

COVID-19 Infectious Disease Preparedness and Response Plan Amendment No. 3 (Effective June 17, 2021)



INTRODUCTION

June 17, 2021

A) Purpose/Intent

Pursuant to the authority under the revised Emergency Temporary Standards adopted by Cal/OSHA effective June 17, 2021 ("Cal/OSHA ETS"), the City hereby adopts the various components as required under such applicable regulations (see 8 CCR § 3205).

Accordingly, this Preparedness and Prevention Plan ("Plan" or "PRP") is designed to control employees' exposures to the SARS-CoV-2 virus (COVID-19) that may occur in our workplace.

B) Responsibilities

The City Manager has overall authority and responsibility for implementing the provisions of this PRP in our workplace. In addition, all managers and supervisors are responsible for implementing and maintaining the PRP in their assigned work areas and for ensuring employees receive answers to questions about the program.

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

C) Identification and Evaluation of COVID-19 Hazards

The City will implement the following in the workplace:

- Conduct workplace-specific evaluations using the applicable Identification of COVID-19 Hazards form.
- Document the vaccination status of our employees, which is maintained as a confidential medical record.
- Evaluate employees' potential workplace exposures to all persons at, or who may enter, our workplace.
- Develop applicable procedures to respond effectively and immediately to individuals at the workplace who are a COVID-19 case to prevent or reduce the risk of transmission in the workplace.

- Review applicable orders and general and industry-specific guidance from the State of California, Cal/ OSHA, and the County health department related to COVID-19 hazards and prevention.¹
- Evaluate existing COVID-19 prevention controls in our workplace and the need for different or additional controls.
- Conduct periodic inspections using the applicable COVID-19 Inspections Form as needed to identify and evaluate unhealthy conditions, work practices, and work procedures related to COVID-19 and to ensure compliance with our COVID-19 policies and procedures.

D) Employee Participation

Employees and their authorized employees' representatives are encouraged to participate in the identification and evaluation of COVID-19 hazards. Please contact Human Resources to assist with our organizational in identifying and evaluating any hazards.

E) Summary of Changes Effective June 17, 2021

Pursuant to the Cal/OSHA ETS effective June 17, 2021, below is a summary of the changes that apply to all employees:

- Fully vaccinated employees without symptoms do not need to be tested or quarantined after close contacts with COVID-19 cases unless they have symptoms.
- No face covering requirements outdoors (except during outbreaks), regardless of vaccination status.
- Fully vaccinated employees are not required to wear face coverings indoors, but must document their vaccination status. There are some settings where CDPH requires face coverings regardless of vaccination status. In outbreaks, all employees must wear face coverings indoors and outdoors when six-foot physical distancing cannot be maintained, regardless of vaccination status.
- Unvaccinated employees may request approved respirators for voluntary use when working indoors or in a vehicle with others, upon request.
- The City will not retaliate against employees for wearing face coverings.
- No physical distancing or barrier requirements regardless of employee vaccination status with the following exceptions:
 - The City will evaluate whether it is necessary to implement physical distancing and barriers during an outbreak (3 or more cases in an exposed group of employees).
 - The City will implement physical distancing and barriers during a major outbreak (20 or more cases in an exposed group of employees).

F) Definition of "Fully Vaccinated" Employee

For the purposes of this Plan, "fully vaccinated" means the City has documented that the employee received, at least 14 days prior, either the second dose in a two-dose COVID-19 vaccine

¹ See <https://covid19.ca.gov/safely-reopening/>.

series or a single-dose COVID-19 vaccine.² Employees provide proof of vaccination (vaccine card, image of vaccine card or health care document showing vaccination status) of which the City will maintain a copy on file with Human Resources.

G) Definition of “Close Contact”

A “close contact” is defined as less than 6 feet for at least 15 minutes over a 24-hour period per current CDPH guidelines.³

H) Anti-Retaliation Provision

City policies and state law protect employees from retaliation or discrimination for reporting a positive COVID-19 test or order to quarantine or isolate. Employees should contact Human Resources with any questions or concerns. Employees who believe they have experienced retaliation or discrimination may also file a complaint with the Division of Labor Standards Enforcement.

² 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).

³ See <https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Guidance-on-Isolation-and-Quarantine-for-COVID-19-Contact-Tracing.aspx>.

SECTION 1 – COVID-19 CONTROL

A) Employee Screening

Employees will be screened against COVID-19 symptoms by way of self-screening according to current the California Department of Public Health (“CDPH”) guidelines. The current list of symptoms include the following:

- Cough
- Shortness of breath or difficulty breathing
- Fever⁴
- Chills
- Fatigue
- Muscle or body aches
- Headache
- Sore throat
- New loss of taste or smell
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea

B) Face Coverings

The City will adhere to the current and applicable Cal/OSHA, California state and County guidelines on face coverings. Based on current guidelines, face coverings are required indoors and in vehicles for unvaccinated employees.

Acceptable 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.

The City will provide clean, undamaged face coverings and ensure they are properly worn by employees that are not fully vaccinated when they are indoors or in vehicles, and where required by orders from CDPH. Face coverings will also be provided to any employee that requests one, regardless of their vaccination status.

Employees required to wear face coverings 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.

⁴ For the purpose of this Plan, a “fever” is defined as a measured temperature 100.4°F or greater.

- 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.

Employees in certain indoor settings must wear a face covering regardless of vaccination status if required by CDPH order. As of June 15, those indoor settings where CDPH requires face coverings include public transit, K-12 educational facilities, health care and long-term care settings, correctional and detention facilities, and shelters (homeless or emergency shelters and cooling centers).

The City 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.

C) Ventilation System

For indoor locations, the City will identify and evaluate how to maximize, to the extent feasible, ventilation with outdoor air using the highest filtration efficiency compatible with our existing ventilation system, and whether the use of portable or mounted High Efficiency Particulate Air (HEPA) filtration units, or other air cleaning systems, would reduce the risk of transmission following the CDPH's Interim Guidance for Ventilation, Filtration, and Air Quality in Indoor Environments.⁵

D) Cleaning and Disinfecting

Disinfecting wipes and hand sanitizers are available to City staff at City facilities. Additionally, both public and staff areas will be cleaned at scheduled intervals, including daily maintenance of high-touch areas.

The City will follow current CDC guidelines for "Cleaning and Disinfecting Your Facility" as guidance for cleaning and disinfection measures for workplace locations (see Appendix IV-B). When appropriate, the City will use an Environmental Protection Agency (EPA)-approved disinfectant against COVID-19 and follow the label instructions for proper use (see <https://www.epa.gov/pesticide-registration/list-n-disinfectants-coronavirus-covid-19>). Many products recommend:

- Keeping surface wet with disinfectant for a period of time (see product label).
- Precautions such as wearing gloves and making sure there is adequate ventilation while using the product.
- If products on EPA List N: Disinfectants for Coronavirus (COVID-19) are not available, bleach solutions can be used if appropriate for the surface and will be effective against coronaviruses when properly diluted.

⁵ See <https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Interim-Guidance-for-Ventilation-Filtration-and-Air-Quality-in-Indoor-Environments.aspx>.

City staff should also consider the following when cleaning and disinfecting:

- Practice routine cleaning and disinfection of frequently touched surfaces. More frequent cleaning and disinfection may be required based on level of use.
- Items that employees come in regular physical contact with, such as phones, headsets, desks, keyboards, writing materials, instruments and tools should not be shared to the extent feasible. Where there must be sharing, the items will be disinfected between uses.
- Common surfaces and objects in public places, such as keypads, pens, counters, vending machines, and office machinery should be cleaned and disinfected before each use or as much as possible.
- Outdoor areas generally only require normal routine cleaning. High touch surfaces made of plastic or metal, such as grab bars, interactive exhibits, and railings should be cleaned routinely.
- Sharing of vehicles will be minimized to the extent feasible, and high-touch points (for example, steering wheel, door handles, seatbelt buckles, armrests, shifter, etc.) should be disinfected between users.

Below is a list of high touched items that should be frequently cleaned and disinfected at regular intervals:

Doorknobs or handles	Elevator buttons	Equipment
Tools	Handrails	Touch screen devices
Controls or push buttons	Bathroom surfaces	Kitchen surfaces
Steering wheels	Light switches	Desks
Counters and tables	Phones	Keyboards

E) Cleaning and Disinfecting Standards When Someone is Sick or Has a COVID-19 Diagnosis

In the event that someone who has entered the workplace is sick or has a COVID-19 diagnosis, the City will also implement the following cleaning and disinfecting standards:

- Close off areas used by the person who is sick.
- Open outside doors and windows and use fans or other engineering controls to increase air circulation in the area.
- Wait 24 hours before cleaning or disinfecting. If 24 hours is not feasible, wait as long as possible.
- Clean and disinfect the immediate workspace used by the person who is sick or diagnosed with COVID-19, such as the surfaces in their office or cubicle. If common areas such as bathrooms or shared items have already been routinely cleaned and disinfected, there is no need for additional action.
- Vacuum the space if needed, using a vacuum equipped with high-efficiency particulate air (HEPA) filter and bags, if available. Do not vacuum a room or space that has people in it. Wait until the room or space is empty to vacuum, such as at night, for common spaces, or during the day for private rooms.
- Wear disposable gloves to clean and disinfect. For soft (porous) surfaces such as carpeted floors or rugs, clean the surface with detergents or cleaners appropriate for use on these surfaces, according to the textile’s label. After cleaning, disinfect

with an appropriate disinfectant on EPA List N: Disinfectants for Coronavirus (COVID-19). Soft and porous materials, like carpet, are generally not as easy to disinfect as hard and non-porous surfaces. EPA has listed a limited number of products approved for disinfection for use on soft and porous materials on List N. Follow the disinfectant manufacturer's safety instructions (such as wearing gloves and ensuring adequate ventilation), for concentration level, application method and contact time. Allow sufficient drying time if vacuum is not intended for wet surfaces.

- While vacuuming, temporarily turn off in-room, window-mounted, or on-wall recirculation HVAC to avoid contamination of the HVAC units. Do not deactivate central HVAC systems.

If more than 7 days since the person who is sick visited or used the facility, additional cleaning and disinfection is not necessary. Continue routine cleaning and disinfection (see section above). This includes everyday practices that businesses and communities normally use to maintain a healthy environment.

Once area has been appropriately disinfected, it can be opened for use.

F) Hand Sanitizing

To implement effective hand sanitizing procedures, the City requires employees to clean their hands often by:

- Hand-washing with soap and water for at least 20 seconds, or
- Using an alcohol-based hand sanitizer (60% alcohol minimum).

G) Personal Protective Equipment (PPE)

The City will evaluate the need for PPE (such as gloves, goggles, and face shields) as required by 8 CCR § 3380, and provide and ensure use of such PPE as needed.

Upon request, the City will provide respirators for voluntary use to all employees who are not fully vaccinated and who are working indoors or in vehicles with more than one person. Respirators will be fitted for the correct size, and employees utilizing approved respirators will be trained on the proper use. Please contact Human Resources to request the voluntary use of respirators.

In addition, the City will provide and ensure use of respirators in compliance with 8 CCR § 5144 when deemed necessary by Cal/OSHA.

When applicable, the City will provide and ensure use of eye and respiratory protection when employees are exposed to procedures that may aerosolize potentially infectious material such as saliva or respiratory tract fluids.

H) Testing of Symptomatic Employees

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

I) Goals for Open Communication

The City endeavors to ensure that we have effective two-way communication with our employees that it includes the following information:

- Who employees should report COVID-19 symptoms, possible close contacts and hazards to, and how.
- That employees can report symptoms, possible close contacts and hazards without fear of reprisal.
- How employees with medical or other conditions that put them at increased risk of severe COVID-19 illness can request accommodations by contacting Human Resources.
- Access to COVID-19 testing when testing is required.
- The COVID-19 hazards employees may be exposed to, what is being done to control those hazards, and our COVID-19 policies and procedures.

SECTION 2 – COVID-19 RESPONSE

A) Investigating and Responding to COVID-19 Cases

The City has 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 documenting the investigation process in writing and maintaining a copy on file with Human Resources.

In addition, employees that had a close contact are offered COVID-19 testing at no cost during their working hours, excluding:

- Employees who were fully vaccinated before the close contact and do not have symptoms.
- COVID-19 cases who were allowed to return to work per our return-to-work criteria and have remained free of symptoms for 90 days after the initial onset of symptoms, or for cases who never developed symptoms, for 90 days after the first positive test.

Within one day of the City's knowledge of a COVID-19 case that people at the worksite may have been exposed to COVID-19, it will provide workplace notification to all applicable employees (and their authorized representative), independent contractors and other employers at the worksite during the high-risk exposure period.

B) 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, the City will limit transmission by:

- Ensuring that COVID-19 cases are excluded from the workplace until return-to-work requirements are met.
- Excluding employees that had a close contact from the workplace until 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 may include sick leave benefits, disability insurance payments, and other applicable leaves when not covered by workers' compensation.

- Providing employees at the time of exclusion with information on available benefits.

C) Return-to-Work Criteria

Employees with Tested Positive and With Symptoms

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.

Employees Who Tested Positive But Without Symptoms

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.

Employees With Close Contact

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 employees 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.

Fully Vaccinated Employees without Symptoms

Fully vaccinated employees without symptoms do not need to be tested or quarantined after close contacts with COVID-19 cases unless they have symptoms.

Compliance with Applicable Health Orders

If an order to isolate, quarantine, or exclude an employee is issued by a County 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.

D) Pay and Leave Options

Employees who are subject to quarantine and isolation guidelines may be able to work remotely with their supervisor's approval. If remote work is not available, employees may use any accrued leave or any federal, state, or local benefits as may be available, such as:⁶

- Use of accrued sick and vacation hours;
- Workers' compensation (if eligible);
- Other forms of leaves (if applicable).

All employees are encouraged to contact Human Resources to discuss potential pay, leave and benefit options as may be available under applicable laws and City policies and procedures.

⁶ See <https://www.dir.ca.gov/dlse/Comparison-COVID-19-Paid-Leave.html> and <https://www.labor.ca.gov/coronavirus2019/#chart>.

SECTION 3 – TRAINING

City employees will be provided training and instruction on the COVID-19 PRP, COVID-19 health risks, COVID-19 outbreak and job-specific safety and health practices where such exposures are present.

A) Training Contents

The City will provide effective employee training and instruction that includes:

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

B) Training Schedule

Training and instructions are provided according to the following schedule:

- For all staff when the COVID-19 PRP is initially implemented.
- For all new employees and any employees given job assignments for which training has not previously been provided.
- When new substances, processes, procedures, symptoms or equipment are introduced and present a new or changed COVID-19 hazard profile.
- For supervisors, in order to familiarize them with the safety and health hazards related to COVID-19 to which staff under their immediate direction and control may be exposed.
- For all employees on the COVID-19 hazards specific to their job assignment.
- All employees will receive periodic reminders including tailgate trainings, email alerts, postings whenever COVID-19 risks are present.

C) Training Methods

The City will communicate with employees on COVID-19 topics using methods that ensure all staff are provided relevant, understandable safety information (including translation where needed). Methods may include:

- Verbal instructions (one-on-one, group meetings, etc.).
- Written materials (e.g. electronic, policy distribution, postings, etc.).
- Workplace safety and health training, meetings, and tailgate meetings.
- Regularly scheduled safety meetings.
- Online resources and other methods.

D) Recordkeeping

Human Resources will keep COVID-19 PRP training records during the COVID-19 outbreak in accordance with the City's record retention policy.

SECTION 4 – INJURY REPORTING

A) OSHA Reporting

If a confirmed case of COVID-19 is reported, the City will determine if it meets the criteria for recordability and reportability under OSHA's recordkeeping rule. OSHA requires employers to record work-related injuries and illnesses that meet certain severity criteria on the OSHA 300 Log, as well as complete the OSHA Form 301 (or equivalent) upon the occurrence of these injuries.

OSHA has made a determination that COVID-19 should not be excluded from coverage of the rule – like the common cold or the seasonal flu – and, thus, OSHA is considering it an “illness.” However, OSHA has stated that only confirmed cases of COVID-19 should be considered an illness under the rule. Thus, if an employee simply comes to work with symptoms consistent with COVID-19 but is not a confirmed diagnosis, the recordability analysis is not necessarily triggered at that time.

For purposes of COVID-19, OSHA also requires employers to report to OSHA any work-related illness that: (1) results in a fatality, or (2) results in the in-patient hospitalization of one or more employee. “In-patient” hospitalization is defined as a formal admission to the in-patient service of a hospital or clinic for care or treatment. For purposes of OSHA injury and illness recordkeeping, the City will report cases of COVID-19 if all of the following requirements are met:

- The case is a confirmed case of COVID-19, as defined by the CDC;
- The case is work-related; and
- The case involves one or more of the recording criteria set forth in 29 CFR § 1904.7 (e.g., medical treatment, days away from work).

If an employee has a confirmed case of COVID-19, the City will conduct an assessment of any workplace exposures to determine if the case is work-related. For example, if the illness involves signs or symptoms that surface at work but result solely from a non-work-related event or exposure that occurs outside of the work environment, and an employee develops COVID-19 solely from an exposure outside of the work environment, it would not be work-related, and thus not recordable.

The City's assessment will consider the work environment itself, the type of work performed, the risk of person-to-person transmission given the work environment, and other factors such as community spread. Further, if an employee has a confirmed case of COVID-19 that is considered work-related, the City will report the case to OSHA if it results in a fatality within 30 days or an in-patient hospitalization within 24-hours of the exposure incident.

B) Cal/OSHA Reporting

To be recordable, an illness must be work-related and result in one of the following:

- Death.
- Days away from work.
- Restricted work or transfer to another job.
- Medical treatment beyond first aid.
- Loss of consciousness.
- A significant injury or illness diagnosed by a physician or other licensed health care professional.

If a work-related COVID-19 case meets one of these criteria, then it is a reportable event.⁷

In addition, California Labor Code section 6302, effective January 1, 2020, amended the definition of serious injury or illness that must be reported to Cal/OSHA to include all inpatient hospitalizations, regardless of the length of stay, unless the hospitalization is for medical observation or diagnostic testing. Therefore, COVID-19 would qualify as serious if an employee requires any hospitalization other than for observation and for testing, assuming the employee's contraction of COVID-19 was work-related.

⁷ See California Code of Regulations, title 8, Chapter 7, Subchapter 1, Article 2, Employer Records of Occupational Injury or Illness for additional details on reporting requirements.

SECTION 5 – OUTBREAK SETTINGS

A) Multiple Outbreak Setting

In the event of three (3) or more COVID-19 cases in an “exposed workplace”⁸ within a 14-day period or identified as an outbreak by a local health department, the following provisions will apply until there are no new COVID-19 cases detected in a workplace for a 14-day period.

In addition to the requirements for non-outbreak settings, the City will do the following.

COVID-19 Testing

Provide COVID-19 testing at no cost to all employees, during paid time, in an 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,

⁸ As defined under 8 CCR § 3205(b)(7), an “exposed group” means all employees at a work location, working area, or a common area at work, where an employee COVID-19 case was present at any time during the high-risk exposure period. A common area at work includes bathrooms, walkways, hallways, aisles, break or eating areas, and waiting areas.

An exposed group does not include: i) a place where persons momentarily pass through while everyone is wearing face coverings, without congregating, is not a work location, working area, or a common area at work; ii) 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; or, iii) if the COVID-19 case visited a work location, working area, or a common area at work for less than 15 minutes during the high-risk exposure 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.

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.

The City will continue to comply with the applicable elements of this Plan, as well as the following:

- 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 apply).
- Provide notice to employees in the exposed group of their right to request a respirator for voluntary use if they are not fully vaccinated.
- 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

The City 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:
 - Leave policies and practices and whether employees are discouraged from remaining home when sick.
 - 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 and 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 8 CCR § 5144.

Buildings or Structures with Mechanical Ventilation

The City 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.

B) Major Outbreak Setting

In the event of 20 or more COVID-19 cases in an “exposed workplace” within a 30-day period. The following provisions will apply until there are no new COVID-19 cases detected in a workplace for a 14-day period.

In addition to the requirements for non-outbreak settings, the City will:

- Provide employees in the exposed group with respirators for voluntary use in compliance with 8 CCR § 5144(c)(2) and determine the need for a respiratory protection program or changes to an existing respiratory protection program under 8 CCR § 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 8 CCR § 5144. When it is not feasible to maintain a distance of at least six feet, individuals are as far apart as feasible, such as physical distancing that includes: 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.
- 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.

SECTION 6 – CONFIDENTIALITY

Except for circumstances in which the City is legally required to report workplace occurrences of communicable disease, the confidentiality of all medical conditions will be maintained in accordance with applicable law and to the extent practical under the circumstances. When it is required, the number of persons who will be informed that an unnamed employee has tested positive will be kept to the minimum needed to comply with reporting requirements and to limit the potential for transmission to others.

The City reserves the right to inform other employees that an unnamed co-worker has been diagnosed with COVID-19 if the other employees might have been exposed to the disease so the employees may take measures to protect their own health. The City also reserves the right to inform contractors, vendors/suppliers or visitors that an unnamed employee has been diagnosed with COVID-19 if they might have been exposed to the disease so those individuals may take measures to protect their own health.

APPENDIX II) RESOURCES

This section of the Appendix includes the following exhibits as resources, which are current and relevant as of the time this Plan was adopted:

- A. Cal/OSHA COVID-19 Prevention Emergency Temporary Standards – What Employers Need to Know About the June 18 Standards
- B. Cal/OSHA Revised Emergency Temporary Standards effective June 17, 2021 (8 CCR § 3205)
- C. California State Public Health Officer Order of June 11, 2021
- D. California Beyond the Blueprint for Industry and Business Sectors - Effective June 15
- E. CDPH Interim guidance for Ventilation, Filtration, and Air Quality in Indoor Environments dated February 26, 2021
- F. Identification of Workplace Hazards Form
- G. COVID-19 Inspection Form

Exhibit A

COVID-19 Prevention Emergency Temporary Standards What Employers Need to Know About the June 18 Standards

June 21, 2021

On June 17, the Occupational Safety and Health Standards Board readopted the revised Cal/OSHA COVID-19 Prevention emergency temporary standards. These standards incorporate the latest CDPH guidance on face coverings and eliminate physical distancing requirements except for certain employees during outbreaks. Following the vote, Governor Gavin Newsom signed an [executive order](#) to allow the revisions to immediately take effect on June 17. The emergency standards apply to most workers in California not covered by the [Aerosol Transmissible Diseases standard](#).

Important changes to the COVID-19 Emergency Temporary Standards effective June 18 include:

- Fully vaccinated employees do not need to be offered testing or excluded from work after close contact unless they have COVID-19 symptoms.
- Fully vaccinated employees do not need to wear face coverings except for certain situations during outbreaks and in settings where CDPH requires all persons to wear them. Employers must document the vaccination status of fully vaccinated employees if they do not wear face coverings indoors.
- Employees are not required to wear face coverings when outdoors regardless of vaccination status except for certain employees during outbreaks.
- Employees are explicitly allowed to wear a face covering without fear of retaliation from employers.
- Physical distancing requirements have been eliminated except where an employer determines there is a hazard and for certain employees during major outbreaks.
- Employees who are not fully vaccinated may request respirators for voluntary use from their employers at no cost and without fear of retaliation from their employers.
- Employees who are not fully vaccinated and exhibit COVID-19 symptoms must be offered testing by their employer.
- Employer-provided housing and transportation are exempt from the regulations where all employees are fully vaccinated.
- Employers must review the Interim guidance for Ventilation, Filtration, and Air Quality in Indoor Environments.
- Employers must evaluate ventilation systems to maximize outdoor air and increase filtration efficiency, and evaluate the use of additional air cleaning systems.

Some important requirements from the November 2020 COVID-19 Emergency Temporary Standards that remain in the June 18 standards:

- Employers must establish, implement, and maintain an effective written COVID-19

(continued on next page)

Prevention Program that includes:

- Identifying and evaluating employee exposures to COVID-19 health hazards.
- Implementing effective policies and procedures to correct unsafe and unhealthy conditions.
- Allowing adequate time for handwashing and cleaning frequently touched surfaces and objects.
- Employers must provide effective training and instruction to employees on how COVID-19 is spread, infection prevention techniques, and information regarding COVID-19-related benefits that affected employees may be entitled to under applicable federal, state, or local laws.
- Employers must exclude employees who have COVID-19 symptoms and/or are not fully vaccinated and have had a close contact from the workplace and, if that close contact is work related, ensure continued wages.

Cal/OSHA has developed a [COVID-19 Model Prevention Program](#)

to assist employers with developing their own written program

When there are multiple COVID-19 infections and COVID-19 outbreaks

Employers must follow the requirements for testing and notifying public health departments of workplace outbreaks (three or more cases in an exposed workgroup in a 14-day period) and major outbreaks (20 or more cases within a 30-day period). During any outbreak, face coverings are required regardless of employee vaccination status: 1) indoors and 2) outdoors when employees are less than six feet from another person. During major outbreaks, six-foot physical distancing is required where feasible, both indoors and outdoors.

COVID-19 testing for employees who are not fully vaccinated and might have been exposed

Requires employers to offer COVID-19 testing at no cost during paid time to their employees who are not fully vaccinated and had potential exposure to COVID-19 in the workplace, and provide them with information on benefits.

Notification requirements to the local health department

Employers must contact the local health department immediately but no longer than 48 hours after learning of three or more COVID-19 cases to obtain guidance on preventing the further spread of COVID-19 within their workplace.

Recordkeeping and reporting COVID-19 cases

Employers must maintain accurate records and track all COVID-19 cases, while ensuring medical information remains confidential. These records must be made available to employees, authorized employee representatives, or as otherwise required by law, with personal identifying information removed. When a COVID-19-related serious illness or death occurs, the employer must [report](#) this immediately to the nearest Cal/OSHA enforcement district office.

This guidance document is an overview. For the full requirements, see title 8 sections [3205](#), [3205.1](#), [3205.2](#), [3205.3](#), [3205.4](#)



Exhibit B

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Subchapter 7. General Industry Safety Orders

Adopt Section 3205 to read:

§ 3205. COVID-19 Prevention.

(a) Scope.

(1) This section applies to all employees and places of employment, with the following exceptions:

(A) ~~Places of employment~~ Work locations with one employee who does not have contact with other persons.

(B) Employees working from home.

(C) Employees with occupational exposure as defined by section 5199, when covered by that section-~~5199~~.

(D) Employees teleworking from a location of the employee's choice, which is not under the control of the employer.

(2) Nothing in this section is intended to limit more protective or stringent state or local health department mandates or guidance.

(b) Definitions. The following definitions apply to this section and to sections 3205.1 through 3205.4.

(1) "Close contact" means being within six feet of a COVID-19 case for a cumulative total of 15 minutes or greater in any 24-hour period within or overlapping with the "high-risk exposure period" defined by this section. This definition applies regardless of the use of face coverings.

EXCEPTION: Employees have not had a close contact if they wore a respirator required by the employer and used in compliance with section 5144, whenever they were within six feet of the COVID-19 case during the high-risk exposure period.

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

~~(3)~~ "COVID-19 case" ~~(A) M~~ means a person who:

~~(A)~~ Has a positive "COVID-19 test" as defined in this section; or

(B) Has a positive COVID-19 diagnosis from a licensed health care provider; or

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~~(C)2-~~ Is subject to a COVID-19-related order to isolate issued by a local or state health official; or

~~(D)3-~~ Has died due to COVID-19, in the determination of a local health department or per inclusion in the COVID-19 statistics of a county.

~~(B) A person is no longer a "COVID-19 case" in this section when a licensed health care professional determines that the person does not have COVID-19, in accordance with recommendations made by the California Department of Public Health (CDPH) or the local health department pursuant to authority granted under the Health and Safety Code or Title 17, California Code of Regulations to CDPH or the local health department.~~

~~(3) "COVID-19 exposure" means being within six feet of a COVID-19 case for a cumulative total of 15 minutes or greater in any 24-hour period within or overlapping with the "high risk exposure period" defined by this section. This definition applies regardless of the use of face coverings.~~

(4) "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, or sneezing, or from 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.

(5) "COVID-19 symptoms" means fever of 100.4 degrees Fahrenheit or higher, chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, or diarrhea, unless a licensed health care professional determines the person's symptoms were caused by a known condition other than COVID-19.

(6) "COVID-19 test" means a viral test for SARS-CoV-2 that is:

(A) 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

(B) Administered in accordance with the FDA approval or the FDA Emergency Use Authorization as applicable.

~~(7) "Exposed workplace" means any work location, working area, or common area at work used or accessed by a COVID-19 case during the high-risk period, including bathrooms,~~

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~~walkways, hallways, aisles, break or eating areas, and waiting areas. The exposed workplace does not include buildings or facilities not entered by a COVID-19 case.~~

~~(A) Effective January 1, 2021, the “exposed workplace” also includes but is not limited to the “worksite” of the COVID-19 case as defined by Labor Code section 6409.6(d)(5).~~

(7) “Exposed group” means all employees at a work location, working area, or a common area at work, where an employee COVID-19 case was present at any time during the high-risk exposure period. A common area at work includes bathrooms, walkways, hallways, aisles, break or eating areas, and waiting areas. The following exceptions apply:

(A) For the purpose of determining the exposed group, a place where persons momentarily pass through while everyone is wearing face coverings, without congregating, is not a work location, working area, or a common area at work.

(B) 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.

(C) If the COVID-19 case visited a work location, working area, or a common area at work for less than 15 minutes during the high-risk exposure 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.

(8) “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 with no visible holes or openings and must, which covers the nose and mouth. A face covering does not include a scarf, ski mask, balaclava, bandana, turtleneck, collar, or single layer of fabric.

(9) “Fully vaccinated” means the employer 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).

(109) “High-risk exposure period” means the following time period:

(A) For COVID-19 cases persons who develop COVID-19 symptoms, from two days before they first develop symptoms until all of the following are true: it has been 10 days

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~~since~~ after symptoms first appeared; ~~and~~ 24 hours have passed with no fever, without the use of fever-reducing medications; ~~and~~ symptoms have improved; ~~or~~

- (B) For ~~COVID-19 cases~~ ~~persons who test positive~~ who never develop COVID-19 symptoms; ~~from two days before until ten~~ 10 days after the specimen for their first positive test for COVID-19 was collected.

(11) "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.

(12) "Worksite," for the limited purposes of COVID-19 prevention regulations only, means the building, store, facility, agricultural field, or other location where a COVID-19 case was present during the high-risk exposure period. It does not apply to buildings, floors, or other locations of the employer that a COVID-19 case did not enter.

NOTE: The term worksite is used for the purpose of notice requirements in subsections (c)(3)(B)3. and 4. only.

- (c) Written COVID-19 Prevention Program. Employers shall establish, implement, and maintain an effective, written COVID-19 Prevention Program, which may be integrated into the employer's Injury and Illness Prevention Program required by section 3203, or be maintained in a separate document. The written elements of a COVID-19 Prevention Program shall include:

(1) System for communicating. The employer shall do all of the following in a form readily understandable by employees:

(A) Ask employees to report to the employer, without fear of reprisal, COVID-19 symptoms, possible close contacts ~~COVID-19 exposures~~, and possible COVID-19 hazards at the workplace.

(B) Describe ~~procedures or policies for accommodating~~ how employees with medical or other conditions that put them at increased risk of severe COVID-19 illness can request accommodations.

(C) Provide information about access to COVID-19 testing; as described in subsection (c)(5)(I) when ~~if~~ testing is required under this section, section 3205.1, or section 3205.2, ~~the employer shall inform affected employees of the reason for the COVID-19 testing and the possible consequences of a positive test.~~

(D) In accordance with subsection (c)(3)(B)~~3~~, communicate information about COVID-19 hazards and the employer's COVID-19 policies and procedures to employees and to

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other employers, persons, and entities within or in contact with the employer's workplace.

NOTE: See subsections (c)(3)(C) and ~~(c)(3)(D)~~ for confidentiality requirements for COVID-19 cases.

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

- (A) The employer shall allow for employee and authorized employee representative participation in the identification and evaluation of COVID-19 hazards.
- (B) The employer shall develop and implement a process for screening employees for and responding to employees with COVID-19 symptoms. The employer may ask employees to evaluate their own symptoms before reporting to work. If the employer conducts screening indoors at the workplace, the employer shall ensure that face coverings are used during screening by both screeners and employees who are not fully vaccinated and, if temperatures are measured, that non-contact thermometers are used.
- (C) The employer shall 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 of COVID-19 in the workplace.
- (D) The employer shall conduct a workplace-specific identification of all interactions, areas, activities, processes, equipment, and materials that could potentially expose employees to COVID-19 hazards. Employers shall 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 in contact with one another, regardless of whether employees are performing an assigned work task or not, for instance during meetings or trainings 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-stationary work-locations.
- (E) For indoor locations, the employer shall evaluate how to maximize ~~the quantity~~ ventilation with outdoor air; ~~and whether it is possible to increase filtration~~

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~~efficiency to~~ the highest level of filtration efficiency compatible with the existing ventilation system; and whether the use of portable or mounted High Efficiency Particulate Air (HEPA) filtration units, or other air cleaning systems, would reduce the risk of COVID-19 transmission.

- (F) The employer shall review applicable orders and guidance from the State of California and the local health department related to COVID-19 hazards and prevention, ~~including~~ These orders and guidance are both information of general application, including Interim guidance for Ventilation, Filtration, and Air Quality in Indoor Environments by the California Department of Public Health (CDPH), and information specific to the employer's industry, location, and operations.
- (G) The employer shall evaluate existing COVID-19 prevention controls at the workplace and the need for different or additional controls. This includes evaluation of controls in subsections (c)(4), ~~and (c)(6), and through (c)(7)~~.
- (H) The employer shall conduct periodic inspections 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.
- (3) Investigating and responding to COVID-19 cases in the workplace.
- (A) Employers shall have an effective procedure to investigate COVID-19 cases in the workplace. This includes procedures for ~~verifying COVID-19 case status, receiving~~ seeking information from employees regarding COVID-19 cases and close contacts, COVID-19 test results, and onset of COVID-19 symptoms, and identifying and recording COVID-19 cases.
- (B) The employer shall take the following actions when there has been a COVID-19 case at the place of employment:
1. Determine the day and time 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 a close contact ~~COVID-19 exposure~~. This requires an evaluation of the activities of the COVID-19 case and all locations at the workplace

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which may have been visited by the COVID-19 case during the high-risk exposure period.

NOTE: See subsection (c)(910) for exclusion requirements for employees ~~with after a close contact~~ COVID-19 exposure.

3. Within one business day of the time the employer knew or should have known of a COVID-19 case, the employer shall give written notice Give notice of the potential COVID-19 exposure, within one business day, in a form readily understandable by employees, that people at the worksite may have been exposed to COVID-19. The notice shall be written in a way that does not reveal any personal identifying information of the COVID-19 case. Written notice may include, but is not limited to, personal service, email, or text message if it can reasonably be anticipated to be received by the employee within one business day of sending. The notice shall include the disinfection plan required by Labor Code section 6409.6(a)(4). The notice must be sent to the following:
 - a. All employees at the worksite during the high-risk exposure period ~~who may have had COVID-19 exposure and their authorized representatives.~~ If the employer should reasonably know that an employee has not received the notice, or has limited literacy in the language used in the notice, the employer shall provide verbal notice, as soon as practicable, in a language understandable by the employee.
 - b. Independent contractors and other employers at the worksite ~~present at the workplace~~ during the high-risk exposure period.
4. Within one business day of the time the employer knew or should have known of the COVID-19 case, the employer shall provide the notice required by Labor Code section 6409.6(a)(2) and (c) to the authorized representative of any employee at the worksite during the high-risk exposure period.
54. ~~Offer~~ Make COVID-19 testing available at no cost, ~~to employees during paid time, their working hours~~ to all employees of the employer who had a close contact potential COVID-19 exposure in the workplace and provide them with the

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information on benefits described in subsections (c)(5)(B) and (c)(~~910~~)(C), with the following exceptions:

- a. Employees who were fully vaccinated before the close contact and do not have COVID-19 symptoms.
- b. COVID-19 cases who returned to work pursuant to subsection 3205(c)(10)(A) or (B) 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 symptoms, for 90 days after the first positive test.

~~65.~~ 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.

(C) Personal identifying information of COVID-19 cases or persons with COVID-19 symptoms, and any employee medical records required by this section or by sections 3205.1 through 3205.4, shall be kept confidential unless disclosure is required or permitted by law. ~~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 local health department, CDPH, the Division, and the National Institute for Occupational Safety and Health (NIOSH) immediately upon request, or as and when otherwise required by law immediately upon request.~~

~~(D) The employer shall ensure that all employee medical records required by this section and sections 3205.1 through 3205.4 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 local health department, 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. Employers shall implement effective 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. This includes, but is not limited to, implementing controls and/or policies and procedures in response to the

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evaluations conducted under subsections (c)(2) and (c)(3) and implementing the controls required by subsections (c)(6) and through (c)(7).

- (5) Training and instruction. The employer shall provide effective training and instruction to employees that includes the following:
- (A) The employer's 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 under subsection (c)(2)(A).
 - (B) Information regarding COVID-19-related benefits to which the employee may be entitled under applicable federal, state, or local laws. This includes any benefits available under legally mandated sick and vaccination leave, if applicable, workers' compensation law, the federal Families First Coronavirus Response Act, Labor Code sections 248.1 and 248.5, Labor Code sections 3212.86 through 3212.88, local governmental requirements, the employer's own leave policies, and leave guaranteed by contract, and this section.
 - (C) 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 object and then touches their eyes, nose, or mouth, although that is less common; and that an infectious person may have no symptoms.
 - (D) ~~Methods of physical distancing of at least six feet and the importance of combining physical distancing with the wearing of face coverings.~~ (E) 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 must be combined with other controls, including face coverings and hand hygiene, to be effective decrease the spread of COVID-19, but are most effective when used in combination.
 - (E) The employer's policies for providing respirators, and the right of employees who are not fully vaccinated 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:
 - 1. How to properly wear the respirator provided;
 - 2. 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.

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- (F) 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.
- (G) 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.
- (H) COVID-19 symptoms, and the importance of not coming to work and obtaining a COVID-19 test if the employee has COVID-19 symptoms.
- (I) 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.
- (J) The conditions under which face coverings must be worn at the workplace and that face coverings are additionally recommended outdoors for people who are not fully vaccinated if six feet of distance between people cannot be maintained. 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) Physical distancing.

- ~~(A) All employees shall be separated from other persons by at least six feet, except where an employer can demonstrate that six feet of separation is not possible, 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.~~
- ~~(B) When it is not possible to maintain a distance of at least six feet, individuals shall be as far apart as possible.~~

(67) Face coverings.

- (A) For all employees who are not fully vaccinated, eEmployers shall provide face coverings and ensure they are worn ~~by employees over the nose and mouth when~~

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~~indoors, or in vehicles, when outdoors and less than six feet away from another person, and where~~

~~(B) Employers shall provide face coverings and ensure they are worn by employees when required by orders from the CDPH or local health department.~~

~~(C) Employers shall ensure that required face coverings are clean and undamaged, and that they are worn over the nose and mouth. Face shields are not a replacement for face coverings, although they may be worn together for additional protection.~~

~~(D) When employees are required to wear face coverings under this section or sections 3205.1 through 3205.4, the following are exceptions to the face coverings requirement apply:~~

- ~~1. When an employee is alone in a room or vehicle.~~
- ~~2. While eating and 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 possible.~~
- ~~3. Employees wearing respiratory protection respirators required by the employer and used in compliance in accordance with section 5144 or other title 8 safety orders.~~
- ~~4. 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.~~
- ~~5. Specific tasks which cannot feasibly be performed with a face covering. This exception is limited to the time period in which such tasks are actually being performed, and the unmasked employee shall be at least six feet away from all other persons unless unmasked employees are tested at least twice weekly for COVID-19.~~

~~NOTE: CDPH has issued guidance for employers that identifies examples when wearing a face covering is likely not feasible.~~

~~(E) Employees exempted from wearing face coverings due to a medical condition, mental health condition, or disability shall wear an effective non-restrictive alternative, such as a face shield with a drape on the bottom, if their condition or disability permits it.~~

~~(F) Any employee not wearing a face covering, face shield with a drape or other effective alternative, or respiratory protection, for any reason, pursuant to the exceptions in subsections (c)(6)(D)4. or 5., and not wearing a non-restrictive alternative when allowed by subsection (c)(6)(E), shall be at least six feet apart from~~

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all other persons unless the unmasked employee is either fully vaccinated or tested at least twice weekly for COVID-19 during paid time and at no cost to the employee. Employers may not use ~~COVID-19 testing~~ the provisions of subsection (c)(6)(F) as an alternative to face coverings when face coverings are otherwise required by this section.

~~(G)~~ (D) No employer shall prevent any employee from wearing a face covering when not required by this section, unless it would create a safety hazard, such as interfering with the safe operation of equipment.

(H) When face coverings are not required by this section or by sections 3205.1 through 3205.4, employers shall provide face coverings to employees upon request, regardless of vaccination status.

~~(I)~~ (E) Employers shall implement measures to communicate to non-employees the face coverings requirements on their premises.

~~(F) The employer shall develop COVID-19 policies and procedures to minimize employee exposure to COVID-19 hazards originating from any person not wearing a face covering, including a member of the public.~~

~~(78)~~ Other engineering controls, administrative controls, and personal protective equipment.

~~(A) At fixed work locations where it is not possible to maintain the physical distancing requirement at all times, the employer shall install cleanable solid partitions that effectively reduce aerosol transmission between the employee and other persons.~~

~~(AB)~~ (B) For buildings with mechanical or natural ventilation, or both, employers shall 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 letting in outdoor air by other means would cause a hazard to employees, for instance from excessive heat or cold.

~~(BC)~~ (C) Employers shall implement cleaning and disinfecting procedures, which require:

1. Identifying and regularly cleaning ~~and disinfecting~~ frequently touched surfaces and objects, such as doorknobs, elevator buttons, equipment, tools, handrails, handles, controls, phones, headsets, bathroom surfaces, and steering wheels. The employer shall inform employees and authorized employee representatives of

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cleaning and disinfection protocols, including the planned frequency and scope of ~~regular~~ cleaning and disinfection.

~~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.~~

~~23. Cleaning and disinfection of areas, material, and equipment used by a COVID-19 case during the high-risk exposure period, and disinfection if the area, material, or equipment is indoors and will be used by another employee within 24 hours of the COVID-19 case.~~

NOTE: Cleaning and disinfecting must be done in a manner that does not create a hazard to employees. See Group 2 and Group 16 of the General Industry Safety Orders for further information.

~~(C)~~ To protect employees from COVID-19 hazards, the employer shall 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.

~~(D)~~ Personal protective equipment.

1. Employers shall 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. Employers shall 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. Upon request, employers shall provide respirators for voluntary use in compliance with subsection 5144(c)(2) to all employees who are not fully vaccinated and who are working indoors or in vehicles with more than one person. Whenever an employer makes respirators for voluntary use available, under this section or sections 3205.1 through 3205.4, the employer shall encourage~~

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their use and shall ensure that employees are provided with a respirator of the correct size.

3. Employers shall provide and ensure use of respirators in ~~compliance~~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. Employers shall provide and ensure use of eye protection and respiratory protection in ~~compliance~~accordance with section 5144 when employees are exposed to procedures that may aerosolize potentially infectious material such as saliva or respiratory tract fluids.

NOTE: Examples of work covered by subsection (c)(~~7~~)(DE)4. include, but are not limited to, certain dental procedures and outpatient medical specialties not covered by section 5199.

(E) Testing of symptomatic employees. Employers shall make COVID-19 testing available at no cost to employees with COVID-19 symptoms who are not fully vaccinated, during employees' paid time.

(89) Reporting, recordkeeping, and access.

(A) The employer shall report information about COVID-19 cases and outbreaks at the workplace to the local health department whenever required by law, and shall provide any related information requested by the local health department. The employer shall report all information to the local health department as required by Labor Code section 6409.6.

~~(B) The employer shall 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.~~

~~(B)~~ The employer shall maintain records of the steps taken to implement the written COVID-19 Prevention Program in accordance with section 3203(b).

~~(C)~~ The written COVID-19 Prevention Program shall be made available at the workplace to employees, authorized employee representatives, and to representatives of the Division immediately upon request.

~~(D)~~ The employer shall keep a record of and track all COVID-19 cases with the employee's name, contact information, occupation, location where the employee worked, the date of the last day at the workplace, and the date of a positive COVID-

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19 test. ~~Medical information shall be 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.~~

~~Note: Subsection (c)(9)(E) does not alter the right of employees or their representatives to request and obtain an employer's Log of Work-Related Injuries and Illnesses (Log 300), without redaction, or to request and obtain information as otherwise allowed by law.~~

(910) Exclusion of COVID-19 cases and employees who had a close contact. The purpose of this subsection is to limit transmission of COVID-19 in the workplace.

(A) Employers shall ensure that COVID-19 cases are excluded from the workplace until the return to work requirements of subsection (c)(~~1014~~) are met.

(B) Employers shall exclude from the workplace employees who had a close contact with COVID-19 exposure from the workplace until the return to work requirements of subsection (c)(10) are met, with the following exceptions: for 14 days after the last known COVID-19 exposure to a COVID-19 case.

1. Employees who were fully vaccinated before the close contact and who do not develop COVID-19 symptoms; and

2. COVID-19 cases who returned to work pursuant to subsection (c)(10)(A) or (B) 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.

(C) For employees excluded from work under subsection (c)(~~910~~) ~~and otherwise able and available to work~~, employers shall continue and maintain an employee's earnings, wages, 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. Employers may use employer-provided employee sick leave ~~benefits~~ for this purpose to the extent permitted by law and consider benefit payments from public sources in determining how to maintain earnings, rights and benefits, where permitted by law and when not covered by workers' compensation. Wages due under this subsection are subject to existing wage payment obligations and must be paid at the employee's regular rate of pay no later than the regular pay day for the pay period(s) in which the employee is excluded. Unpaid wages owed under this subsection are subject to enforcement through procedures available in existing law. If an employer determines that one of the exceptions below applies, it shall inform the employee of the denial and the applicable exception.

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EXCEPTION 1: Subsection (c)(~~910~~)(C) does not apply where the employee received disability payments or was covered by workers' compensation and received temporary disability to any period of time during which the employee is unable to work for reasons other than protecting persons at the workplace from possible COVID-19 transmission.

EXCEPTION 2: Subsection (c)(~~910~~)(C) does not apply where the employer demonstrates that the close contact COVID-19 exposure is not work related.

(D) Subsection (c)(~~910~~) does not limit any other applicable law, employer policy, or collective bargaining agreement that provides for greater protections.

(E) At the time of exclusion, the employer shall provide the employee the information on benefits described in subsections (c)(5)(B) and (c)(~~910~~)(C).

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

~~(1011)~~ Return to work criteria.

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

1. At least 24 hours have passed since a fever of 100.4 degrees Fahrenheit or higher has resolved without the use of fever-reducing medications; and
2. COVID-19 symptoms have improved; and
3. At least 10 days have passed since COVID-19 symptoms first appeared.

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

(C) Once a COVID-19 case has met the requirements of subsection (c)(10)(A) or (B), as applicable, A negative COVID-19 test shall not be required for an employee to return to work.

(D) Persons who had a close contact may return to work as follows:

1. Persons who had a close contact but never developed any COVID-19 symptoms may return to work when 10 days have passed since the last known close contact.

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2. Persons who had a close contact and developed any COVID-19 symptom cannot return to work until the requirements of subsection (c)(10)(A) have been met, unless all of the following are true:

- a. 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
- b. At least 10 days have passed since the last known close contact; and
- c. The person has been symptom-free for at least 24 hours, without using fever-reducing medications.

3. During critical staffing shortages, when there are not enough staff to provide safe patient care, essential critical infrastructure workers in the following categories may return after Day 7 from the date of last exposure if they have received a negative PCR COVID-19 test result from a specimen collected after Day 5:

- a. Health care workers who did not develop COVID-19 symptoms;
- b. Emergency response workers who did not develop COVID-19 symptoms; and
- c. Social service workers who did not develop COVID-19 symptoms and who work face to face with clients in child welfare or assisted living.

~~(E)~~ If an order to isolate, ~~or~~ quarantine, or exclude 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 in accordance with the return to work periods in subsection (c)(10)(A), (c)(10)(B), or (c)(10)(D), as applicable ~~10 days from the time the order to isolate was effective, or 14 days from the time the order to quarantine was effective.~~

~~(F)~~ If ~~there are no violations of local or state health officer orders for isolation, or quarantine, or exclusion would result,~~ the Division may, upon request, allow employees to return to work on the basis that the removal of an employee would create undue risk to a community's health and safety. In such cases, the employer shall develop, implement, and maintain effective control measures to prevent transmission in the workplace including providing isolation for the employee at the workplace and, if isolation is not ~~feasible~~ possible, the use of ~~respirators~~ respiratory protection in the workplace.

Note: Authority cited: Section 142.3, Labor Code. Reference: Sections 142.3, ~~and~~ 144.6, and 6409.6, Labor Code.

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Add new section 3205.1 to read:

§ 3205.1. Multiple COVID-19 Infections and COVID-19 Outbreaks.

(a) Scope.

(1) This section applies to a workplace of employment covered by section 3205 if it has been identified by a local health department as the location of a COVID-19 outbreak or when there are three or more employee COVID-19 cases within an exposed group, as defined by section 3205(b), visited the workplace during their high-risk exposure period at any time during in an exposed workplace within a 14-day period.

(2) This section shall apply until there are no new COVID-19 cases detected in the exposed group a workplace for a 14-day period.

(b) COVID-19 testing.

(1) The employer shall ~~make~~provide COVID-19 testing available at no cost to its employees within the exposed group, during employees' paid time, except:

(A) Employees who were not present at the workplace during to all employees at the exposed workplace except for employees who were not present during the period of an outbreak identified by a local health department or the relevant 14-day period(s) under subsection (a), as applicable. COVID-19 testing shall be provided at no cost to employees during employees' working hours.

(B) Employees who were fully vaccinated before section 3205.1 became applicable to the workplace and who do not have COVID-19 symptoms.

(C) For COVID-19 cases who did not develop COVID-19 symptoms after returning to work pursuant to subsections 3205(c)(10)(A) or (B), no testing is required for 90 days after the initial onset of COVID-19 symptoms or, for COVID-19 cases who never developed symptoms, 90 days after the first positive test.

(2) COVID-19 testing shall consist of the following:

(A) Immediately upon being covered by this section, testing shall be made available to all employees in the exposed group workplace shall be tested and then ~~tested~~ again one week later. Negative COVID-19 test results of employees with COVID-19 exposure

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shall not impact the duration of any quarantine, isolation, or exclusion period required by, or orders issued by, the local health department.

- (B) After the first two COVID-19 tests required by subsection (b)(2)(A), employers shall ~~provide~~ make COVID-19 testing available once a week at no cost, during paid time, continuous COVID-19 testing of employees to all employees in the exposed group who remain at the workplace at least once per week, or more frequently if recommended by the local health department, until this section no longer applies pursuant to subsection (a)(2).
- ~~(c)(C)~~ Employers shall ~~provide~~ make additional testing available at no cost to employees, during employees' paid time, when deemed necessary by the Division through the Issuance of Order to Take Special Action, in accordance with title 8, section 332.3.
- ~~(c) Exclusion of COVID-19 cases. Employers shall ensure COVID-19 cases and employees who had COVID-19 exposure are excluded from the workplace in accordance with subsections 3205(c)(10) and (c)(11) and local health officer orders if applicable.~~
- ~~(d) Investigation of workplace COVID-19 illness. The employer shall immediately investigate and determine possible workplace related factors that contributed to the COVID-19 outbreak in accordance with subsection 3205(c)(3). The employer shall continue to comply with all applicable provisions of section 3205, and shall also do the following:~~
- (1) Employees in the exposed group shall wear face coverings when indoors, or when outdoors and less than six feet from another person, unless one of the exceptions in subsection 3205(c)(6)(D) applies.
- (2) Employers shall give notice to employees in the exposed group of their right to request a respirator for voluntary use under subsection 3205(c)(7)(D)2., if they are not fully vaccinated.
- (3) Employers shall evaluate whether to implement physical distancing of at least six feet between persons or, where six feet of physical distancing is not feasible, the use of cleanable solid partitions of sufficient size to reduce COVID-19 transmission.
- (e) COVID-19 Investigation, review and hazard correction. ~~In addition to the requirements of subsection 3205(c)(2) and 3205(c)(4),~~ the employer shall 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:

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- (1) Investigation of new or unabated COVID-19 hazards including the employer's leave policies and practices and whether employees are discouraged from remaining home when sick; the employer's COVID-19 testing policies; insufficient outdoor air; insufficient air filtration; and lack of physical distancing.
 - (2) The review shall be updated every ~~thirty~~³⁰ days that ~~the outbreak~~this section continues to apply, in response to new information or to new or previously unrecognized COVID-19 hazards, or when otherwise necessary.
 - (3) The employer shall implement changes to reduce the transmission of COVID-19 based on the investigation and review required by subsections (e)(1) and (e)(2). The employer shall 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~~possible, requiring respiratory protection in compliance with section 5144, and other applicable controls.
- (f) In buildings or structures with mechanical ventilation, employers shall 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 with the ventilation system, employers shall use filters with the highest compatible filtering efficiency. Employers shall 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, shall implement their use to the degree feasible.
- ~~(f) Notifications to the local health department.~~
- ~~(1) The employer shall contact the local health department immediately but no longer than 48 hours after the employer 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) The employer shall provide to the local health department the total number of COVID-19 cases and for each COVID-19 case, the name, contact information, occupation, workplace location, 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 local health department. The employer shall~~

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~~continue to give notice to the local health department of any subsequent COVID-19 cases at the workplace.~~

~~(3) Effective January 1, 2021, the employer shall provide all information to the local health department required by Labor Code section 6409.6.~~

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

COMPARISON DRAFT

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Add new section 3205.2 to read:

§ 3205.2. Major COVID-19 Outbreaks.

(a) Scope.

(1) This section applies to any ~~workplace of employment~~ covered by section 3205 ~~when there are~~ if 20 or more employee COVID-19 cases in an exposed group, as defined by section 3205(b), visited the workplace during their high-risk exposure period within a 30-day period.

(2) This section shall apply until there ~~are fewer than three~~ ~~are no new~~ COVID-19 cases detected in the exposed group ~~a workplace~~ for a 14-day period.

(b) Employers shall continue to comply with section 3205.1, except that the COVID-19 testing described in section 3205.1(b) shall be made available to all employees in the exposed group, regardless of vaccination status, COVID-19 testing. Employers shall provide twice a week COVID-19 testing, or more frequently if recommended by the local health department, to all employees present at the exposed workplace during the relevant 30-day period(s) and who remain at the workplace. COVID-19 testing shall be provided at no cost to employees during employees' working hours.

(c) ~~Exclusion of COVID-19 cases. Employers shall ensure COVID-19 cases and employees with COVID-19 exposure are excluded from the workplace in accordance with subsections 3205(c)(10) and (c)(11) and any relevant local health department orders.~~

(d) ~~Investigation of workplace COVID-19 illnesses. The employer shall comply with the requirements of subsection 3205(c)(3).~~

(ce) COVID-19 hazard correction. In addition to the requirements of sections 3205 and 3205.1, to the requirements of subsection 3205(c)(4), the employer shall take the following actions:

(1) ~~In buildings or structures with mechanical ventilation, employers shall 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 with the ventilation system, employers shall use filters with the highest compatible filtering efficiency. Employers shall 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 shall implement their use to the degree feasible.~~

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- (12) The employer shall provide a respirator for voluntary use in compliance with subsection 5144(c)(2) to employees in the exposed group and shall determine the need for a respiratory protection program or changes to an existing respiratory protection program under section 5144 to address COVID-19 hazards.
- (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 an employer can demonstrate that 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.
- (3) At work stations where an employee in the exposed group is assigned to work for an extended period of time, such as cash registers, desks, and production line stations, and where the physical distancing requirement in subsection (c)(2) is not maintained at all times, the employer shall install cleanable solid partitions that effectively reduce transmission between the employee and other persons.
- (43) The employer shall evaluate whether to halt some or all operations at the workplace until COVID-19 hazards have been corrected.
- (54) Any other control measures deemed necessary by the Division through the Issuance of Order to Take Special Action, in accordance with title 8 section 332.3.
- ~~(f) Notifications to the local health department. Employers shall comply with the requirements of section 3205.1(f).~~

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

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Add new section 3205.3 to read:

§ 3205.3. COVID-19 Prevention in Employer-Provided Housing.

- (a) Scope. This section applies to employer-provided housing. Employer-provided housing is any place or area of land, any portion of any housing accommodation, or property upon which a housing accommodation is located, consisting of: living quarters, dwelling, boardinghouse, tent, bunkhouse, maintenance-of-way car, mobile home, manufactured home, recreational vehicle, travel trailer, or other housing accommodations. Employer-provided housing includes a “labor camp” as that term is used in title 8 of the California Code of Regulations or other regulations or codes. The employer-provided housing may be maintained in one or more buildings or one or more sites, including hotels and motels, and the premises upon which they are situated, or the area set aside and provided for parking of mobile homes or camping. Employer-provided housing is housing that is arranged for or provided by an employer, other person, or entity to workers, and in some cases to workers and persons in their households, in connection with the workers' employment, whether or not rent or fees are paid or collected.

The following exceptions apply:

- (1) This section does not apply to housing provided for the purpose of emergency response, including firefighting, rescue, and evacuation, and support activities directly aiding response such as utilities, communications, and medical operations, if:
- (A) The employer is a government entity; or
 - (B) The housing is provided temporarily by a private employer and is necessary to conduct the emergency response operations.
- (2) Subsections (c), (d), (e), (f), and (h) do not apply to ~~occupants-residents~~ who maintained a household together prior to residing in employer-provided housing, such as family members, when no other persons outside the household are present.
- (3) This section does not apply to employees with occupational exposure as defined by section 5199, when covered by that section.

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- (4) This section does not apply to employer-provided housing used exclusively to house COVID-19 cases or where a housing unit houses one employee.
- (5) This section does not apply to housing in which all residents are fully vaccinated.
- (b) Assignment of housing units. To the extent feasible, employers shall reduce exposure to COVID-19 hazards by assigning employee residents to distinct groups and ensuring that each group remains separate from other such groups during transportation and work. Employers shall ensure that shared housing unit assignments are prioritized in the following order:
- (1) Residents who usually maintain a household together outside of work, such as family members, shall be housed in the same housing unit without other persons.
 - (2) Residents who work in the same crew or work together at the same ~~worksite~~ workplace shall be housed in the same housing unit without other persons.
 - (3) Employees who do not usually maintain a common household, work crew, or ~~worksite~~ workplace shall be housed in the same housing unit only when no other housing alternatives are feasible ~~possible~~.
- (c) ~~Ventilation. Physical distancing and controls.~~ Employers shall: (1) ~~Ensure the premises are of sufficient size and layout to permit at least six feet of physical distancing between residents in housing units, common areas, and other areas of the premises.~~ (2) ~~Ensure beds are spaced at least six feet apart in all directions and positioned to maximize the distance between sleepers' heads. For beds positioned next to each other, i.e. side by side, the beds shall be arranged so that the head of one bed is next to the foot of the next bed. For beds positioned across from each other, i.e. end to end, the beds shall be arranged so that the foot of one bed is closest to the foot of the next bed. Bunk beds shall not be used.~~ (3) In housing units, employers shall maximize the quantity and supply of outdoor air and increase filtration efficiency to the highest level compatible with the existing ventilation system. If there is not a Minimum Efficiency Reporting Value (MERV) 13 or higher filter in use, portable or mounted High Efficiency Particulate Air (HEPA) filtration units shall be used, to the extent feasible, in all sleeping areas in which there are two or more residents who are not fully vaccinated.

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- (d) Face coverings. Employers shall provide face coverings to all residents and provide information to residents on when they should be used in accordance with state or local health officer orders or guidance.
- (e) Cleaning and disinfecting.
- (1) Employers shall ensure that housing units, kitchens, bathrooms, and common areas are effectively cleaned ~~and disinfected at least once a day~~ to prevent the spread of COVID-19. Housing units, kitchens, bathrooms, and indoor common areas shall be cleaned and disinfected after a COVID-19 case was present during the high-risk exposure period, if another resident will be there within 24 hours of the COVID-19 case. Cleaning and disinfecting shall be done in a manner that protects the privacy of residents.
- (2) Employers shall ~~instruct residents ensure not to share~~ that unwashed dishes, drinking glasses, cups, eating utensils, and similar items ~~are not shared~~.
- (f) Screening. The employer shall encourage residents to report COVID-19 symptoms to the employer.
- (g) COVID-19 testing. The employer shall establish, implement, and maintain effective policies and procedures for COVID-19 testing of ~~occupants-residents~~ who had a close contact COVID-19 exposure, who have or COVID-19 symptoms, or as recommended by the local health department. These policies and procedures shall be communicated to the residents.
- (h) ~~Isolation of COVID-19 cases and close contacts~~ persons with COVID-19 exposure.
- (1) Employers shall effectively ~~quarantine/isolate COVID-19 exposed~~ residents who have had a close contact from all other occupants-residents. Effective ~~quarantine-isolation~~ shall include providing ~~COVID-19 exposed~~ residents who had a close contact with a private bathroom, and sleeping area, and cooking and eating facility. The following residents are exempt from this requirement:
- (A) Fully vaccinated residents who do not have COVID-19 symptoms; and
- (B) COVID-19 cases who have met the requirements of subsection 3205(c)(10)(A) or (B) and have remained free of COVID-19 symptoms, for 90 days after the

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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.

- (2) Employers shall effectively isolate COVID-19 cases from all ~~occupants~~ residents who are not COVID-19 cases. Effective isolation shall include housing COVID-19 cases only with other COVID-19 cases, and providing COVID-19 case ~~occupants~~ residents with a sleeping area, and bathroom, and cooking and eating facility that is not shared by non-COVID-19 case ~~occupants~~ residents.
- (3) Personal identifying information regarding COVID-19 cases and persons with COVID-19 symptoms shall be kept confidential in accordance with subsections 3205(c)(3)(C) and ~~3205(c)(3)(D)~~.
- (4) Employers shall end isolation in accordance with subsections 3205(c)(~~910~~) and (c)(~~1011~~) and any applicable local or state health officer orders.

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

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Add new section 3205.4 to read:

§ 3205.4. COVID-19 Prevention in Employer-Provided Transportation ~~to and from Work.~~

(a) Scope. This section applies to employer-provided motor vehicle transportation ~~to and from work~~, which is any transportation of an employee, during the course and scope of employment, including transportation to and from different workplaces, jobsites, delivery sites, buildings, stores, facilities, and agricultural fields, provided, arranged for, or secured by an employer ~~including ride-share vans or shuttle vehicles, car-pools, and private charter buses~~, regardless of the travel distance or duration involved. ~~Subsections (b) through (g) apply to employer-provided transportation.~~ The following exceptions apply:

- (1) This section does not apply if the driver and all passengers are from the same household outside of work, such as family members, or if the driver is alone in the vehicle.
- (2) This section does not apply to employer-provided transportation when necessary for emergency response, including firefighting, rescue, and evacuation, and support activities directly aiding response such as utilities, communications, and medical operations.
- (3) This section does not apply to employees with occupational exposure as defined by section 5199, when covered by that section.
- (4) This section does not apply to vehicles in which all employees are fully vaccinated.
- (5) This section does not apply to public transportation.

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

- (1) Employees residing in the same housing unit shall be transported in the same vehicle.

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- (2) Employees working in the same crew or ~~worksite~~workplace shall be transported in the same vehicle.
- (3) Employees who do not share the same household, work crew or ~~worksite~~workplace shall be transported in the same vehicle only when no other transportation alternatives are feasible ~~possible~~.
- (c) ~~Physical distancing and f~~Face coverings and respirators. Employers shall ensure that:
- (1) ~~Physical distancing and f~~Face covering requirements of subsection 3205(c)(6) and (e)(7), if applicable, are followed for employees waiting for transportation.
- (2) ~~The vehicle operator and any passengers are separated by at least three feet in all directions during the operation of the vehicle, regardless of the vehicle's normal capacity.~~(3) The vehicle operator and any passengers All employees who are not fully vaccinated are provided with and wear a face covering, which must be worn unless an exception under in the vehicle as required by subsection 3205(c)(6)(7)(D) applies.
- (3) Upon request, employers shall provide respirators for voluntary use in compliance with subsection 5144(c)(2) to all employees in the vehicle who are not fully vaccinated.
- (d) Screening. Employers shall develop, implement, and maintain effective procedures for screening and excluding drivers and riders with COVID-19 symptoms prior to boarding shared transportation.
- (e) Cleaning and disinfecting. Employers shall ensure that:
- (1) All high-contact surfaces (door handles, seatbelt buckles, armrests, etc.) used by passengers are cleaned ~~and disinfected to prevent the spread of COVID-19 before each trip~~ and must be cleaned and disinfected if used by a COVID-19 case during the high-risk exposure period, when the surface will be used by another employee within 24 hours of the COVID-19 case.
- (2) All high-contact surfaces used by drivers, such as the steering wheel, armrests, seatbelt buckles, door handles and shifter, shall be cleaned ~~and disinfected to prevent the spread of COVID-19 between different drivers~~ and are disinfected after

**STANDARDS PRESENTATION
TO
CALIFORNIA OCCUPATIONAL SAFETY AND HEALTH STANDARDS BOARD**

TITLE 8, DIVISION 1, CHAPTER 4

use by a COVID-19 case during the high-risk exposure period, if the surface will be used by another employee within 24 hours of the COVID-19 case.

- (3) Employers shall provide sanitizing materials and ensure they are kept in adequate supply.
- (f) Ventilation. Employers shall ensure that vehicle windows are kept open, and the ventilation system set to maximize outdoor air and not set to recirculate air. Windows do not have to be kept open if one or more of the following conditions exist:
- (1) The vehicle has functioning air conditioning in use and excessive outdoor heat would create a hazard to employees ~~the outside temperature is greater than 90 degrees Fahrenheit.~~
- (2) The vehicle has functioning heating in use and excessive outdoor cold would create a hazard to employees ~~the outside temperature is less than 60 degrees Fahrenheit.~~
- (3) Protection is needed from weather conditions, such as rain or snow.
- (4) The vehicle has a cabin air filter in use and the U.S. EPA Air Quality Index for any pollutant is greater than 100.
- (g) Hand hygiene. Employers shall provide hand sanitizer in each vehicle and ensure that all drivers and riders sanitize their hands before entering and exiting the vehicle. Hand sanitizers with methyl alcohol are prohibited.
- (h) This section shall take precedence when in conflict with section 3205.

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

Exhibit C



State of California—Health and Human
Services Agency
**California Department of
Public Health**



June 11, 2021

TO: All Californians

SUBJECT: State Public Health Officer Order of June 11, 2021

State Public Health Officer Order of June 11, 2021

At this point in the COVID-19 pandemic, California is prepared to enter a new phase. We have made significant progress in vaccinating individuals and reducing community transmission thanks to the steps taken by Californians.

The COVID-19 vaccines are effective in preventing infection, disease, and spread. Unvaccinated persons are more likely to get infected and spread the virus which is transmitted through the air and concentrates indoors.

We must remain vigilant against variants of the disease especially given high levels of transmission in other parts of the world and due to the possibility of vaccine escape. For these reasons, COVID-19 remains a concern to public health and, in order to prevent its spread, limited and temporary public health requirements remain necessary at this time.

I, as State Public Health Officer of the State of California, order:

1. All individuals must follow the requirements in the Guidance for the Use of Face Coverings issued by the California Department of Public Health. I will continue to monitor the scientific evidence and epidemiological data and will amend this guidance as needed by the evolving public health conditions and recommendations issued by the federal Centers for Disease Control & Prevention (CDC) and other public health authorities.
2. All individuals must follow the requirements for Mega Events in the Beyond the Blueprint for Industries and Business Sectors issued by the California Department of Public Health. I will review the need for this guidance by no later than September 1, 2021, to determine whether it remains necessary, and I will continue to monitor the scientific evidence and epidemiological data and will amend this guidance as needed by the evolving public health conditions and recommendations issued by CDC and other public health authorities.

3. All individuals must continue to follow the requirements in the current COVID-19 Public Health Guidance for K-12 Schools in California, the current COVID-19 Public Health Guidance for Child Care Programs and Providers, and the portions of the current K-12 Schools guidance that have been made explicitly applicable to day camps and other supervised youth activities. I will continue to monitor the scientific evidence and epidemiological data and will amend this guidance as needed by the evolving public health conditions and recommendations issued by the CDC and other public health authorities.
4. The California Department of Public Health will continue to offer public health recommendations and guidance related to COVID-19. However, aside from the mandatory guidance referenced in paragraphs 1, 2 and 3, the other public health guidance related to COVID-19, issued by the California Department of Public Health, will not be mandatory. Instead, they will represent the Department's best recommendations for preventing the spread of COVID-19 based on the scientific evidence and epidemiological data. I strongly encourage Californians to follow such guidance to keep themselves, their families, and their communities healthy.
5. This Order supersedes the August 28, 2020, State Public Health Officer Order, the July 13, 2020, State Public Health Officer Order, the May 7, 2020, State Public Health Officer Order, and the March 19, 2020, State Public Health Officer Order.
6. This Order goes into effect on June 15, 2021, at 12:01 a.m.
7. This Order is issued pursuant to Health and Safety Code sections 120125, 120140, 120175, 120195 and 131080 and other applicable law.



Tomás J. Aragón, M.D., Dr.P.H.

Director & State Public Health Officer

California Department of Public Health

California Department of Public Health
PO Box, 997377, MS 0500, Sacramento, CA 95899-7377
Department Website (cdph.ca.gov)



Exhibit D



TOMÁS J. ARAGÓN, M.D., Dr.P.H.
State Public Health Officer & Director

State of California—Health and Human
Services Agency
**California Department of
Public Health**



GAVIN NEWSOM
Governor

May 21, 2021

TO: All Californians

SUBJECT: Beyond the Blueprint for Industry and Business Sectors - Effective June 15

Related Materials:

Beyond the Blueprint Q&A | What Will California Look Like After June 15? Flyer

When California fully reopens the economy, the state will move beyond the Blueprint for a Safer Economy. Beginning June 15, all sectors listed in the current Blueprint Activities and Business Tiers Chart may return to usual operations (with the limited exceptions noted below for Mega Events) based on the following general public health recommendations:

	Restrictions Applying to Indoor & Outdoor Settings
Vaccine Verification / Negative Testing	Required for Indoor mega events Recommended for Outdoor mega events
Capacity Limitations	No restrictions
Physical Distancing	No restrictions for attendees, customers and guests
Masking	Follow current CDPH Guidance for Face Coverings
Travelers	Follow CDC recommendations and CDPH Travel Advisory

Employers are subject to the Cal/OSHA COVID-19 Prevention Emergency Temporary Standards (ETS), if applicable to them.

Limited Exceptions for Mega Events:

Mega Events are characterized by large crowds greater than 5,000 (indoors) and 10,000 (outdoors) attendees. Mega Events may have either assigned or unassigned seating, and may be either general admission or gated, ticketed and permitted events.

Mega Events are considered higher risk for COVID transmission because:

- Participants and attendees are spending extensive periods of time physically close to large numbers of people they don't usually interact with.
 - The frequency and total duration of close contact between attendees is increased, thereby increasing the risk that respiratory particles will be transmitted between attendees and participants.
 - They draw from beyond the nearby community and will often draw attendees and participants from other states and countries who may be infected with more infectious COVID variants.
 - Effective contact tracing may be difficult given the number of potential uncontrolled mixing between groups and attendees and the nature of the events.
- **For Indoor Mega Events (example: conventions/conferences/expos/sporting events and concerts):**
 - In addition to the general public health recommendations:
 - Verification of fully vaccinated status** or pre-entry negative test* result is required of all attendees.
 - Information will be prominently placed on all communications, including the reservation and ticketing systems, to ensure guests are aware of testing and vaccination requirements (including acceptable modes of verification).
 - Attendees must follow CDPH Guidance for Face Coverings.
 - **For Outdoor Mega Events (example: music or food festivals/car shows/large endurance events and marathons/parades/sporting events and concerts):**
 - In addition to the general public health recommendations:
 - Verification of fully vaccinated status or pre-entry negative test result is strongly recommended for all attendees. Attendees who do not verify vaccination status should be asked to wear face coverings.
 - Attendees must follow CDPH Guidance for Face Coverings.
 - Information will be prominently placed on all communications, including the reservation and ticketing systems, to ensure guests are aware that the State strongly recommends that they be fully vaccinated, obtain a negative COVID-19 test prior to attending the event, or wear a face covering.
 - Venues are required to make available masks for all attendees.
 - **Additional recommendations for sponsors of Mega Events:**
 - Encourage everyone to get vaccinated when eligible.
 - Facilitate increased ventilation of indoor spaces (i.e., open all windows and doors to increase natural air flow), following current CDPH and CalOSHA guidance.

- Encourage everyone to sign up for CA Notify as an added layer of protection for themselves and the community to receive alerts when they have been in close contact with someone who tests positive for COVID-19.
- Convey the risk of attending large crowded events where the vaccine status of others in attendance may be unknown to the individuals.
- Convey the risk of attending large crowded events for populations that may not currently be eligible for vaccination, or may be immunocompromised and whose vaccine protection may be incomplete.
- Encourage all venues along any parade or event route to provide outdoor spaces for eating/drinking/congregating to reduce the risk of transmission in indoor settings.

The requirements and recommendations for negative testings / vaccine verification will be in place effective **June 15, 2021 through October 1, 2021**. The state will assess conditions by September 1, 2021, to determine whether updated requirements or recommendations are needed beyond October 1, 2021.

CDPH will continue to provide updated guidance for youth, healthcare and high-risk congregate settings.

* Pre-entry negative testing

1. Definition: Testing must be conducted within 72 hours before event start time (both PCR and antigen are acceptable). Results of the test must be available prior to entry into the event or venue.
2. Verification: The following are acceptable as proof of a negative COVID-19 test result: printed document (from the test provider or laboratory) OR an email or text message displayed on a phone from the test provider or laboratory. The information should include person's name, type of test performed, and negative test result (date of test must be within prior 72 hours). Businesses and venue operators may also utilize self-attestation at point of registration, during ticket purchase or on the day of the event prior to entry into the venue.

** Fully vaccinated

1. Definition: See current CDPH Guidance for Fully Vaccinated Persons for definitions, acceptable vaccines, and updates on additional vaccines as they are approved.
2. Verification: The following are acceptable as proof of full vaccination: Vaccination card (which includes name of person vaccinated, type of vaccine provided and date last dose administered) OR a photo of a vaccination card as a separate document OR a photo of the attendee's vaccine card stored on a phone or electronic device OR documentation of vaccination from a healthcare provider. Businesses and venue operators may also utilize self-attestation at point of registration, during ticket purchase or on the day of the event prior to entry into the venue.

Originally Published on May 21, 2021

California Department of Public Health
PO Box, 997377, MS 0500, Sacramento, CA 95899-7377
Department Website (cdph.ca.gov)



Exhibit E



State of California—Health and Human
Services Agency
**California Department of
Public Health**



February 26, 2021

TO: All Californians

SUBJECT: Interim guidance for Ventilation, Filtration, and Air Quality in Indoor Environments



This Guidance is intended to be used for buildings for which the state or local health department is permitting business, assembly, or other occupancy or use to occur indoors.

NOTE: On November 30, 2020, the California Division of Occupational Safety and Health (Cal/OSHA) implemented a mandatory emergency temporary standard (ETS) to prevent employee exposure to COVID-19 in California workplaces not covered by the Cal/OSHA Aerosol Transmissible Diseases standard. Employers must become familiar with and implement all employee protection requirements covered in the ETS. Please see Section 9 of this document identifying the specific provisions of the ETS that pertain to ventilation.

The following guidance supplements the Cal/OSHA ETS by recommending practical steps building operators can take to promote better ventilation, filtration, and air quality in indoor environments for the purpose of reducing the spread of COVID-19. This interim guidance may change as scientific knowledge, experience, community transmission, and other conditions change. Other useful information on building ventilation and related issues is available from the Centers for Disease Control and Prevention (CDC) and Section 10 of this document, Resources.

The recommendations described below come with a range of initial costs and ongoing operating costs, which may affect decisions about which interventions to implement. Always consult with building engineering or maintenance staff prior to making changes to a mechanical ventilation system.

The following protocols are based on experience and principles that have a wide application. This guidance does not supersede any other mandatory requirements. Workplaces must continue to meet the requirements of the Cal/OSHA ETS and all other local and state directives regarding COVID-19 including, but not limited to, implementing engineering and other controls to reduce worker exposures, wearing face coverings, maintaining physical distancing, washing hands, using sanitizers, etc.

The guidance is intended for use by non-healthcare organizations, including many types of businesses, companies, offices, restaurants, schools, faith-based organizations, etc. Healthcare facilities, which are expected to have infectious patients, require higher ventilation rates and employ higher filtration in order to ensure sufficient infection control; these requirements are not addressed in this guidance. Note that the recommendations contained in the guidance might not be applicable to your particular building or activity. Be aware that some of the recommendations could result in increased energy bills or increased wear and tear on ventilation system components.

1. COVID-19 Basics

COVID-19 is transmitted from person-to-person and may occur in the following scenarios:

- Large droplets from coughing and sneezing are propelled directly into the face, nose, eyes, or mouth of someone nearby, usually within six (6) feet. These droplets are sometimes called "ballistic droplets" because they tend to travel in straight lines and fall out of the air rapidly.
- Small particles (also known as aerosols) are released when a person breathes, talks or vocalizes, sings, coughs, or sneezes. These small particles can remain suspended in the air for a period of time and can move beyond six feet on air currents. Other people might inhale these small particles even if they are farther than six feet away.
- A person touches a surface that is contaminated and then touches a mucus membrane such as their nose, eyes, or mouth. Contaminated objects and surfaces are sometimes called "fomites." Aerosols deposited on surfaces may also be disturbed and introduced back into the air where they might be inhaled.

Effective ventilation is one of the most important ways to control small aerosol transmission. However, ventilation and other indoor air quality improvements are an addition to, and not a replacement for mandatory protections including wearing face coverings (except in certain high-risk environments that require using proper respiratory protection), maintaining at least six feet of distance between people, washing hands frequently, and limiting activities that bring together people from different households. Individuals at higher risk for severe illness from COVID-19 should exercise more caution regarding the time they spend in indoor environments outside of their home.

2. Definitions

Aerosol means solid or liquid particles suspended in a gas (typically air).

Air Changes per Hour (ACH, also called Air Change Rate) approximates how many times the air within a space is replaced each hour. ACH is a calculated value that allows standards, guidelines, and comparisons for ventilation to be made for rooms of different dimensions and which have different ventilation systems.

Using English units, the formula for ACH is:

$$\text{ACH} = (\text{ventilation rate in CFM} \times 60 \text{ minutes/hour}) / \text{room volume in cubic feet}$$

Air Cleaners are standalone devices that move air in a room through a filter. Some filters are capable of removing tiny particles, including virus particles and smoke. They are referred to in this document as Portable Air Cleaners (PACs) to differentiate them from filters and other devices in HVAC systems that provide air cleaning.

ASHRAE is the American Society for Heating, Refrigeration, and Air-Conditioning Engineers. Facilities staff, engineers, and health and safety professionals are familiar with this organization and its literature.

CADR, or Clean Air Delivery Rate, measures a Portable Air Cleaner's effectiveness based on room space and the volume of clean air produced per minute. Tested units have three CADR ratings; for COVID-19 purposes the "Smoke" CADR rating should be used.

CFM, or cubic feet per minute, is a measure of air flow into or out of a room.

In order to calculate how many cfm are required to obtain a desired ACH, the formula is:

$$\text{CFM} = (\text{ACH desired}) \times (\text{room volume in cubic feet}) / 60 \text{ minutes/hour}$$

Room volume can be calculated by the following formula:

$$\text{width} \times \text{length} \times \text{height to ceiling (all dimensions in feet)}$$

Clean Air, for the purposes of this document, refers both to clean outside supplied air, and also to recirculated indoor supplied air that has been passed through a Portable Air Cleaner (PAC) with an appropriately rated CADR, or through an HVAC system equipped with a Minimum Efficiency Reporting Value (MERV) 13 or greater filter. Note that unfiltered outside air contaminated with wildfire smoke may not qualify as clean air.

Fans are devices that pull or push air in one direction. Fans can be rectangularly shaped for placement in windows or doorways, they may be "pedestal type" for placement anywhere in a room, or they may be attached to ceiling fixtures. Some fans have switches that allow the user to change the direction of airflow of the fan; fans that do not have such switches must be physically turned to change the direction of air.

HEPA Filter refers to a High-Efficiency Particulate Air Filter. This type of air filter is designed to meet a standard of removing at least 99.97% of dust, pollen, mold, bacteria, and any airborne particles with a size of 0.3 micron (μm). They are tested with 0.3 micron-sized particles as a "worst case" scenario, as this particle size penetrates through a filter most easily. Particles that are larger or smaller are trapped with even higher efficiency.

HVAC stands for Heating, Ventilation, and Air Conditioning system. Also referred to as "Mechanical Ventilation" because of the system's use of fans to move air in and out of rooms, typically through ducts and plenums.

Mechanical Ventilation is the active process of supplying air to or removing air from an indoor space by powered equipment such as motor-driven fans and blowers, but not by devices such as wind-driven turbine ventilators and mechanically operated windows.

Outside Air (outdoor air) refers to clean air drawn from outside the building either by natural or mechanical ventilation. Also referred to as "Fresh Air" or for selected applications "Makeup Air."

PACs are Portable Air Cleaners, devices that can be moved within a building or room to provide air cleaning. PACs are generally sold with some form of highly efficient filter such as a HEPA filter. The portability of PACs allows them to be placed where air cleaning will be most beneficial to room occupants.

Natural Ventilation refers to ventilation that is accomplished by opening windows and doors to the outside.

Recirculated Air refers to air that has been drawn from the inside of the building, passed through filters, conditioned, and reintroduced into the building. Unless passed through MERV-13 or greater efficiency filters, recirculated air is not considered when assessing building ventilation for COVID-19 purposes.

3. General Considerations

Our understanding of the role that the built environment plays in the transmission of COVID-19 is evolving; recent literature has clearly demonstrated small aerosols can be carried well beyond the six (6) foot physical radius and remain suspended in room air where they can be inhaled. With the possible exception of hospitals, healthcare facilities, and research facilities that employ exhaust hoods, existing ventilation requirements, such as those established in the California Building Code and Title 24, were not intended to control exposures to small aerosols of hazardous infectious agents such as COVID-19. Consequently, code compliance should be considered as the

baseline, or starting point, in creating more protective environments. Ventilation should be maximized to levels as far above code requirements as is feasible, particularly for areas where people are unmasked (e.g., while eating in restaurants) and/or where there is mixing of people from different households, regardless of mask use.

In general, the greater the number of people in an indoor environment, the greater the need for ventilation with outdoor air. Efforts should be focused on providing fresh air ventilation to the spaces with the highest density of occupants, as well as where occupants may be unmasked. Decrease occupancy in areas where outdoor ventilation cannot be increased. Other changes that can be considered in buildings with specific ventilation features include:

- For buildings with mechanical ventilation systems, see Section 5. Improving Mechanical Ventilation.
- Inspect and maintain exhaust ventilation in support areas such as laundry rooms or kitchens.
- Ensure exhaust fans in restrooms and other areas are functioning properly and operating continuously or as needed. Since the virus can be present in fecal matter, closing toilet lids (if available) during flushing is advised.
- Keep windows and other sources of natural ventilation open to the greatest extent possible.
- Consider adding Portable Air Cleaners (PACs) in areas where fresh air ventilation cannot be increased.

To help you in improving your building's ventilation, some of the following professionals may be able to assist:

- Facilities ("Stationary") Engineers,
- Building Maintenance and Repair Staff,
- Mechanical Engineers,
- Mechanical (HVAC) Contractors,
- General Contractors,
- Architects, and/or
- Indoor Air Quality or Industrial Hygiene Consultants

Schools and other interested parties are encouraged to read the Yale School of Public Health's web page *Ventilation Key to Reducing Risk*, part of Yale's Public Health Guidance for Reopening Schools in 2020.

4. Improving Natural Ventilation and Proper Use of Fans

Consider implementing any of the following to improve the supply of outside air into a space, using caution on days with poor air quality:

- When weather and air quality conditions allow, increase fresh outdoor air by opening windows and doors. Do not open windows and doors if doing so poses a safety or health risk to anyone using the facility.
- Use fans to increase the effectiveness of open windows. Position fans securely and carefully in or near windows. Take care with electrical cords; look out for tripping or wet conditions, which can create electrocution hazards. Position fans so that air does not blow from one person to another. Window fans placed in exhaust mode can help draw fresh air into a room via other open windows and doors without generating strong room air currents. NOTE: For buildings with both operable windows and mechanical ventilation systems, the interactions between the two need to be carefully considered.
- Some rooms have high ceiling fans. There is not enough scientific evidence supporting their effectiveness in diluting potentially contaminated air with cleaner air in the higher parts of the room. Ceiling fans do not bring additional fresh air into an indoor space and are not considered to be equivalent to fresh air ventilation. Given this uncertainty about their effect, ceiling fans should be turned off unless necessary for the thermal comfort of building occupants. Ceiling fans may result in improved air mixing, provided outdoor air is being introduced into the space.
- For information on the use of portable air cleaners, please see Section 7. Portable Air Cleaners ("HEPA Air Filters").

5. Improving Mechanical Ventilation

Consider mechanical ventilation system upgrades or improvements and other steps to 1) increase the delivery of clean air and 2) remove or dilute concentrations of COVID-19 or other contaminants in the building air. The amount of outdoor air brought into the mechanical system should be maximized.

MERV 13 or greater filtration is efficient at capturing airborne viruses and should be the target minimum level of filtration. If the air handling system cannot function with such a high level of filtration, increase the filtration in the equipment to the maximum allowable for the system.

Note that (regardless of COVID-19) CCR Title 8, Section 5142, requires that mechanical ventilation systems be maintained and operated to provide at least the quantity of outdoor air required by the State Building Standards Code, Title 24, Part 2, California Administrative Code, in effect at the time the building permit was issued.

Obtain consultation from experienced HVAC professionals when considering changes to HVAC systems and equipment. Some of the recommendations below are based on ASHRAE's Guidance for Building Operations During the COVID-19 Pandemic. Review additional ASHRAE Guidelines for Schools and Universities for further information on ventilation recommendations for different types of buildings and building readiness for occupancy. Not all steps are applicable for all scenarios.

- Fully open outdoor air dampers and close recirculation dampers to reduce or eliminate air recirculation. Set economizers at 100% outdoor air. In mild weather, this will not affect thermal comfort or humidity, but in cold, hot, or humid weather this may result in changes to indoor air, so expect a need for adjustments regarding clothing and/or space heaters.
- Improve central air filtration to as high as possible without significantly diminishing design airflow. Target air filtration should be MERV 13 or greater.
 - Inspect filter housings and racks to ensure appropriate filter fit and check for ways that air could bypass the filter.
 - Clean or replace filters and check filters to ensure they are appropriately installed, seated, functioning, and are not torn. Note that during poor air quality events caused by wildfire smoke, for example, higher efficiency filters will load faster and will need closer monitoring. Since filters may be contaminated with virus particles, anyone changing filters must wear, at a minimum, a fit-tested N95 respirator in accordance with the requirements of CCR Title 8, Section 5144 or Section 5199, as well as eye protection (face shield or goggles), and disposable gloves.
- Disable "demand controls" and occupancy sensors on ventilation systems so that fans operate continuously, independently of heating or cooling needs.
 - If HVAC systems operate on day/night or other pre-programmed cycles, consider running the HVAC system at maximum outside airflow for 1-2 hours before the building opens and for 2-3 hours after the building is closed.
 - Consider running HVAC fans 24/7.
 - Continuous operation of the HVAC system is required regardless of COVID-19 when employees are present under CCR Title 8, Section 5142.
- Generate clean-to-less-clean air movement by adjusting the settings of supply and exhaust air diffusers and/or dampers in higher risk areas, so that potentially contaminated air is moved away from occupants.
- Typically, in-room, wall-mounted fan coil systems do not remove virus particles; this could allow virus particles to accumulate in a space. Such systems should not be operated in occupied rooms unless the fan coils have MERV 13 filtration as a minimum.
- The amount of outdoor air brought into the mechanical system should always be maximized regardless of air filtration.

6. Determining Mechanical System Function

- Small pieces of ribbon or tissue paper can be affixed to ventilation supply registers to verify that the system is operating.

- A lightweight (down) feather on the end of a stick or dowel can be used to trace air currents such as from fans or PACs to verify that air is not being blown from person to person.
- Carbon dioxide (CO₂) levels increase as mechanical ventilation systems fail to keep up with the occupancy of a space. Therefore, the measurement of CO₂ levels in a space may be used to determine the effectiveness of the ventilation system in more densely occupied indoor spaces. However, CO₂ level is a lagging indicator since it takes time for it to increase after a space becomes occupied. Consultation with a knowledgeable professional mechanical engineer or industrial hygienist on how to best to use CO₂ monitoring technology in a facility is recommended.
- If you need assistance in evaluating your system, see the professionals listed in Section 3. General Considerations.

7. Portable Air Cleaners ("HEPA Air Filters")

Portable Air Cleaners (PACs) should be considered in rooms and areas where mechanical and passive ventilation cannot be improved. PACs come in a range of sizes, features, and prices; higher-priced units may not necessarily provide greater improvements to air quality. Depending on the quantity, quality, and condition of existing ventilation, PACs providing 2-5 additional ACH may be needed. At the minimum:

- Purchase PACs that are certified for ozone emissions and electrical safety by the California Air Resources Board (CARB).
- Ensure PACs are appropriately sized for the room or area they are deployed in. One method for selecting the appropriate size unit is the Association of Home Appliance Manufacturer's (AHAM) Clean Air Delivery Rate (CADR). The authors of the CADR standard suggest that a unit should have a CADR at least 2/3 of the room's floor area (in square feet), with adjustments made if the room's ceiling is more than eight feet in height. If this method is used, the unit's CADRs for Smoke should be used. A list of all units with CADR ratings (with the rating values) can be found on AHAM's "Verifide" website. It's possible that a room may need more than one PAC.
- PACs are very efficient at capturing coronavirus-size particles, but the particles must first physically travel to the filter. The faster a PAC can cycle air through the filter, the better its chances of catching virus particles. CADR reflects, in cubic feet per minute, the volume of clean air the PAC produces at its highest speed setting. (The efficiency of the PAC in cleaning the air decreases at lower speeds). PACs have three CADR ratings; smoke, dust and pollen, which represent small, medium and larger particles, respectively. For purposes of COVID-19, the smoke CADR rating should be used. Smoke particles are similar in size to the smallest virus droplets, while larger virus droplets are closer to the pollen size range. A PAC with a CADR of 250 for smoke reduces smoke particle levels to the same concentration that would be achieved by adding 250 cubic feet of clean air each minute.
- For more in-depth help determining the correct size of PACs for COVID-19, Harvard University and the University of Colorado, Boulder have jointly developed a spreadsheet for identifying the correct PAC, using the CADR. If using this spreadsheet, please note that the PACs listed on the third tab are only examples of verified manufacturers and models; you can input your CADR (using the smoke value) for any unit on the second tab of the spreadsheet.
- Manufacturer's specifications, CADR values, and the Harvard/CU spreadsheet all base their estimates on the PAC operating at maximum fan speed. Reducing fan speed may reduce the noise generated by the unit but will also decrease the amount of air filtration the unit will provide.
- For effective air cleaning, a PAC should be placed towards the center of where people sit or gather with the unit exhaust directed so that it will not blow air from person to person. PACs that exhaust straight up should be used to avoid blowing air from one person to another. Placing air filtration units in unused corners of rooms or beneath tables will not effectively clean the air. Do not create a tripping hazard with the PAC or associated electrical cords.
- Industrial air cleaners that use high efficiency particulate air (HEPA) filtration can be used and are particularly well-suited for larger rooms and areas:

Commercial/Industrial units, sometimes referred to as "Negative Air Machines (NAMs)" or "hogs," may already be available in larger facilities; check with Facilities/Maintenance personnel, who may also be able to order this type of unit through their equipment suppliers. All such units should be inspected for proper discharge of exhaust.

Industrial air cleaners typically do not have CADR ratings. Instead, the manufacturer's rated airflow (in CFM) is incorporated into the Air Changes per Hour calculation provided in Section 2. *Definitions*. Depending on the fresh air ventilation in the room, ACHs of 2.5-6 are needed, with lower values working for well-ventilated rooms, and ACHs of 4-6 for rooms with marginal ventilation.

8. Ventilation During Wildfire Smoke Events

- Ventilation and filtration can be very effective in reducing indoor air concentrations of both wildfire smoke particles and corona virus-sized particles; however, these strategies must be used in conjunction with physical distancing protocols, face coverings or masks, frequent hand washing and other practices.
- When used with windows and doors closed, and when properly installed and maintained and operated, an HVAC system with MERV 13 filters will effectively reduce indoor exposure to both wildfire smoke and virus particles.
- Where buildings are not equipped with HVAC systems, PACs can effectively reduce the concentration of both smoke and corona virus-sized particles in indoor air. As noted above, more than one portable air filter might be needed to meet the air filtration rate recommended by the Association of Home Appliance Manufacturers (AHAM).
- To filter wildfire smoke and corona virus-sized particles, the PAC should have a CADR for tobacco smoke (0.9-1.0 μm).

9. Requirements on Ventilation in Cal/OSHA COVID-19 Prevention Standards

On November 30, 2020, Cal/OSHA implemented a mandatory emergency temporary standard (ETS) to prevent employee exposure to COVID-19 in California workplaces, with the following exceptions: (1) when employees are covered by CCR Title 8, Section 5199, the Aerosol Transmissible Diseases standard; (2) when employees are working from home; or (3) in places of employment with one employee who does not have contact with other persons.

The ETS appears in CCR Title 8, Sections 3205 *COVID-19 Prevention*; 3205.1 *Multiple COVID-19 Infections and COVID-19 Outbreaks*; 3205.2 *Major COVID-19 Outbreaks*; 3205.3 *COVID-19 Prevention in Employer-Provided Housing*; and 3205.4 *COVID-19 Prevention in Employer-Provided Transportation to and from Work*.

The ETS requires covered employers to establish, implement and maintain an effective, written COVID-19 Prevention Program that includes elements pertaining specifically to ventilation and filtration, as follows:

- Section 3205 (c)(2)(E): *For indoor locations, the employer shall 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.*
- Section 3205 (c)(8)(B): *For buildings with mechanical or natural ventilation, or both, employers shall 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.*

Under Sections 3205.1 and 3205.2, employers have additional ventilation and filtration requirements in the event of a COVID-19 outbreak, as follows:

- Section 3205.1 (e)(3): *Multiple COVID-19 Infections and COVID-19 Outbreaks. The employer shall implement changes to reduce the transmission of COVID-19 based on the investigation and review required by subsections*

(e)(1) and (e)(2). The employer shall 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.

- Section 3205.2 (e): *Major COVID-19 Outbreaks (e) COVID-19 hazard correction. In addition to the requirements of subsection 3205(c)(4), the employer shall take the following actions: (1) In buildings or structures with mechanical ventilation, employers shall filter re-circulated 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 with the ventilation system, employers shall use filters with the highest compatible filtering efficiency. Employers shall 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 shall implement their use to the degree feasible.*

Under Sections 3205.3 and 3205.4 employers must implement ventilation requirements for employer-provided housing and transportation, as follows:

• Section 3205.3 *COVID-19 Prevention in Employer-Provided Housing ...*

... (c) Physical distancing and controls. Employers shall...

... (3) In housing units, maximize the quantity and supply of outdoor air and increase filtration efficiency to the highest level compatible with the existing ventilation system ...

• Section 3205.4 *COVID-19 Prevention in Employer-Provided Transportation ...*

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

(1) The vehicle has functioning air conditioning in use and the outside temperature is greater than 90 degrees Fahrenheit.

(2) The vehicle has functioning heating in use and the outside temperature is less than 60 degrees Fahrenheit.

(3) Protection is needed from weather conditions, such as rain or snow.

(4) The vehicle has a cabin air filter in use and the U.S. EPA Air Quality Index for any pollutant is greater than 100

10. Resources

State of California

- www.covid19.ca.gov

Cal/OSHA (Division of Occupational Safety and Health, Department of Industrial Relations) workplace safety regulations

- Cal/OSHA Emergency Temporary Standards - Fact Sheets, Model Program, and Other Resources
- CCR Title 8, Section 3205 COVID-19 Prevention; 3205.1 Multiple COVID-19 Infections and COVID-19 Outbreaks; 3205.2 Major COVID-19 Outbreaks; 3205.3 COVID-19 Prevention in Employer-Provided Housing; and 3205.4 COVID-19 Prevention in Employer-Provided Transportation to and from Work
- CCR Title 8, Section 5142 Mechanically Driven Heating, Ventilating and Air Conditioning (HVAC) Systems to Provide Minimum Building Ventilation.
- CCR Title 8, Section 5143 General Requirements of Mechanical Ventilation Systems.
- CCR Title 8, Section 5144 Respiratory Protection

Centers for Disease Control and Prevention

- Ventilation in Buildings
- Operating Schools during COVID-19: CDC's Considerations

- Wildfire Smoke and COVID-19: Frequently Asked Questions and Resources for Air Resource Advisors and Other Environmental Health Professionals

AIHA (formerly the American Industrial Hygiene Association)

- Reducing the Risk of COVID-19 Using Engineering Controls

American Conference of Governmental Industrial Hygienists

- White Paper on Ventilation for Industrial Settings during the COVID-19 Pandemic

American Society of Heating, Refrigerating, and Air-Conditioning Engineers (ASHRAE)

- Guidance for Building Operations During the COVID-19 Pandemic
- ASHRAE Resources Available to Address COVID-19 Concerns
- ASHRAE Reopening Schools and Universities C19 Guidance
- Standard 62.1-2019 Ventilation for Acceptable Indoor Air Quality (*Note: This is a for-fee document. ASHRAE provides free web access to a read-only version from the linked web page; look for Standard 62.1-2019*)

Association of Home Appliance Manufacturers

- Directory of Certified Portable Air Cleaners
- Information Regarding Portable Air Cleaner Testing

California Air Resources Board (CARB)

- Air Cleaners & Ozone Generating Products

Environmental Protection Agency (EPA)

- Ventilation and COVID-19
- Indoor Air in Homes and COVID-19

Harvard University School of Public Health and University of Colorado, Boulder School of Engineering

- Harvard-CU Boulder Portable Air Cleaner Calculator for Schools

World Health Organization

- Q&A: Ventilation and Air Conditioning in Public Spaces and Buildings and COVID-19

Yale University School of Public Health

- Reopening Schools - Ventilation Key to Reducing Risk

This Interim Guidance for Ventilation, Filtration, and Air Quality in Indoor Environments was adapted with permission from a similar document prepared by the San Francisco Department of Public Health (SFDPH): SFDPH COVID-19 Information and Guidance

California Department of Public Health
PO Box, 997377, MS 0500, Sacramento, CA 95899-7377
Department Website (cdph.ca.gov)



Exhibit F

COVID-19 Infectious Disease Preparedness and Response Plan

Identification of COVID-19 Hazards Form

Instructions:

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, 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, and contractors. We will consider how employees and other persons enter, leave, and travel through the workplace, in addition to addressing fixed work locations.

Person(s) conducting the evaluation: _____ Date: _____

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

Exhibit G

COVID-19 Infectious Disease Preparedness and Response Plan

COVID-19 Inspections Form

Person(s) conducting the evaluation: _____ Date: _____

Work location evaluated: _____

Exposure Controls	Status	Person Assigned to Correct	Date Corrected
Engineering			
Barriers/partitions			
Ventilation (amount of fresh air and filtration maximized)			
Additional room air filtration			
[add any additional controls]			
[add any additional controls]			
Administrative			
Physical distancing			
Surface cleaning and disinfection (frequently enough and adequate supplies)			
Hand washing facilities (adequate numbers and supplies)			
Disinfecting and hand sanitizing solutions being used according to manufacturer instructions			
[add any additional controls]			
[add any additional controls]			
PPE (not shared, available and being worn)			
Face coverings (cleaned sufficiently often)			

Gloves			
Face shields/goggles			
Respiratory protection			
[add any additional controls]			