different people. Sharing of vehicles shall be minimized to the extent feasible, and high touch points (steering wheel, door handles, seatbelt buckles, armrests, shifter, etc.) shall be disinfected between users.

3. Cleaning and disinfection of areas, material, and equipment used by a COVID-19 case during the high-risk exposure period.

SCOE Workspaces

- SCOE uses cleaners and disinfectants that are EPA approved for use against SARS-CoV-2 (COVID-19).
- The SCOE Custodial team sanitizes desks, keyboards, mice, phones (desk and cell), printers, and copiers nightly. Work surface clutter should be removed for thorough nightly work surface cleaning. Custodial staff will not move paperwork or personal items to clean.
- Employees are expected to sanitize their desks, keyboards, mice, phones, and printers before they start work each day and when needed during the day using approved sanitizing products provided by SCOE.

Meeting Rooms

- The meeting rooms in SCOE administrative offices, including all tabletops and chair arms, are cleaned, and sanitized nightly.
- Meeting rooms are stocked with hand sanitizer and wipes (or other approved sanitizing products). NOTE: Contingent upon product availability.

Kitchens and Break/Lunchrooms

- SCOE breakrooms and kitchens are cleaned and sanitized nightly. They are also sanitized several times during the workday. This includes:
 - Counters
 - Light switches
 - Dispensing Equipment - Soap, Sanitizer, Towels
 - Trash/Recycling Receptacles
 - Coffee Pots/Coffee Makers
 - Water dispenser handles
 - Refrigerator and freezer doors and handles
 - Vending machine doors and keypads
 - Microwave oven door and keypad
- All SCOE breakrooms and kitchens are stocked with hand sanitizer and approved sanitizing products. NOTE: Contingent upon product availability.

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- The SCOE Custodial Team ensures that breakrooms and kitchens are always stocked with hand soap and paper towels.

SCOE Entrances, Elevators, Stairways, and Hallways

- The SCOE custodial team sanitizes “high touch” items frequently throughout the workday. This includes:
 - Handrails
 - Door handles
 - Elevator doors, rails, and buttons
 - Hallway corner guards

SCOE Restrooms

- Restrooms are cleaned and sanitized nightly. They are also sanitized several times during the workday. This includes:
 - Dispensing Equipment—Soap, Sanitizer, Towels
 - Bathroom Fixtures—Sink Faucet, Toilet Flush Handle
 - Toilets
 - Changing Stations
 - Stalls
 - Stall Handles
 - Trash/Recycling Receptacles
 - Door handles
- The SCOE Custodial Team will ensure that bathrooms are operational and always stocked with hand soap and paper towels.

(D) Handwashing Facilities

To protect employees from COVID-19 hazards, SCOE will evaluate its handwashing facilities, determine the need for additional facilities, encourage and allow time for employee handwashing, and provide employees with an effective hand sanitizer. Employers shall encourage employees to wash their hands for at least 20 seconds each time. Provision or use of hand sanitizers with methyl alcohol is prohibited.

SCOE actively encourages its employees to wash their hands frequently. Employees should wash their hands with soap and water, including scrubbing with soap for 20 seconds. Hand sanitizer may be used (with at least 60% ethanol or 70% isopropanol) when soap and water are not immediately available. All SCOE bathrooms are stocked with hand soap.

- Wet hands with clean, running water (warm or cold), turn off the tap and apply soap.
- Lather hands by rubbing them together with the soap. Lather the backs of hands, between fingers, and under the nails.
- Scrub hands for at least 20 seconds. Need a timer? Hum the “Happy Birthday” song from beginning to end twice.

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- Rinse hands well under clean, running water.
- Dry hands with a paper towel and use the towel to turn off the water flow (if necessary).
- Use the towel to touch the door handle upon exiting.
- Dispense of the paper towel in the nearest trash receptacle.

Hand sanitizer usage:

- Apply the gel or foam product to the palm of one hand (read the label to learn the correct amount).
- Rub the gel over all the surfaces of hands and fingers until hands are dry. This should take around 8 seconds.

(E) Personal protective equipment.

1. SCOE will evaluate the need for personal protective equipment to prevent exposure to COVID-19 hazards, such as gloves, goggles, and face shields, and provide such personal protective equipment as needed.
2. SCOE will evaluate the need for respiratory protection in accordance with section 5144 when the physical distancing requirements in subsection (c)(6) are not feasible or are not maintained.
3. SCOE will provide and ensure use of respirators in accordance with section 5144 when deemed necessary by the Division through the Issuance of Order to Take Special Action, in accordance with title 8 section 332.3.
4. SCOE will provide and ensure use of eye protection and respiratory protection in accordance with section 5144 when employees are exposed to procedures that may aerosolize potentially infectious material such as saliva or respiratory tract fluids.

SCOE has determined that its classroom-based employees require access to gloves, face shields and disposable gowns. A supply of each of these items is provided to all SCOE classroom-based employees. This is in addition to disposable masks, hand sanitizer and disinfectant wipes.

SCOE has determined that school nurses and any employee temporarily acting in a medical capacity requires access to N95 respirators.

(9) Reporting, recordkeeping, and access.

(A) Local Public Health

SCOE reports information about COVID-19 cases at the workplace to the SCPH whenever required by law and shall provide any related information requested by the SCPH.

(B) Cal/OSHA

SCOE will report immediately to the Division any COVID-19-related serious illnesses or death, as defined under section 330(h), of an employee occurring in a place of employment or in connection with any employment.

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(C) Injury & Illness Prevention Program

SCOE maintains records of the steps taken to implement the written COVID-19 Prevention Program in accordance with section 3203(b).

(D) Access to the COVID-19 Prevention Program

The written COVID-19 Prevention Program shall be made available at the workplace to employees, authorized employee representatives, and representatives of the Division immediately upon request. The COVID-19 Prevention Program is located on the SCOE SharePoint in the COVID-19 Resources folder as well as in the Health and Safety folder.

(E) Access to COVID-19 Case Records

SCOE keeps a record of and contact traces all COVID-19 cases with the employee's name, date of positive COVID-19 test, the date of the last day at work site and worksites visited. Medical information is kept confidential in accordance with subsections (c)(3)(C) and (c)(3)(D). The information shall be made available to employees, authorized employee representatives, or as otherwise required by law, with personal identifying information removed.

(10) Exclusion of COVID-19 cases.

The purpose of this section is to limit the transmission of COVID-19 in the workplace.

(A) COVID-19 Cases

SCOE ensures that COVID-19 cases are excluded from the workplace until the return-to-work requirements in alignment with the most up-to-date SCPH and CDPH guidelines are met.

(B) COVID-19 Exposure Cases

SCOE follows the most-up-to-date guidelines from the SCPH and CDPH. Close Contacts are not excluded from the workplace unless otherwise mandated. (C) Earnings & Benefits while excluded

For employees excluded from work and otherwise able and available to work, SCOE continues and maintains the employee's earnings, seniority, and all other employee rights and benefits, including the employee's right to their former job status, as if the employee had not been removed from their job.

SCOE uses employer-provided employee sick leave and other paid leaves for this purpose and considers benefit payments from other public sources (e.g., Federal provided leaves, Industrial and Illness leave) in determining how to maintain earnings, rights, and benefits, where permitted by law and when not covered by workers' compensation.

EXCEPTION 1: Subsection (c)(10)(C) does not apply to any period during which the employee is unable to work for reasons other than protecting persons at the workplace from possible COVID-19 transmission.

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EXCEPTION 2: Subsection (c)(10)(C) does not apply where the employer demonstrates that the COVID-19 exposure is not work-related.

(D) This section does not limit any other applicable law, employer policy, or collective bargaining agreement that provides for greater protections.

(E) Information on Benefits & Leaves

At the time of exclusion, SCOE will provide the employee with information in writing on available benefits and leaves as required.

EXCEPTION to subsection (c)(10): Employees who have not been excluded or isolated by the SCPH need not be excluded by the employer, if they are temporarily reassigned to work where they do not have contact with other persons until they return to work requirements of subsection (c)(11) are met.

(11) Return to work criteria.

(A) COVID-19 cases with COVID-19 symptoms shall not return to work until:

1. Shall not return to work until a minimum of 24 hours have passed since the date of specimen collection of their first positive COVID-19 test.
2. t least 24 hours have passed since a fever has resolved without the use of fever-reducing medications; and
3. COVID-19 symptoms are mild and improving

(B) COVID-19 cases who tested positive but never developed COVID-19 symptoms:

1. There is no infectious period for the purpose of isolation or exclusion. If symptoms develop, then they must follow the criteria for COVID-19 cases with COVID-19 symptoms

(C) A negative COVID-19 test shall not be required for an employee to return to work.

(D) If an order to isolate or quarantine an employee is issued by a local or state health official:

The employee shall not return to work until the period of isolation or quarantine is completed or the order is lifted. If no period was specified, then the period shall be:

- 10 days from the time the order to isolate was effective, or
- 14 days from the time the order to quarantine was effective.

(11) Major Outbreaks

If 20 or more employee COVID-19 cases in an exposed group, as defined by

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subsection 3205(b)(7), visited the worksite during their infectious period within a 30-day period, the District shall do the following while section 3205.1 applies:

- (1) The COVID-19 testing described in subsection 3205.1(b) shall be required of all employees in the exposed group, regardless of vaccination status, twice a week or more frequently if recommended by the local health department with jurisdiction over the workplace. Employees in the exposed group shall be tested or shall be excluded and follow the return-to-work requirements of subsection 3205(c)(5).
- (2) The District shall report the outbreak to the Division. This subsection does not limit the District's obligation to report employee deaths, serious injuries, or serious illnesses when required by subsection 342(a).
- (1) The District shall provide respirators for voluntary use in compliance with subsection 5144(c)(2) to employees in the exposed group, shall encourage their use, and shall train employees provided respirators for voluntary use, as set forth in subsection 3205(g).
- (2) Any employees in the exposed group who are not wearing respirators required by the employer and used in compliance with section 5144 shall be separated from other persons by at least six feet, except where the District can demonstrate that at least six feet of separation is not feasible, and except for momentary exposure while persons are in movement. Methods of physical distancing include telework or other remote work arrangements; reducing the number of persons in an area at one time, including visitors; visual cues such as signs and floor markings to indicate where employees and others should be located or their direction and path of travel; staggered arrival, departure, work, and break times; and adjusted work processes or procedures, such as reducing production speed, to allow greater distance between employees. When it is not feasible to maintain a distance of at least six feet, individuals shall be as far apart as feasible.

Note: Authority cited: Section 142.3, Labor Code. Reference: Sections 142.3 and 144.6, Labor Code.

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(b) Exclusion of COVID-19 cases.

SCOE will ensure COVID-19 cases are excluded from the workplace in accordance with this COVID-19 Prevention Program and local health officer orders if applicable.

(d) Investigation of workplace COVID-19 illness.

SCOE will immediately investigate and determine possible workplace-related factors that contributed to the COVID-19 outbreak in accordance with our COVID-19 Prevention Program.

(e) COVID-19 Investigation, review, and hazard correction.

In addition to the requirements of the COVID-19 Prevention Program, SCOE will 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 shall be documented and include:

- (1) Investigation of new or unabated COVID-19 hazards including leave policies and practices and whether employees are discouraged from remaining home when sick; COVID-19 testing policies; insufficient outdoor air; insufficient air filtration; and lack of physical distancing.
- (2) The review shall be updated every thirty days that the outbreak continues, in response to new information or to new or previously unrecognized COVID-19 hazards, or when otherwise necessary.
- (3) SCOE will implement changes to reduce the transmission of COVID-19 based on the investigation and review required by the COVID-19 Prevention Program. SCOE 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, and other applicable controls.

(f) Notifications to the SCPH.

- (1) SCOE will contact the SCPH immediately but no longer than 48 hours after the SCOE knows, or with diligent inquiry would have known, of three or more COVID-19 cases for guidance on preventing the further spread of COVID-19 within the workplace.
- (2) SCOE will provide to the SCPH the total number of COVID-19 cases and for each COVID-19 case, the name, contact information, job title, worksite, business address, the hospitalization and/or fatality status, and North American Industry Classification System code of the workplace of the COVID-19 case, and any other information requested by the SCPH. SCOE will continue to give notice to the SCPH of any subsequent COVID-19 cases at the workplace.

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(3) Effective January 1, 2021, SCOE will provide all information to the SCPH required by Labor Code section 6409.6.

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Appendix A: Guidance

[Current California Safety Measures](#)

[CDPH Isolation and Quarantine Guidance](#)

Employers

- [Cal/OSHA COVID-19 Prevention Non-Emergency Regulations](#)
- [CDPH Safety in the workplace](#)

K-12 Education

- [Safe Schools for All Hub](#)
- [Division of Communicable Disease Control](#)

Face Coverings

- [CDPH: Get the Most out of Masking: Tips and Resources](#)
- [California All: Mask Wearing in the Community](#)
- [Face coverings, masks & respirators](#) Handout
- [Cal/OSHA Voluntary use of N95 masks](#)

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Appendix B: Forms

[SCOE COVID-19 Workplace Assessment Form](#)

[SCOE COVID-19 Hazard Alert Form](#)

[SCOE COVID-19 Workplace Investigation Form](#)

See Next Pages

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SCOE COVID-19 Workplace Assessment

Name of person completing the assessment: _____

Organization: _____

Date: _____

Workplace Information

Facility Name: _____

Facility Location: _____

Facility Point of Contact (POC) Name: _____

POC Position/Title: _____

POC Phone #: _____

POC Email: _____

Number of employees: _____

1 - Reduce Transmission Among Employees

A. Actively require sick employees to stay home

Are employees who have symptoms (i.e., fever, cough, shortness of breath, body aches, chills, loss of taste/smell, sore throat, congestion or runny nose, headache, nausea, vomiting or diarrhea) instructed to stay home and have employees received training and education on employee health policies?

Yes ☐ No ☐

Are systems in place for employees to notify their supervisor if they develop symptoms while at home?

Yes ☐ No ☐

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Are sick employees being asked to stay home, notify their supervisor, and follow CDC-recommended guidelines for what to do if you are sick?

Yes ☐ No ☐

Are sick employees being told they must consult with healthcare providers and state and local health departments to determine when they can return to work?

Yes ☐ No ☐

B. Identify where and how workers might be exposed to COVID-19 at work

Has facility reviewed Cal OSHA COVID-19 website and guidance for employers for information on how to protect workers from potential exposures?

Yes ☐ No ☐

Has SCOE considered additional social distancing or other Cal OSHA approved methods for employees that may be at higher risk for serious illness?

Yes ☐ No ☐

C. Monitor employees for fever and symptoms

Are employees being screened upon arrival at the facility for fever (>100.4°F) and other symptoms of COVID-19?

Yes ☐ No ☐

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Is SCOE systematically logging this screening information?

Yes ☐ No ☐

Are employees being reminded to monitor and immediately report any symptoms they develop while at work to their supervisor and the Personnel Department?

Yes ☐ No ☐

D. Separate sick employees

Are employees who appear to have symptoms of COVID-19 upon arrival at work or who become sick during the day being immediately separated from other employees, customers, and visitors and sent home?

Yes ☐ No ☐

Has SCOE established a protocol for informing fellow employees of possible exposure to COVID-19 in the event an employee is confirmed to have COVID-19 infection? Facilities must maintain confidentiality as required by the Americans with Disabilities Act (ADA).

Yes ☐ No ☐

E. Educate employees about how they can reduce the spread of COVID-19

Have employees been educated about steps they can take to protect themselves at work and at home?

Yes ☐ No ☐

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Have employees been informed that older people and people with serious chronic medical conditions are at higher risk for complications?

Yes ☐ No ☐

Have employees been instructed to follow the policies and procedures of your employer related to illness, cleaning and disinfecting, and work meetings and travel?

Yes ☐ No ☐

Are employees being educated about recommended guidelines for what do to if you are sick, including staying home except to get medical care?

Yes ☐ No ☐

Have employees been informed of how and when to inform their supervisor if they have a sick family member at home with COVID-19? Review CDC guidelines for what to do if someone in your house is sick.

Yes ☐ No ☐

Have employees been educated to wash their hands often (including after coughing or sneezing) with soap and water for at least 20 seconds or else in accordance with all applicable requirements under state statutes and regulations? Hand sanitizer with at least 70% alcohol may be used if soap and water are not available in some work settings provided applicable state code requirements are being met.

Yes ☐ No ☐

Have employees been instructed to avoid touching their eyes, nose, and mouth with unwashed hands?

Yes ☐ No ☐

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Have employees and custodial services staff been informed how to clean AND disinfect frequently touched objects and surfaces such as workstations, keyboards, telephones, electronic handheld devices, handrails, light switches, and doorknobs?

Yes ☐ No ☐

Are employees instructed to avoid using other employees' phones, desks, offices, other work tools and equipment, or dishes and utensils when possible? If necessary, do you clean and disinfect them before and after use?

Yes ☐ No ☐

Have workplace policies been implemented to allow for teleworking for all employees who are able to conduct their duties from home?

Yes ☐ No ☐

Have employees been educated about how to practice social distancing at work by avoiding large gatherings and maintaining distance (approximately 6 feet or 2 meters) from others when possible?

Yes ☐ No ☐

Have employees been instructed on alternative methods for site visits/meetings (e.g., video conferencing)?

Yes ☐ No ☐

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For in-person meetings that must take place, are you keeping a visitor log and attendance in case contact tracing is necessary at a later date?

Yes ☐ No ☐

Have employees been trained to restrict visitors and non-essential personnel, except when necessary (i.e., meetings, site visits)?

Yes ☐ No ☐

Are signs posted at entrances to the facility advising that no visitors may enter the facility?

Yes ☐ No ☐

If visitors are necessary, are potential visitors screened prior to entry for symptoms of COVID-19, restricting entry for those with symptoms?

Yes ☐ No ☐

If visitors are necessary, have they been instructed to wear a face covering/mask while in the building and to restrict their access to as few locations as possible?

Yes ☐ No ☐

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Have you trained employees on the use of cloth/other face masks and other personal protective equipment (PPE)? Training should include when to use PPE, what PPE is necessary, how to properly wear, use, and remove PPE, and how to properly dispose of PPE.

Yes ☐ No ☐

Is employee education about best practices to prevent the spread of COVID-19 in the workplace ongoing, with frequent reminders communicated to all employees?

Yes ☐ No ☐

Are communications regarding COVID-19 being provided to employees in their preferred language?

Yes ☐ No ☐

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2 - Maintain Healthy Business Operations

Have you identified a workplace coordinator who will be responsible for COVID-19 issues and their impact at the workplace, who can also act as point of contact with the local health department?

Yes ☐ No ☐

Name, phone number and email of workplace coordinator: _____

Are you frequently monitoring public health communications about COVID-19 recommendations for the workplace and ensuring that all workers have access to and understand that information?

Yes ☐ No ☐

Have you implemented flexible sick leave and non-punitive, supportive policies and practices?

Yes ☐ No ☐

Have you assessed your essential functions and the reliance that others and the community have on your services or products?

Yes ☐ No ☐

- Have you changed your business practices to maintain critical operations?

Yes ☐ No ☐

- Have you identified alternate supply chain for critical goods and services?

Yes ☐ No ☐

- Have you talked with companies that provide your business with contract or temporary employees about the importance of sick employees staying home?

Yes ☐ No ☐

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A. Determine how you will operate if absenteeism spikes

Do you have a plan to monitor and respond to absenteeism at the workplace?

Yes ☐ No ☐

Can you implement plans to continue your essential business functions in case you experience higher than usual absenteeism?

Yes ☐ No ☐

Have you cross-trained employees to perform essential functions so the workplace can operate even if key employees are absent?

Yes ☐ No ☐

B. Establish policies and practices for social distancing

Have you implemented flexible worksites (e.g., telework)?

Yes ☐ No ☐

Have you implemented flexible work hours (e.g., staggered shifts)?

Yes ☐ No ☐

Have you increased physical space between employees at the worksite, including break areas and lunchrooms? Social distancing should be 6 feet or greater.

Yes ☐ No ☐

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Have you increased physical space between employees and customers (e.g., clear plastic barriers, partitions)?

Yes ☐ No ☐

Have you implemented flexible meeting and travel options (e.g., postpone non-essential meetings or events)?

Yes ☐ No ☐

Can any of your services be delivered remotely (e.g., phone, video, or web)?

Yes ☐ No ☐

Can incoming deliveries be left at loading docks or other locations that do not require person-to-person exposures?

Yes ☐ No ☐

C. Increase availability of face masks and personal protective equipment

Are you able to issue facemasks or approve employee supplied cloth face coverings in the event of shortages?

Yes ☐ No ☐

Have you assessed the current supply of face masks/cloth face covers and other critical materials (e.g., hand sanitizer, EPA-registered disinfectants, tissues)?

Yes ☐ No ☐

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Are all employees being instructed to wear a face mask/cloth face cover at all times while in the workplace?

Yes ☐ No ☐

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3 - Maintain A Healthy Work Environment

Have you considered improving the engineering controls using the building ventilation system? This could include increasing ventilation rates, increasing percentage of outdoor air that circulates into the system, or opening windows and doors.

Yes ☐ No ☐

A. Strengthen respiratory etiquette and hand hygiene for employees, customers, and worksite visitors

Do you provide tissues and no-touch disposal receptacles/trash cans throughout the facility?

Yes ☐ No ☐

Do you provide soap and water in the workplace?

Yes ☐ No ☐

Do you provide alcohol-based hand sanitizer?

Yes ☐ No ☐

Have you placed hand sanitizers in multiple locations to encourage hand hygiene?

Yes ☐ No ☐

Have you hung posters throughout the facility that encourage hand hygiene?

Yes ☐ No ☐

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Have you discouraged handshaking and encouraged use of other noncontact methods of greeting?

Yes ☐ No ☐

B. Perform routine environmental cleaning and disinfection

Does your workplace routinely clean and disinfect all frequently touched surfaces in the workplace, such as workstations, keyboards, telephones, handrails, and doorknobs, per CDC guidance?

Yes ☐ No ☐

Do you provide disposable wipes so that commonly used surfaces (e.g., doorknobs, keyboards, remote controls, desks, other work tools and equipment) can be wiped down by employees before each use?

Yes ☐ No ☐

Has your workplace made plans to enhance cleaning and disinfection after persons suspected/confirmed to have COVID-19 have been in the facility?

Yes ☐ No ☐

Are you using EPA-registered disinfectants with an emerging viral pathogens claim against COVID-19 for frequent cleaning of high-touch surfaces and shared equipment, with sufficient contact time?

Yes ☐ No ☐

Have you ensured workers performing cleaning are trained on the facility's standard operating procedures and on the hazards of the cleaning chemicals used in the workplace in accordance with OSHA's Hazard Communication standard?

Yes ☐ No ☐

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C. Advise employees before / after traveling to take additional preparations

Have you advised employees to check themselves for symptoms of COVID-19 (i.e., fever, cough, or shortness of breath) before starting travel and after returning from travel and notify their supervisor and stay home if they are sick?

Yes ☐ No ☐

Have you carefully considered whether work-related travel is necessary?

Yes ☐ No ☐

D. Take care when attending meetings and gatherings

When videoconferencing or teleconferencing is not possible, can you hold meetings in open, well-ventilated spaces?

Yes ☐ No ☐

Has facility implemented engineering controls for close contact where it cannot be eliminated and when practical (e.g., using face shields, plastic or plexiglass dividers, increasing ventilation)?

Yes ☐ No ☐

COVID-19 Prevention Program

An Addendum to the Injury and Illness Program: *In accordance with TITLE 8, DIVISION 1, CHAPTER 4, Subchapter 7. General Industry Safety Orders Section 3205, COVID-19 Prevention*

COVID-19 Hazard Alert
Support Services – Bunker
supportservices@scoe.net
Phone: (916) 228-2696 Fax: (916) 228-2728

Instructions: This form is to be used by district employees to report potential COVID-19 hazards or unsafe conditions.

Person reporting: _____
Name

Department Name: _____

Phone Number: _____

Date of report: _____

Location of Hazard: _____
School Site/Department/Other

Description of COVID-19 hazard (attach pictures if available):

Description of hazard or process creating the hazard: _____

Recommendations to Correct the Condition or Hazard:

Follow-up: _____

COVID-19 Prevention Program

An Addendum to the Injury and Illness Program: *In accordance with TITLE 8, DIVISION 1, CHAPTER 4, Subchapter 7. General Industry Safety Orders Section 3205, COVID-19 Prevention*

SCOE COVID-19 Workplace Investigation Form

Name of person completing the assessment: _____

Organization: _____

Date: _____

Workplace Information

Facility Name: _____

Facility Location: _____

Number of employees: _____

COVID-19 Case Information

Employee Name: _____

Employee Job Title: _____

COVID-19 test offered:Yes ☐ No ☐

Name(s) of staff involved in investigation: _____

Date and time the employee was last at facility: _____

Date of positive test and/or diagnosis: _____

Date and time of first symptom(s): _____

COVID-19 Prevention Program

An Addendum to the Injury and Illness Program: *In accordance with TITLE 8, DIVISION 1, CHAPTER 4, Subchapter 7. General Industry Safety Orders Section 3205, COVID-19 Prevention*

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

Results of the evaluation of the COVID-19 case and all locations at the workplace that may have been visited by the COVID-19 case during the high-risk exposure period, and who may have been exposed (attach additional information):

COVID-19 Prevention Program

An Addendum to the Injury and Illness Program: *In accordance with TITLE 8, DIVISION 1, CHAPTER 4, Subchapter 7. General Industry Safety Orders Section 3205, COVID-19 Prevention*

Notification

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:

.....Yes ☐ No ☐

Date notice given:

Name of employees that were notified:

.....Attach list if more than fifteen employees (15)

Date notice given:

Name of other individuals that were notified:

.....Attach list if more than eight non-employees (8)

COVID-19 Prevention Program

An Addendum to the Injury and Illness Program: *In accordance with TITLE 8, DIVISION 1, CHAPTER 4, Subchapter 7. General Industry Safety Orders Section 3205, COVID-19 Prevention*

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 the local health department notified?Yes ☐ No ☐

Date of notification: _____