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This COVID-19 Prevention Program (CPP) is designed to control exposure to the SARS-CoV-2 virus that may occur in our workplace.

**Model COVID-19 Prevention Program (CPP)**

With some exceptions, all employers and places of employment are required to establish and implement an effective written COVID-19 Prevention Program (CPP) pursuant to the Emergency Temporary Standards in place for COVID-19 (California Code of Regulations (CCR), Title 8, section 3205(c)). Cal/OSHA has developed this model program to assist employers with creating their own unique CPP tailored to their workplace.

Employers are not required to use this program. Instead, they may create their own program or use another CPP template. Employers can also create a written CPP by incorporating elements of this program into their existing Injury and Illness Prevention Program (IIPP). Cal/OSHA encourages employers to engage with employees in the design, implementation, and evolution of their CPP.

Using this model alone does not ensure compliance with the emergency temporary standard. To use this model program effectively, the person(s) responsible for implementing the CPP should carefully review:

- All of the elements that may be required in the following CCR, Title 8 sections:
  - 3205, COVID-19 Prevention
  - 3205.1, Multiple COVID-19 Infection and COVID-19 Outbreaks
  - 3205.2, Major COVID-19 Outbreaks
  - 3205.3, Prevention in Employer-Provided Housing
  - 3205.4, COVID-19 Prevention in Employer-Provided Transportation
  - The four Additional Considerations provided at the end of this program to see if they are applicable to your workplace.
- Additional guidance and resources are available at [www.dir.ca.gov/dosh/coronavirus/](http://www.dir.ca.gov/dosh/coronavirus/)
COVID-19 Prevention Program (CPP) for Operation Progress LA

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

Authority and Responsibility

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

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

Identification and Evaluation of COVID-19 Hazards

We implement the following in our workplace:

- Conduct workplace-specific evaluations to identify COVID-19 hazards in our program spaces, personnel offices, and other areas where employees work. Directors shall evaluate hazards in the areas directly under their control. Appendix A: Identification of COVID-19 Hazards form may be used to evaluate the workplace.
- 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.
- How can employees protect themselves and others from getting COVID-19?
  - Get vaccinated. It is the best way to protect against COVID-19.
  - Operation Progress is requiring all employees get fully vaccinated prior to returning to work. “Fully vaccinated” means Operation Progress has documented that the person received, at least 14 days prior, either the second dose in a two-dose COVID-19 vaccine series or a single-dose COVID-19 vaccine. Vaccines must be FDA approved; have an emergency use authorization from the FDA; or, for persons fully vaccinated outside the United States, be listed for emergency use by the World Health Organization (WHO).
  - Wear a face covering that fits and filters well. Required inside the office unless actively
eating or alone in a closed office with door closed. “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. A face covering has no visible holes or openings, and must cover the nose and mouth. A face covering does not include a scarf, ski mask, balaclava, bandana, turtleneck, collar, or single layer of fabric.

- Maintain physical distance, at a minimum of 6-feet when indoors.
- Improve air flow. Open windows and doors, use air purification systems, avoid indoor spaces with poor air flow.
- Maximize use of outdoor spaces especially when eating/drinking.
- Wash hands and/or use hand sanitizer often.
- Stay home when you have COVID symptoms. “COVID-19 symptoms” means one of the following: (1) fever of 100.4 degrees Fahrenheit or higher or chills; (2) cough; (3) shortness of breath or difficulty breathing; (4) fatigue; (5) muscle or body aches; (6) headache; (7) new loss of taste or smell; (8) sore throat; (9) congestion or runny nose; (10) nausea or vomiting; or (11) diarrhea, unless a licensed health care professional determines the person’s symptoms were caused by a known condition other than COVID-19.
- Any employee who has symptoms, regardless of vaccination status, should stay home or go home if in the office or at an offsite work location.

<table>
<thead>
<tr>
<th>Vaccination Status</th>
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</thead>
<tbody>
<tr>
<td>Fully Vaccinated</td>
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<tr>
<td>Monitor for 14 days after last contact</td>
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</table>

**Covid Symptoms**

“COVID-19 symptoms” means one of the following: (1) fever of 100.4 degrees Fahrenheit or higher or chills; (2) cough; (3) shortness of breath or difficulty breathing; (4) fatigue; (5) muscle or body aches; (6) headache; (7) new loss of taste or smell; (8) sore throat; (9) congestion or runny nose; (10) nausea or vomiting; or (11) diarrhea, unless a licensed health care professional determines the person’s symptoms were caused by a known condition other than COVID-19.
**COVID-19 Test**

“COVID-19 test” means a viral test for SARS-CoV-2 that is both: (1) Approved by the United States Food and Drug Administration (“FDA”) or has an Emergency Use Authorization (“EUA”) 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 EUA as applicable.

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<tr>
<th>Quaranine</th>
<th>None – if asymptomatic since last contact with the infected person</th>
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</table>

| Return to Office | No impact | Minimum 10 Day quarantine from last contact; certain conditions may reduce to 7 days |

- Review applicable orders and general and industry-specific guidance from the State of California, Cal/OSHA, and the local health department related to COVID-19 hazards and prevention.
- Evaluate existing COVID-19 prevention controls in our workplace and the need for different or additional controls.
- Conduct periodic inspections using the [Appendix B: COVID-19 Inspections](#) form to identify and evaluate unhealthy conditions, work practices, and work procedures related to COVID-19 and to ensure compliance with our COVID-19 policies and procedures.

**Employee participation**

Employees and their authorized employees’ representatives are encouraged to participate in the identification and evaluation of COVID-19 hazards by:

- Reviewing safety concerns or hazards with their supervisors
- Reporting safety concerns to their supervisor. Concerns may also be sent to the
Employee screening
Employees conduct a self-screening and respond to those with COVID-19 symptoms by:

• Employees conduct a self-screening prior to reporting to work:
  o Do you have any of these symptoms?
    ▪ Fever or chills
    ▪ Cough
    ▪ Shortness of breath or difficulty breathing
    ▪ Fatigue
    ▪ Muscle or body aches
    ▪ Headache
    ▪ Recent loss of taste or smell
    ▪ Sore throat
    ▪ Congestion
    ▪ Nausea or vomiting
    ▪ Diarrhea
  o If you are not fully vaccinated, have you been in close contact with anyone with COVID19 in the past 14 days? Close contact is being within 6 feet for 15 minutes or more over a 24-hour period with a person; or having direct contact with fluids from a person with COVID-19 with or without wearing a mask (i.e., being coughed or sneezed on).
  o Have you had a positive COVID-19 test for active virus in the past 10 days, or are you awaiting results of a COVID-19 test?
  o Within the past 14 days, has a public health or medical professional told you to self-monitor, self-isolate, or self-quarantine because of concerns about COVID-19 infection?
• If yes to any of the questions above, employee is not to report to work. Report responses to Executive Director1 and notify immediate supervisor.
• Symptomatic employees are instructed to stay home and to contact their medical provider if they have symptoms of cough, fever, shortness of breath, or had close sustained contact with a known positive case of COVID-19.
• Employees who test positive for COVID-19 should contact their immediate supervisor. They will assist with return-to-work guidance.

Correction of COVID-19 Hazards
COVID-19 hazards are treated like other workplace injuries or illness. Directors have primary

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1 Leave options available by law, or if any work from home options will be discussed, if job duties allow
responsibility for ensuring safe working conditions and correcting hazards. In the event of a workplace acquire infections, directors will submit the necessary reports, including the Employee’s First Report (EFR).

Unsafe or unhealthy work conditions, practices or procedures may be documented using the Appendix B: COVID-19 Inspections form. Directors shall correct hazards in a timely manner based on the severity of the hazards and shall follow up to ensure corrective actions have been taken. Contact the Executive Director for assistance.

Control of COVID-19 Hazards

**Face Coverings**
Operation Progress provides clean, undamaged face coverings and ensures they are properly worn by employees — vaccinated or not vaccinated — when they are indoors or in vehicles, and where required by orders from the California Department of Public Health (CDPH).

Operation Progress requires all visitors, regardless of vaccination status to bring and wear masks when they are indoors. Make masks available for those who arrive without them.

Employees, regardless of vaccination status, are required to wear masks when working indoors and in shared vehicles. Masks need not be worn indoors if the employee is alone in a room or actively eating or drinking at a seated or stationary location. Public Health recommends that all employees who are eating or drinking indoors be spaced at least 6 feet from other persons.

Upon request, employers are required to provide employees who are not fully vaccinated against COVID-19 with the correct-size respirator along with basic instructions on how to use the respirator. Respirators must be replaced if they get damaged, deformed, dirty, or difficult to breathe through.

Employees who work in a setting where they are in close contact with people who may not be fully vaccinated should be encouraged to wear a higher level of protection, such as “double-masking” (wearing a cloth mask OVER a surgical mask) or a respirator. This is particularly important if the employee is not fully vaccinated against COVID-19 and is working in an indoor setting, in a crowded outdoor setting, or in a shared vehicle.

Consider also offering staff eye protection (e.g., a face shield) in addition to a respirator if they are not fully vaccinated and have significant close contact with others who may be unvaccinated.

See the Los Angeles County Health Officer Order and the Cal/OSHA Emergency Temporary Standards page for more information about mask requirements. Please note that the directives in the LA County Health Officer Order must be followed when they are more stringent than the Cal/OSHA ETS.

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

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

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

To help ensure compliance, we are requiring all not-fully vaccinated employees to be tested weekly on Mondays and show proof of a negative test.

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: Covid-19 Inspections where relevant), 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. We also determine the feasibility of using portable High Efficiency Particulate Air (HEPA) filtration units, or other air cleaning systems to improve ventilation, in a manner that does not increase the risk of Coronavirus transitioning. Our building is unique in its ventilation and engineering controls.

**Cleaning and Disinfecting**

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

- The building’s Facilities Services is responsible for daily cleaning of public areas and restrooms in the buildings, including common-touch surfaces such as elevator buttons, doorknobs, drinking fountains, etc.
- Directors are responsible for routine cleaning of areas and equipment they maintain. All individuals are encouraged to clean their personal workspace surfaces and shared equipment daily, or after use.

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

- If a COVID-19 case has been in the workplace during their high-risk exposure period (the two days prior to symptom onset or a positive COVID-19 test), then the areas, material, and equipment used by the individual will be disinfected unless the areas, material, or equipment can be isolated from use for 24 hours.
- Disinfection will be performed by either the Director or the building’s custodial services.
- Employees who perform the disinfection shall be provided, and wear, appropriate PPE as determined by the Safety Data Sheet (SDS) for the selected disinfectant. Employees shall read and follow the printed label directions for the selected disinfectant.

Hand Hygiene

To implement effective hand sanitizing procedures, we:

- Encourage and allow time for employees to wash hands with liquid soap and warm water for at least 20 seconds at hand sinks available in restrooms, break rooms, labs, and other areas where sinks are present and stocked with supplies.
- Encourage the use of hand sanitizers after washing hands, or as a substitute in the absence of available sinks.
- The use of hand sanitizers containing methyl alcohol is prohibited.

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

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

Upon request, we provide properly fitted N95 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.
Employees shall use respirators in compliance with Cal/OSHA regulations, Title 8, Section 5144(c)(2) which describes voluntary use. Such respirators shall not create a hazard for the user. The user shall be medically able to wear the respirator, and shall ensure the respirator is cleaned, stored, and maintained so that its use does not present a health hazard to the user.

Voluntary users will be provided with information contained in Appendix D to Section 5144 of the regulations, which describes voluntary use conditions listed here:

Respirators are an effective method of protection against designated hazards when properly selected and worn. Respirator use is encouraged even when exposures are below the exposure limit, to provide an additional level of comfort and protection for workers. However, if a respirator is used improperly or not kept clean, the respirator itself can become a hazard to the worker. Sometimes, workers may wear respirators to avoid exposures to hazards, even if the amount of hazardous substance does not exceed the limits set by OSHA standards. If your employer provides respirators for your voluntary use, or if you provide your own respirator, you need to take certain precautions to be sure that the respirator itself does not present a hazard.

You should do the following:

1. Read and heed all instructions provided by the manufacturer on use, maintenance, cleaning and care, and warnings regarding the respirator’s limitations.

2. Choose respirators certified for use to protect against the contaminant of concern. NIOSH, the National Institute for Occupational Safety and Health of the U.S. Department of Health and Human Services, certifies respirators. A label or statement of certification should appear on the respirator or respirator packaging. It will tell you what the respirator is designed for and how much it will protect you.

3. Do not wear your respirator into atmospheres containing contaminants for which your respirator is not designated to protect against. For example, a respirator designed to filter dust particles will not protect you against gases, vapors or very small solid particles of fumes or smoke.

4. Keep track of your respirator so that you do not mistakenly use someone else's respirator

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

**Testing of symptomatic employees**

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

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

We also ensure the following is implemented:

- Employees that had a close contact are offered COVID-19 testing at no cost during their working hours, excluding:
  - Employees who were fully vaccinated before the close contact and do not have symptoms.
  - COVID-19 cases who were allowed to return to work per our return-to-work criteria and have remained free of symptoms for 90 days after the initial onset of symptoms, or for cases whenever developed symptoms, for 90 days after the first positive test.
- The information on benefits described in Training and Instruction, and Exclusion of COVID-19 Cases, below, will be provided to employees.
- Written notice within 1 day of your knowledge of a COVID-19 case that people at the worksite may have been exposed to COVID-19. This notice will be provided to all employees (and their authorized representative), independent contractors and other employers at the worksite during the high-risk exposure period. These notifications must meet the requirements of T8CCR section 3205(c)(3)(B) and Labor Code section 6409.6(a)(4); (a)(2); and (c), and in a form readily understandable by employees and can be anticipated to be received by the employee.

System for Communicating

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

- Employees should report COVID-19 symptoms to their supervisor, including possible close contacts in the two days before symptom onset.
- Employees should report COVID-19 hazards to their supervisor.
- Employees can report symptoms, possible close contacts and hazards without fear of reprisal.
- Employees with medical or other conditions that put them at increased risk of severe COVID-19 illness can request accommodations via their supervisor.
- Employees have access to free COVID-19 testing when testing is required, or in the event of a COVID-19 outbreak.
- The COVID-19 hazards to which employees (including other employers and individuals in contact with our workplace) may be exposed, what is being done to control those hazards, and our COVID-19 policies and procedures. Employee confidentiality will be
Training and Instruction

We provide effective employee training and instruction that includes:

- Our COVID-19 policies and procedures to protect employees from COVID-19 hazards, and how to participate in the identification and evaluation of COVID-19 hazards.
- Information regarding COVID-19-related benefits (including mandated sick and vaccination leave) to which the employee may be entitled under applicable federal, state, or local laws.
- The fact that:
  - COVID-19 is an infectious disease that can be spread through the air.
  - COVID-19 may be transmitted when a person touches a contaminated object and then touchestheir 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.

- COVID-19 training will be required of every employee before returning to work. The Executive Director will provide this training and will maintain the training roster. Appendix D: COVID-19 Training Roster will be used to document this training.

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

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

- Ensuring that COVID-19 cases are excluded from the workplace until our return-to-work requirements are met.
- Excluding employees that had a close contact from the workplace until our return-to-work criteria have been met, with the following exceptions:
  - Employees who were fully vaccinated before the close contact and who do not develop COVID-19 symptoms.
  - COVID-19 cases who returned to work per our return-to-work criteria and have remained free of COVID-19 symptoms, for 90 days after the initial onset of COVID-19 symptoms, or for COVID-19 cases who never developed COVID-19 symptoms, for 90 days after the first positive test.
- For employees excluded from work, continuing, and maintaining employees’ earnings, wages, seniority, and all other employees’ rights and benefits. This will be accomplished by:
  - 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 Los Angeles County 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
COVID-19 cases with symptoms will not return to work until all the following have occurred:
  ○ At least 24 hours have passed since a fever of 100.4 °F. or higher has resolved without the use of fever-reducing medications, and
  ○ COVID-19 symptoms have improved, and
  ○ At least 10 days have passed since COVID-19 symptoms first appeared.

COVID-19 cases who tested positive but never developed symptoms will not return to work until a minimum of 10 days have passed since the date of specimen collection of their first positive COVID-19 test.

A negative COVID-19 test will not be required for an employee to return to work once the requirements for “cases with symptoms” or “cases who tested positive but never developed symptoms” (above) have been met.

Persons who had a close contact may return to work as follows:
  ○ Close contact but never developed symptoms: when 10 days have passed since the last known close contact.
  ○ Close contact with symptoms: when the “cases with symptoms” criteria (above) have been met, unless the following are true:
    ● The person tested negative for COVID-19 using a polymerase chain reaction (PCR) COVID-19 test with specimen taken after the onset of symptoms; and
    ● At least 10 days have passed since the last known close contact, and
    ● The person has been symptom-free for at least 24 hours, without using fever-reducing medications.
• If an order to isolate, quarantine, or exclude an employee is issued by a local or state health official, the employee will not return to work until the period of isolation or quarantine is completed or the order is lifted (Reference section 3205(c)(10)(E) and (F) for additional guidance.)

This COVID-19 Prevention Program is formally approved by Executive Director, Cristina Cuellar, on the date signed below:

________________________  __________________________
Cristina Cuellar, Executive Director  Date

August 25, 2021
Appendix A: Identification of COVID-19 Hazards

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

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

Person conducting the evaluation: [enter name(s)]

Date: [enter date]

Name(s) of employee and authorized employee representative that participated: [enter name(s)]

<table>
<thead>
<tr>
<th>Interaction, area, activity, work task, process, equipment and material that potentially exposes employees to COVID-19 hazards</th>
<th>Places and times</th>
<th>Potential for COVID-19 exposures and employees affected, including members of the public and employees of other employers</th>
<th>Existing and/or additional COVID-19 prevention controls</th>
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Appendix B: COVID-19 Inspections

(This form is only intended to get you started. Review the information available at www.dir.ca.gov/dosh/coronavirus/ for additional guidance on what to regularly inspect for, including issues that may be more pertinent to your particular type of workplace. You will need to modify the form accordingly.)

**Date:** [enter date]  
**Name of person conducting the inspection:** [enter names]  
**Work location evaluated:** [enter information]

<table>
<thead>
<tr>
<th>Exposure Controls</th>
<th>Status</th>
<th>Person Assigned toCorrect</th>
<th>Date Corrected</th>
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<tbody>
<tr>
<td><strong>Engineering</strong></td>
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<tr>
<td>Ventilation* (amount of fresh air and filtration maximized)</td>
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<tr>
<td>Additional room air filtration*</td>
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<tr>
<td>[Add any additional controls your workplace is using]</td>
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<tr>
<td><strong>Administrative</strong></td>
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<tr>
<td>Surface cleaning and disinfection (frequently enough and adequate supplies)</td>
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<td>Hand washing facilities (adequate numbers and supplies)</td>
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<tr>
<td>Disinfecting and handsanitizing solutions being used according to manufacturer instructions</td>
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<tr>
<td>[Add any additional controls your workplace is using]</td>
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<td><strong>PPE</strong> (not shared, available and being worn)</td>
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<td>Face coverings (cleaned sufficiently often)</td>
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<td>Gloves</td>
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<tr>
<td>Face shields/goggles</td>
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<td>Respiratory protection</td>
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<td>[Add any additional controls your workplace is using]</td>
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*Identify and evaluate how to maximize ventilation with outdoor air; the highest level of filtration efficiency compatible with the existing ventilation system; and whether the use of portable or mounted HEPA filtration units, or other air cleaning systems, would reduce the risk of COVID-19 transmission. Review applicable orders and guidance from the State of California and local health departments related to COVID-19 hazards and prevention have been reviewed, including the CDPH Interim Guidance for Ventilation, Filtrations, and Air Quality in Indoor Environments and information specific to your industry, location, and operations. We maximize the quantity of outside air provided to the extent feasible, except when the United States Environmental Protection Agency (EPA) Air Quality Index is greater than 100 for any pollutant or if opening windows or maximizing outdoor air by other means would cause a hazard to employees, for instance from excessive heat or cold.
Appendix C: Investigating COVID-19 Cases
All personal identifying information of COVID-19 cases or persons with COVID-19 symptoms, and any employee required medical records will be kept confidential unless disclosure is required or permitted by law. Un-redacted information on COVID-19 cases will be provided to the local health department, CDPH, Cal/OSHA, the National Institute for Occupational Safety and Health (NIOSH) immediately upon request, and when required by law.

Date: [enter date COVID-19 case – suspected/confirmed - became known to the employer]
Name of person conducting the investigation: [enter name]
Name of COVID-19 case (employee or non-employee*) and contact information: [enter information]
Occupation (if non-employee*, why they were in the workplace): [enter information]

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

Names of employees/representatives involved in the investigation: [enter information]
Date investigation was initiated: [enter information]
Locations where the COVID-19 case was present in the workplace during the high-risk exposure period, and activities being performed: [enter information]
Date and time the COVID-19 case was last present and excluded from workplace: [enter information]
Date of the positive or negative test and/or diagnosis: [enter information]
Date the case first had one or more COVID-19 symptoms, if any: [enter information]
Information received regarding COVID-19 test results and onset of symptoms (attach documentation): [enter information]

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

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

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

<table>
<thead>
<tr>
<th>Names of employees that were notified:</th>
<th>Names of their authorized representatives:</th>
<th>Date</th>
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Independent contractors and other employers present at the workplace during the high-risk exposure period.

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<th>Names of individuals that were notified:</th>
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What were the workplace conditions that could have contributed to the risk of COVID-19 exposure?

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

Was local health department notified? Date?
Appendix D: COVID-19 Training Roster

Training rosters are maintained by the Executive Director.

**Date:** [enter date]

**Person that conducted the training:** [enter name(s)]

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<th>Employee Name</th>
<th>Signature</th>
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## Appendix E: Documentation of Employee COVID-19 Vaccination Status - CONFIDENTIAL

<table>
<thead>
<tr>
<th>Employee Name</th>
<th>Fully or Partially Vaccinated(^1)</th>
<th>Method of Documentation(^2)</th>
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\(^1\)Update, accordingly and maintain as confidential medical record

\(^2\)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 need to be added to your CPP if three or more employee COVID-19 cases within an exposed group visited the workplace during their high-risk exposure period at any time during a 14-day period. Reference section 3205.1 for details.]

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

COVID-19 testing

- We provide COVID-19 testing at no cost to all employees, during paid time, in our exposed group except for:
  - Employees who were not present during the relevant 14-day period.
  - Employees who were fully vaccinated before the multiple infections or outbreak and who do not have symptoms.
  - COVID-19 cases who did not develop symptoms after returning to work pursuant to our return-to-work criteria, no testing is required for 90 days after the initial onset of symptoms or, for COVID-19 cases who never developed symptoms, 90 days after the first positive test.

- COVID-19 testing consists of the following:
  - All employees in our exposed group are immediately tested and then again one week later. Negative COVID-19 test results of employees with COVID-19 exposure will not impact the duration of any quarantine, isolation, or exclusion period required by, or orders issued by, the local health department.
  - After the first two COVID-19 tests, we continue to provide COVID-19 testing once a week of employees in the exposed group who remain at the workplace, or more frequently if recommended by the local health department, until there are no new COVID-19 cases detected in our workplace for a 14-day period.
  - We provide additional testing when deemed necessary by Cal/OSHA.

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

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

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

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

The investigation and review is documented and includes:

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

- **Updating the review:**
  - Every thirty days that the outbreak continues.
  - In response to new information or to new or previously unrecognized COVID-19 hazards.
  - When otherwise necessary.

- **Implementing changes to reduce the transmission of COVID-19 based on the investigation and review.** We consider:
  - Moving indoor tasks outdoors or having them performed remotely.
  - Increasing outdoor air supply when work is done indoors.
  - Improving air filtration.
  - Increasing physical distancing as much as feasible.
  - Requiring respiratory protection in compliance with section 5144.

**Buildings or structures with mechanical ventilation**

We will filter recirculated air with Minimum Efficiency Reporting Value (MERV) 13 or higher efficiency filters, if compatible with the ventilation system. If MERV-13 or higher filters are not compatible, we will use filters with the highest compatible filtering efficiency. We will also evaluate whether portable or mounted High Efficiency Particulate Air (HEPA) filtration units or other air cleaning systems would reduce the risk of transmission and, if so, implement their use to the degree feasible.
Additional Consideration #2

Major COVID-19 Outbreaks

[This addendum will need to be added to your CPP should 20 or more employee COVID-19 cases in an exposed group visit your workplace during the high-risk exposure period within a 30-day period. Reference section 3205.2 for details.]

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.
• Use remote work arrangements, density reductions, staggered arrivals/departures/work/break times as feasible to support physical distancing.
• 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.