



AZUSA PACIFIC UNIVERSITY

COVID-19 Prevention Program (CPP)

Azusa Pacific University (APU)

This CPP is designed to control exposure to the SARS-CoV-2 virus that may occur in our workplace. It is mandated by California Occupational Safety and Health Administration (CalOSHA) pursuant to its Emergency Temporary Standards for COVID-19 in the workplace, effective June 15, 2021.

Date: Effective NOVEMBER/2020; updated AUGUST/2021

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1.0 Authority and Responsibility

Jay Brakensiek, Safety and Emergency Planning Manager, has overall authority and responsibility for implementing the provisions of this CPP in our workplace. For questions about this CPP, Mr. Brakensiek can be reached at jbrakensiek@apu.edu or (626) 387-5765. In addition, all managers and supervisors are responsible for implementing and maintaining the CPP in their assigned work areas and ensuring employees receive answers to questions about the program in a language they understand.

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

2.0 Identification and Evaluation of COVID-19 Hazards

We will implement the following in our APU workplace environment:

- Cal/OSHA distinguishes only “immunized” and “unimmunized” categories, “natural immunity” is not recognized by Cal/OSHA. Per CalOSHA, immunized means “fully vaccinated,” as defined in this plan below.
- Conduct workplace-specific evaluations using the **Appendix A: Identification of COVID-19 Hazards** form.
- Document the vaccination status of our employees through attestation in the Total Access platform maintained confidentially by the Office of Human Resources.
- Evaluate employees’ potential workplace exposure to all persons at our workplace or who may enter it.
- Develop COVID-19 policies and procedures to respond effectively and immediately to individuals at the workplace who test positive for COVID-19 to prevent or reduce the risk of transmission in the workplace.
 - [APU Exposure Management Plan For COVID-19](#)

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

Employee Participation

- Employees are encouraged to participate in the identification and evaluation of COVID-19 hazards by working directly with their supervisors, Facilities Management, or their HR Support Team.
- All employees are encouraged to use the University [Safe Reporting Hotline](#) for non-compliance with this COVID-19 Prevention Program.

Employee Screening and Surveillance Testing

- All employees who attested to being vaccinated or naturally immune do not need to submit a daily symptom check or biweekly surveillance testing.
- All unvaccinated persons must submit a daily symptom check and biweekly surveillance testing provided by APU on [Total Access](#). Entry screenings are conducted before any employee may enter the workspace. Screenings include a check-in concerning coughing, shortness of breath, difficulty breathing, and fever or chills and whether the individual is currently under isolation or quarantine orders.
- If employees do not have a device for measuring their temperature, the Student Health Center (SHC), located in the Magnolia Court building on the East Campus, can conduct a symptom check for those employees during regular business hours, 8 a.m.-5 p.m. The SHC will also provide disposable thermometers for anyone that needs them in order to enter their workplace and will have some placed by the front door of the SHC for those who work after hours.
- Entry screenings are conducted before any unvaccinated employees who are not naturally immune may enter the workspace. Screenings include a check-in concerning coughing, shortness of breath, difficulty breathing, and fever or chills and whether the individual is currently under isolation or quarantine orders.
 - 1) Faculty/staff use [Total Access Employee Resources](#)
 - 2) Students use [My Cougar Health Portal- Student Resources](#)
 - 3) Visitors use [APU Visitor's Health Assessment form](#)
- If an order to isolate, quarantine, or exclude an employee is issued by a local or state health official, the employee will not return to work until the period of isolation or quarantine is completed or the order is lifted.

3.0 Correction of COVID-19 Hazards

Unsafe or unhealthy work conditions, practices, or procedures will be documented and corrected in a timely manner based on the severity of the hazards (see Appendix A - Identification of Hazards).

- All supervisors will notify Facilities Management as soon as practicable for any

support in the correction, sanitization, and clean up of work spaces exposed to COVID-19 hazards. All exposed work spaces will remain closed until the necessary correction has taken place.

- All supervisors are to refer any person(s) infected with COVID-19, or who has/have any COVID-19 symptoms, to the SHC for further instruction from Dr. Todd Emerson.

4.0 Control of COVID-19 Hazards

Face Coverings

Employees -The University provides new face coverings, available through the Office of Facilities Management located in the Anderson Building on East Campus, and ensures they are properly worn by all employees when they are indoors or in vehicles, and where otherwise required by applicable public health agency orders or University directives.

Visitors - All visitors must complete the [APU Visitor's Health Assessment Form](#). All visitors must wear a face mask indoors or in a vehicle while on APU premises. For visitors who do not have a face mask, APU will provide one for them, available through Facilities Management located in the Anderson Building on East Campus.

Employees whose roles require them to wear respirators, must do so in accordance with our respirator program that meets the California Code of Regulations section 5144 requirements. Other employees may also wear respirators if they so choose.

Though face coverings are not required outdoors, they are recommended for unvaccinated employees who cannot maintain a six-foot physical distance from others.

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

- When alone in a room or a vehicle.
- While eating or drinking at the workplace, provided employees are at least six feet apart and outside air supply to the area, if indoors, has been maximized to the extent feasible.
- Employees who cannot wear face coverings due to a medical or mental health condition or disability approved by the Office of Human Resources, 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.

Employees not wearing a required face covering due to one or the above conditions, must be at least six feet apart from all other persons unless the unmasked employee is either fully vaccinated or tested bi-weekly for COVID-19.

APU does not prohibit 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.

Engineering Controls

For indoor locations, using the ([HVAC Filter Analysis](#)), we identify and evaluate how to maximize, to the extent feasible, ventilation with outdoor air using the highest filtration

efficiency compatible with our existing ventilation system, and whether the use of portable or mounted High Efficiency Particulate Air (HEPA) filtration units, or other air cleaning systems, would reduce the risk of transmission by:

- Circumstances where the amount of outside air needs to be minimized due to other hazards, such as heat, wildfire smoke, or when the EPA Air Quality Index is greater than 100 for any pollutant.
- The ventilation systems will be properly maintained and adjusted.
- Provisions have been made to maximize, to the extent feasible, the amount of outside air and increase filtration efficiency to the highest level compatible with the existing ventilation system.
- The implementation of portable or mounted HEPA filtration may be utilized if we determine such use would reduce the risk of COVID-19 transmission.
- Implementation of applicable orders and guidance from the State of California and our local health department related to COVID-19 hazards and prevention, including CDPH's Interim Guidance for Ventilation, Filtration, and Air Quality in Indoor Environments have been considered in our engineering analysis for COVID-19.

Cleaning and Disinfecting

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

Our workplace-specific measures, include:

- Ensuring adequate supplies and time for cleaning and disinfecting to be done properly.
- Informing the employees of the frequency and scope of cleaning and disinfection is a responsibility shared by supervisors, Facility Management, housekeeping, and other involved staff.

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

In the event of a COVID-19 case, supervisors will immediately close the applicable work area. They will notify Facilities Management for the correction, sanitization, and clean up of work spaces exposed to COVID-19. All exposed work spaces will remain closed until the necessary correction has taken place.

Hand Sanitizing

In order to implement effective hand sanitizing procedures:

- Disinfectant and related supplies have been made available to a designated person in every department with authorized personnel on campus performing essential duties. Those individuals received one container of Clorox wipes for their essential personnel. Hand sanitizer stations, effective against COVID-19, are available to all employees at all major buildings in more than 125 locations.
- Employees are allowed frequent breaks to wash their hands. Soap and water are

available to all employees at the following location(s): public restrooms and kitchenettes that are open, and food prep areas.

Personal Protective Equipment (PPE) Used to Control Employees' Exposure to COVID-19

We evaluate the need for PPE (such as gloves, goggles, and face shields) as required by CCR Title 8, section 3380, and provide such PPE as needed.

We provide respirators for any employee upon request.

For our labs, we provide and ensure use of eye and respiratory protection in accordance with section 5144 when employees are exposed to procedures that may aerosolize potentially infectious material such as saliva or respiratory tract fluids.

Testing of Symptomatic Employees

If either a vaccinated or unvaccinated employee has COVID-19 symptoms, they should isolate at home, inform the supervisor of the illness, and not come to work until they meet the criteria in Section 10.

Vaccinated Employees: Vaccinated employees with symptoms should contact their own doctor for testing, and may call SHC for advice.

Unvaccinated Employees: Unvaccinated employees with symptoms should contact SHC via the Symptom Tracker on Total Access, call, or email. Symptomatic testing is only done at the SHC with an appointment and weekend testing is limited. COVID-19 testing is available at the SHC on East Campus at no cost to employees with COVID-19 symptoms who are not fully vaccinated, during employees' paid time.

5.0 Investigating and Responding to COVID-19 Cases

This will be accomplished by using the procedure for **Investigating COVID-19 Cases**, located in APU Student Health Services.

Employees who had potential COVID-19 exposure in our workplace will be:

- Offered COVID-19 testing at no cost at the Student Health Center (East Campus) as well as the West Campus.
- All informational material relating to COVID-19 will be provided by the SHC.
- All investigations will be directed by APU's Covid-19 Medical Officer, Dr. Todd Emerson.
- Any employee who is diagnosed with COVID-19 (by testing or symptoms) or has been exposed to COVID-19, must notify the University by emailing healthcntr@apu.edu. The employee will be assigned a contact tracer by APU.
- See Appendices F and E relating to outbreaks as defined by Cal-OSHA.
- If an employee contracts COVID-19 while traveling on university business, please contact your supervisor and SHC for instructions on what to do prior to returning to campus.

6.0 Communicating

Our goal is to ensure that we have effective two-way communication with our employees

that is easily understood and includes the following information:

- Employees should report COVID-19 symptoms and possible hazards to the Student Health Center at calling (626) 815-2100 or by emailing healthcntr@apu.edu.
- Employees can report symptoms and hazards without fear of reprisal.
- We have procedures and/or policies to accommodate employees with medical or other conditions that put them at increased risk of severe COVID-19 illness.
- In many cases, employees can access free COVID-19 testing through SHC.
- If testing is required, we will communicate the plan for providing testing and inform affected employees of the reason for the testing and the possible consequences of a positive test.
- If applicable, we will provide notification to employees and contractors of exposure and close contacts within one business day.
- Inform employees about COVID-19 hazards (including employers whose employees came in contact with our workplace) they may be exposed to, what is being done to control those hazards, and our COVID-19 policies and procedures.
- For additional information, visit [APU COVID-19 website](#).

7.0 Training and Instruction

We will provide effective training and instruction to all employees, including faculty, staff, and student workers. Training shall include:

- Our COVID-19 policies and procedures to protect employees from COVID-19 hazards, and how to participate in the identification and evaluation of COVID-19 hazards.
- Information regarding COVID-19-related benefits (including mandated sick and vaccination leave) to which the employee may be entitled under applicable federal, state, or local laws.
- The fact that:
 - COVID-19 is an infectious disease that can be spread through the air.
 - COVID-19 may be transmitted when a person touches a contaminated object and then touches their eyes, nose, or mouth.
- An infectious person may have no symptoms.
- The fact that particles containing the virus can travel more than six feet, especially indoors, so physical distancing, face coverings, increased ventilation indoors, and respiratory protection decrease the spread of COVID-19 and are most effective when used in combination.
- The right of employees that are not fully vaccinated to request a respirator (N-95 mask) for voluntary use, without fear of retaliation, and our policies for providing the respirators. Employees voluntarily using respirators will be trained according to section 5144(c)(2) requirements:
 - How to properly wear them.
 - How to perform a seal check according to the manufacturer's instructions each time a respirator is worn, and the fact that facial hair can interfere with a seal.
- The importance of frequent hand washing with soap and water for at least 20 seconds and using hand sanitizer when employees do not have immediate access to a sink or hand washing facility, and that hand sanitizer does not work if the hands are soiled.
- Proper use of face coverings and the fact that face coverings are not respiratory protective equipment. Since COVID-19 is an airborne disease, N95s and more

protective respirators protect the users from airborne disease, while face coverings primarily protect people around the user.

- The conditions where face coverings must be worn at the workplace.
- That face coverings are additionally recommended outdoors for people who are not fully vaccinated if six feet of distance cannot be maintained.
- Employees can request face coverings and can wear them at work regardless of vaccination status and without fear of retaliation.
- COVID-19 symptoms, the importance of obtaining a COVID-19 test, and not coming to work if the employee has COVID-19 symptoms.
- Information on our COVID-19 policies and how to access COVID-19 testing and vaccination, and the fact that vaccination is effective at preventing COVID-19, protecting against both transmission and serious illness or death.

Appendix D: COVID-19 Training Roster or [Total Access Link \(COVID-19 and Physical Distancing Training Module\)](#) will be used to document this training.

8.0 Exclusion of COVID-19 Cases

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

- Ensuring that COVID-19 cases are excluded from the workplace until our return-to-work requirements are met.
- Excluding employees that had a close contact from the workplace until our return-to-work criteria have been met, with the following exceptions:
 - Employees who were fully vaccinated before the close contact and who do not develop COVID-19 symptoms
 - COVID-19 cases who returned to work per our return-to-work criteria and have remained free of COVID-19 symptoms, for 90 days after the initial onset of COVID-19 symptoms, or for COVID-19 cases who never developed COVID-19 symptoms, for 90 days after the first positive test
- For employees excluded from work, continuing and maintaining employees' earnings, wages, and all other employees' rights and benefits, those employees may see their HR Business Partner for details.
- Providing employees at the time of exclusion with information on available benefits.

9.0 Reporting, Recordkeeping, and Access

It is our policy to:

- Report information about COVID-19 cases at our workplace to the local health department whenever required by law, and provide any related information requested by the local health department.
- Report immediately to Cal/OSHA any COVID-19-related serious illnesses or death, as defined under CCR Title 8 section 330(h), of an employee occurring in our place of employment or in connection with any employment.
- Maintain records of the steps taken to implement our written COVID-19 Prevention Program in accordance with CCR Title 8 section 3203(b).
- Make our written COVID-19 Prevention Program available at [Destination APU](#) to

employees, authorized employee representatives, and to representatives of Cal/OSHA immediately upon request.

- All reporting requirements will be led by APU Safety and Emergency Planning Manager in conjunction with the APU Medical Director.

10.0 Return-to-Work Criteria

- **COVID-19 cases with symptoms** will not return to work until all the following have occurred:
 - At least 24 hours have passed since a fever of 100.4°F or higher has resolved without the use of fever-reducing medications.
 - COVID-19 symptoms have improved.
 - At least 10 days have passed since COVID-19 symptoms first appeared.
 - [APU Exposure Management Plan For COVID-19](#) details the procedures that will be followed.
- **COVID-19 cases who tested positive but never developed symptoms** will not return to work until a minimum of 10 days have passed since the date of specimen collection of their first positive COVID-19 test.
- A negative COVID-19 test will not be required for an employee to return to work once the requirements for “cases with symptoms” or “cases who tested positive but never developed symptoms” (above) have been met.
- Persons who had a close contact may return to work as follows:
 - Close contact but never developed symptoms: when 10 days have passed since the last known close contact.
 - Close contact with symptoms: when the “cases with symptoms” criteria (above) have been met, unless all of 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
 - At least 10 days have passed since the last known close contact
 - The person has been symptom-free for at least 24 hours, without using fever-reducing medications.
- If an order to isolate, quarantine, or exclude an employee is issued by a local or state health official, the employee will not return to work until the period of isolation or quarantine is completed or the order is lifted by LACPH and cleared by Dr. Todd Emerson and Office of Human Resources.

Approved,

J. Chris Jennings, VP and General Counsel

Date: _____

Jay Brakensiek, Safety and Emergency Planning Manager
Jul/21

Appendix A: Identification of COVID-19 Hazards

Actual data in Facilities Management database.

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, training, entrances, bathrooms, hallways, aisles, walkways, elevators, break or eating areas, cool-down areas, and waiting areas.

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

Details of how COVID-19 cases and outbreaks are handled are available in the APU Exposure Management Plan (EMP).

Actual data collection is electronically stored in Facilities Management.

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

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

Location, tasks, and processes that could potentially expose employees to COVID-19 hazards	Potential places and times of exposure	Potential for COVID-19 exposures and employees affected, including members of the public and employees of other employers	Existing and/or anticipated COVID-19 prevention controls

Appendix B: COVID-19 Inspections and Hazard Corrections

(placeholder until APU form replaces this)

NOTE: Actual electronic data for inspections and correction are in Facilities Management.

Date: [enter date]

Name of person conducting the inspection: [enter names]

Work location evaluated: [enter information]

Exposure Controls	Status	Person Assigned to	Date Corrected	Description of Correction
Engineering				
Ventilation* (amount of fresh air and filtration maximized)				
Additional room air filtration*				
Administrative				
Surface cleaning and disinfection (frequently enough and adequate supplies)				
Hand-washing facilities (adequate numbers and supplies)				
Disinfecting and hand sanitizing solutions being used according to manufacturer instructions				

Exposure Controls	Status	Person Assigned to Correct	Date Corrected
PPE (not shared, available and being worn)			
Face coverings (cleaned sufficiently often)			
Gloves			
Face shields/goggles			
Respiratory protection			
Other COVID-19 Hazards-List	Status	Person Assigned to Correct	Date Corrected

Appendix C: Investigating COVID-19 Cases

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

[APU Exposure Management Plan for COVID-19](#)

Appendix D: COVID-19 Training Roster

Training Data is stored in the following locations:

Students: [Destination APU: Student Resources](#)

Staff: [Destination APU: Employee Resources](#)

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

To be added through the Total Access Medicat online systems for staff, faculty, and students.

Appendix F

Multiple (3 or more) COVID-19 Infections and COVID-19 Outbreaks

APU Exposure Management Plan for COVID-19 details how APU will respond to confirmed cases of COVID-19 and is found here:

[APU Exposure Management Plan For COVID-19](#)

For an outbreak of 3 or more COVID cases, this addendum will stay in effect until there are no new COVID-19 cases detected in the exposed group for a 14-day period.

COVID-19 testing for outbreak of 3 or more - see EMP.

COVID-19 investigation, review, and hazard correction - see EMP.

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

Regardless of vaccination status, an outbreak of 3 or more requires wearing a face mask both indoors and outdoors.

Buildings or Structures with Mechanical Ventilation

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

Appendix G

Major (20 or more) COVID-19 Outbreaks

[APU Exposure Management Plan For COVID-19](#)

For a major outbreak of 20 or more, this addendum will stay in effect until there are fewer than three COVID-19 cases detected in our exposed group for a 14-day period.

Regardless of vaccination status, a major outbreak of 20 or more requires wearing a face mask both indoors and outdoors.

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

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

- Provide employees in the exposed group with respirators for voluntary use in compliance with section 5144(c)(2) and determine the need for a respiratory protection program or changes to an existing respiratory protection program under section 5144 to address COVID-19 hazards.
- Separate by six feet (except where we can demonstrate that six feet of separation is not feasible and there is momentary exposure while persons are in movement) any employees in the exposed group who are not wearing respirators required by us and used in compliance with section 5144. When it is not feasible to maintain a distance of at least six feet, individuals are as far apart as feasible.
- 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.

Appendix H

COVID-19 Prevention in Employer-provided Housing

This section applies to student employees, staff, and administrators.

Assignment of Housing Units

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

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

Ventilation

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

Face Coverings

We provide face coverings to all residents and provide information to residents on when they should be used in accordance with state or local health officer orders or guidance. As defined by LACDPH, students in housing are considered part of the same household with their roommates and are not required to wear masks while in the same household.

Cleaning and Disinfection

We ensure that:

- Housing units, kitchens, bathrooms, and common areas are effectively cleaned to prevent the spread of COVID-19. Housing units, kitchens, bathrooms, and indoor common areas are cleaned and disinfected after a COVID-19 case was present during the high-risk exposure period, if another resident will be there within 24 hours of the COVID-19 case.
- Cleaning and disinfecting is done in a manner that protects the privacy of residents.

- Residents are instructed to not share unwashed dishes, drinking glasses, cups, eating utensils, and similar items.

Screening

We encourage residents to report COVID-19 symptoms to SHC.

Daily symptom check rules apply if you test positive or have symptoms.

COVID-19 Testing

We establish, implement, maintain, and communicate to residents effective policies and procedures for COVID-19 testing of residents who had a close contact or COVID-19 symptoms. See link [APU Exposure Management Plan For COVID-19](#).

COVID-19 Cases and Close Contacts

We:

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

Appendix I

COVID-19 Prevention in Employer-provided Transportation

This addendum is added to our CPP for our employer-provided motor vehicle transportation, 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, regardless of the travel distance or duration involved. Reference section 3205.4 for details.

Application: This applies to APU trolleys, fleet vehicles, and rental vehicles used for university business.

This addendum 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.
- 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.
- To employees with occupational exposure as defined by section 5199.
- To vehicles in which all employees are fully vaccinated.

Assignment of Transportation

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

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

Face Coverings and Respirators

We ensure that the:

- Trolley - Masks are required for all employee riders, including in the waiting area for the trolley. Trolleys shall have a sign on the outside of each vehicle as well as the waiting area noting that masks are required.

- University Fleet Vehicles - Masks are required for all employees when operating a fleet vehicle. The only exception is when the employee is operating the vehicle alone with no passengers.
- Rental Vehicles (e.g., Enterprise, Budget, Hertz) for University Business - Masks are required for all employees when operating a rental vehicle for university business. The only exception is when the employee is operating the vehicle alone with no passengers.
- Upon request, we provide respirators for voluntary use in compliance with subsection 5144(c)(2) to all employees in the vehicle who are not fully vaccinated. Respirators are available through Facilities Management at the Anderson Building, East Campus.

Cleaning and Disinfecting

We ensure that:

- All high-contact surfaces (door handles, seat belt buckles, armrests, etc.) used by passengers are cleaned to prevent the spread of COVID-19 and are cleaned and disinfected if used by a COVID-19 case during the high-risk exposure period, when the surface will be used by another employee within 24 hours of the COVID-19 case. **Student Health Center will communicate with Facilities Management to inform them of such an exposure and need for cleaning.**
- All high-contact surfaces used by drivers, such as the steering wheel, armrests, seat belt buckles, door handles and shifter, are cleaned to prevent the spread of COVID-19 between different drivers and are disinfected after use by a COVID-19 case during the high-risk exposure period, if the surface will be used by another employee within 24 hours of the COVID-19 case. **Student Health Center will communicate to Facilities Management the presence of such a case and the need for disinfection procedures.**
- We provide sanitizing materials, training on how to use them properly, and ensure they are kept in adequate supply.

Ventilation

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

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

Hand Hygiene

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

Appendix J

DEFINITIONS (Cal/OSHA, CCR, Title 8, Section 3205, updated)

“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.

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

“COVID-19 case” 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 healthcare provider; or
- (C) Is subject to a COVID-19-related order to isolate issued by a local or state health official; or
- (D) 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.

“COVID-19 hazard” means 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. This also includes objects or surfaces that may be contaminated with SARS-CoV-2.

“COVID-19 symptoms” means fever of 100.4°F 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.

“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.

“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.

“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.

“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).

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

For COVID-19 cases 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 since symptoms first appeared; 24 hours have passed with no fever, without the use of fever-reducing medications; and symptoms have improved

For COVID-19 cases who never develop COVID-19 symptoms: from two days before until 10 days after the specimen for their first positive test for COVID-19 was collected.

“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.

“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.

Appendix K

CAL/OSHA Frequently Asked Questions

Changes to Emergency Temporary Standards

Following the June 17 vote by the Occupational Safety and Health Standards Board to adopt the [revised](#) COVID-19 Prevention Emergency Temporary Standards, Governor Gavin Newsom signed an [executive order](#) to allow the revisions to immediately take effect on June 17. The revised regulations reflect the state's latest COVID-19 public health guidance. The updates include changes to face coverings and physical distancing requirements. More information on the revised COVID-19 Prevention Emergency Temporary Standards can be found in Cal/OSHA's [Frequently Asked Questions](#).

Q: Why did Cal/OSHA propose revising the COVID-19 Prevention Emergency Temporary Standards?

A: Cal/OSHA proposed revisions to the COVID-19 emergency temporary standards (ETS) to reflect the availability of vaccinations to limit workplace transmission, to revise requirements in light of updated Centers for Disease Control and California Department of Public Health (CDPH) face covering guidance, and to provide options for employers to make a safe transition from physical distancing and face covering mandates to more normal operations.

Q: What is the status of the ETS?

A: The ETS took effect on November 30, 2020. On June 3, the Occupational Safety and Health Standards Board (Standards Board) voted to adopt proposed revisions to the ETS, but with reservations about some provisions. The Standards Board also voted to form a subcommittee to advise on further revisions to the ETS in light of these reservations.

On June 9, the Standards Board voted to withdraw the proposed revisions from OAL review. The Division offered to make further revisions in light of updated CDPH face covering guidance, and to address key concerns raised by Board members and stakeholders at the June 3 meeting. On June 17, 2021, the Occupational Safety and Health Standards Board (Standards Board) voted to update the COVID-19 Emergency Temporary Standards (ETS), 8 CCR §§ 3205-3205.4. [Executive Order N-09-21](#) permitted the revised ETS to take effect the same day.

What Changed

Q: What are the important changes in the June 17 revised ETS?

A: They include:

- 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, though workers must be trained on CDPH recommendations for

- outdoor use of face coverings.
- Employers may allow fully vaccinated employees not 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.
 - Employers must provide unvaccinated employees with approved respirators for voluntary use when working indoors or in a vehicle with others, upon request.
 - Employers may not retaliate against employees for wearing face coverings.
 - No physical distancing or barrier requirements regardless of employee vaccination status with the following exceptions:
 - Employers must evaluate whether it is necessary to implement physical distancing and barriers during an outbreak (3 or more cases in an exposed group of employees)
 - Employers must implement physical distancing and barriers during a major outbreak (20 or more cases in an exposed group of employees)
 - No physical distancing requirements whatsoever in the employer-provided housing and transportation regulations.
 - Where all employees are vaccinated in employer-provided housing and transportation, employers are exempt from those regulations
 - Employers must evaluate ventilation systems to maximize outdoor air and increase filtrations efficiency, and evaluate the use of additional air cleaning systems

Q. Are there requirements from the November 2020 ETS that will remain in place?

A: Yes, including:

- An effective written COVID-19 Prevention Program
- Providing effective training and instruction to employees on the employer's prevention plan and their rights under the ETS
- Providing notification to public health departments of outbreaks
- Providing notification to employees of exposure and close contacts
- Requirements to [offer testing](#) after potential exposures
- Requirements for responding to COVID-19 cases and outbreaks
- Quarantine and exclusion pay requirements
- Basic prevention requirements for employer-provided housing and transportation

Physical Distancing

Q: Are all physical distancing requirements in the revised ETS gone?

A: The revised ETS is similar to rule changes for the general public in California that eliminate physical distancing and barrier requirements regardless of vaccination status. There are several exceptions that may apply:

- Nothing in the revised ETS prevents employers from implementing additional protective measures than are required, including the use of physical distancing and barriers.
- Employers are under an ongoing requirement to assess workplace hazards and implement controls to prevent transmission of disease. There may be circumstances in which employers determine that physical distancing is necessary in their workplace.

- During an outbreak (3 or more employees in an exposed group), employers are required to evaluate whether physical distancing or barriers are necessary to control the transmission of COVID-19.
- Physical distancing and barriers must be used in a major outbreak (20 or more employees in an exposed group) for all employees, regardless of vaccination status.

Respirators

Q: What is an employer's obligation to provide respirators?

A: An employer must provide respirators in two scenarios: (1) to any unvaccinated employee who works with others indoors or in a vehicle and who requests one and (2) where there is a major outbreak, to any employees in the exposed group for voluntary use. The respirator must be the right size, and the employee must receive basic instruction on how to get a good "seal," or fit.

Q: What does it mean to "provide respirators upon request"?

A: An employer must be able to provide the respirator upon request. Initially, an employer may either stock respirators and offer them to employees or may poll workers to determine which employees wish to be provided a respirator before obtaining them. However, once an employer has established that it has employees who wish to wear respirators, it should have enough on hand of the correct size and type to fulfill reasonably foreseeable requests upon demand. If an employee prefers to select and purchase their own respirator, an employer may permit this alternative, as long as the employer reimburses the employee in a timely manner.

In a major outbreak, respirators must be offered to employees regardless of vaccination status and without waiting for a request from the employee. The employer must offer respirators immediately upon determining a major outbreak is underway.

An employer is under a continuing obligation to provide respirators to eligible unvaccinated employees at any time they communicate to the employer their desire to wear one.

Q: How soon does a respirator need to be provided after an employee requests it?

A: After initial implementation as described above, employers should provide requested respirators to unvaccinated employees as soon as possible.

Q: What if more employees request respirators than the employer anticipates and the employer runs out of respirators? Will Cal/OSHA cite the employer?

A: Cal/OSHA will not cite employers who make a good-faith estimate and effort to provide respirators as soon as possible to employees that request them. If an employer runs out of respirators, they should order more respirators immediately. Cal/OSHA lists some but not all vendors that sell N95 respirators in large quantities (vendors able to fulfill orders of more than 100,000 units) at <https://www.dir.ca.gov/dosh/wildfire/List-of-N95-Vendors.pdf>. There are many vendors who have N95s available in smaller quantities.

Q: Why is Cal/OSHA requiring respirators be offered to unvaccinated persons? Isn't this different from CDC and federal OSHA guidance?

A: Under CDC and federal OSHA guidance, unvaccinated persons are to wear face coverings and physically distance indoors. Cal/OSHA is requiring voluntary respirators because California is phasing out physical distancing, because a well-fitting respirator reduces the risk of infection better than physical distancing alone, and because respirators are readily available. The ETS provides this as an alternative protection for unvaccinated employees.

Q: How often must an employer provide an employee with a new respirator?

A: For voluntary use, the need to replace a respirator varies with use and environment. Filtering facepiece respirators are disposable respirators that cannot be cleaned or disinfected. They must be replaced if they get damaged, deformed, dirty, or difficult to breathe through. A best practice is to replace filtering facepiece respirators at the beginning of each shift. Employers should follow the manufacturer's instructions. CDC recommends replacing a disposable filtering facepiece respirator, such as an N95, after it has been taken on and off five times. Filtering facepiece respirators may not fit correctly after repeated use.

Face Coverings

Q: Who has to wear face coverings?

A: (L.A. County update more restrictive) - Face coverings are required indoors and in vehicles for all employees. 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).

Though face coverings are not required outdoors, employers must communicate to workers that face coverings are recommended for unvaccinated persons outdoors where six feet of physical distancing cannot be maintained. Employers must provide face coverings to unvaccinated persons and make them available to vaccinated persons upon request.

Q: Are there exceptions to wearing face coverings indoors?

A: Yes. The most common exceptions for unvaccinated persons are:

- When alone in a room or vehicle
- When eating and drinking
- When an accommodation is required
- When job duties make a face covering infeasible or create a hazard

Q: Are workers protected from retaliation if they choose to wear a face covering, even if not required to do so?

A: Yes. Employers cannot retaliate against workers for wearing face coverings, including when the worker is wearing a face covering voluntarily.

Vaccines

Q: Is documentation required for a fully vaccinated employee to work without a face covering indoors?

A: Yes. Vaccination status must be documented. The revised ETS does not specify a particular method. The employer must record the vaccination status for any employee not wearing a face covering indoors and this record must be kept confidential. Acceptable options include:

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

Nothing in the revised ETS prevents an employer from requiring all employees to wear a face covering instead of having a documentation process.

Q. What if the employee declines to state their vaccination status?

A: Under the ETS, an employer is not obligated to require employees to submit proof of being fully vaccinated. Absent such a requirement, an employee has the right to decline to state if they are vaccinated or not. In that case, the employer must treat the employee as unvaccinated and must not take disciplinary or discriminatory action against the employee.

Testing

Q: What are the testing requirements of the revised ETS?

A: Employers must offer testing at no cost to employees during paid time to:

- Symptomatic unvaccinated employees, regardless of whether there is a known exposure. This is a new requirement.
- Unvaccinated employees after an exposure.
- Vaccinated employees after an exposure if they develop symptoms.
- Unvaccinated employees in an outbreak.
- All employees in a major outbreak.

Outbreaks

Q. How will Cal/OSHA ensure employees are adequately protected if there is a surge in COVID-19 cases?

A: The revised ETS requires employers to implement more protective requirements if an outbreak or major outbreak occurs in a workplace. Cal/OSHA also has the option of proposing changes to the ETS one additional time, if necessary.

Enforcement

Q: Will Cal/OSHA issue citations for employers who do not implement all provisions of the June 17 Emergency Temporary Standards immediately?

A: Employers should implement the June 17 ETS as soon as possible. For those unable to implement the ETS immediately, the employer must implement or retain alternative controls to ensure the health of employees. If an employer is continuing to comply with the November ETS while implementing the revisions, Cal/OSHA will not cite the employer.

With respect to face coverings, the employers can comply with the June 17 ETS by requiring face coverings for all employees while they gather documentation to allow fully vaccinated persons to go without face coverings.

If an employer is unable to provide NIOSH-approved respirators on the effective date of the ETS revisions, it is particularly important that the employer take alternative measures to protect unvaccinated employees until respirators are available.

END