COVID-19 PREVENTION PLAN

An Addendum to the IIPP

Abstract

The COVID-19 prevention plan serves as a functional addendum to the Injury Illness Prevention Program (IIPP) in identifying hazards associated with COVID-19 in the workplace and control measures that can reduce the risk of employee exposure. The COVID-19 Prevention Plan addresses requirements identified in the emergency standard 8CCR section 3205.

Approved By:

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COVID Prevention Plan
Review and/or Update Log

Please review and update the written program annually and track the revision in the log below.

Date	Revised by: Name	Approved by	Program Reviewed*	Program Updated**	Comments:
11/15/20	M. DeSalvio	M. DeSalvio	N/A	N/A	Initial Copy
2/10/21	M. DeSalvio	M. DeSalvio	X	X	Updated campus procedures
4/28/21	M. DeSalvio	M. DeSalvio	X	X	Updated campus procedures
6/24/21	M. DeSalvio	M. DeSalvio	X	X	Updated to align with revised ETS
7/7/21	M. DeSalvio	M. DeSalvio		X	Updated procedures for vaccine verification.
7/21/21	M. DeSalvio	M. DeSalvio		X	Updated mask requirements and procedures for contact tracing.
8/16/21	M.DeSalvio	M.DeSalvio		X	Updated reporting procedures and resources
11/17/21	M.DeSalvio	M.DeSalvio	X	X	Clarified cleaning procedures and aligned with current campus practices.
5/20/22	M.DeSalvio	M.DeSalvio	X	X	Aligned with updated COVID-19 requirements
9/28/23	M.DeSalvio	M.DeSalvio	X	X	Aligned with updated COVID-19 requirements
9/6/24	M.DeSalvio	M.DeSalvio	X	X	Aligned with updated COVID-19 requirements

*Review: Program was either edited for grammatical errors and formatting, small changes occurred

** Update: Program was edited for changes in content

We certified at the time of review, the information provided on this plan is complete and accurate

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COVID-19 Prevention Plan

An addendum to the Injury Illness Prevention Program (IIPP)

Scope

This addendum shall apply to the San Bernardino and Palm Desert campuses, or any CSUSB off-campus center and shall be enforced in alignment with CSU Executive Order 1039, and 8 CCR Section 3205. There are no exemptions from CSUSB's health and safety requirements for personal beliefs or personal preferences. Those community members found not strictly following the requirements will be asked to comply immediately; those who continue to not comply will be removed from university property and will not be granted permission to return until they are prepared to comply. In addition, the matter will be forwarded to Human Resources (staff/management), Faculty Affairs (faculty), and/or the dean of Students Office (students) for potential disciplinary action. Failing to follow the procedures and requirements outlined in this plan, including but not limited to infection control procedures, exclusion procedures, testing, and training requirements, contributes to an unsafe work environment and may be subject to disciplinary procedures outlined in the campus Injury Illness Prevention Program.

This plan shall be accessible to all employees in the workplace; furthermore, in alignment with the Injury Illness Prevention Program (IIPP) workplace hazards including the reporting of safety concerns is essential to a safe work environment. Employees are protected in reporting these and similar concerns without fear of reprisal. Safety concerns can be reported directly to supervisors or to Environmental Health and Safety and all employees are encouraged to report hazards in the workplace using the provided procedures.

Additional resources and instructions, including frequently asked questions are accessible on the CSUSB COVID-19 website.

Compliance:

Standard progressive disciplinary measures in accordance with the applicable personnel policy or labor contract will result when campus community members fail to comply with applicable regulations, campus policy, and/or departmental safety procedures. All personnel will be given instruction and an opportunity to correct unsafe behavior.

- Employees will be disciplined in accordance with progressive disciplinary procedures outlined by the applicable personnel policy or labor contract.
- Faculty members will be disciplined for unsafe practices in accordance with the Faculty Code of Conduct.
- Students not employed by the University will be disciplined for unsafe practices in accordance with the Student Code of Conduct.

Definitions

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

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

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.

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.

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

- Cleared, approved, or authorized, including in an Emergency Use Authorization (EUA), by the United States Food and Drug Administration (FDA) to detect current infection with the SARS-CoV-2 virus (e.g., a viral test); and
- (B) Administered in accordance with the authorized instructions.
- (C) To meet the return-to-work criteria set forth in subsection 3205(c)(5), a COVID-19 test may be both self-administered and self-read only if another means of independent verification of the results can be provided (e.g., a time-stamped photograph of the results).

Essential Employees: Employees who perform tasks which cannot be performed remotely and cannot be paused.

Exposed group: means all employees at a work location, working area, or a common area at work, within employer-provided transportation covered by section 3205.3, or residing within housing covered by section 3205.2, where an employee COVID-19 case was present at any time during the infectious period. A common area at work includes bathrooms, walkways, hallways, aisles, break or eating areas, and waiting areas. The following exceptions apply:

- For the purpose of determining the exposed group, a place where persons momentarily pass through, without congregating, is not a work location, working area, or a common area at work.
- 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.

- If the COVID-19 case visited a work location, working area, or a common area at work for less than 15 minutes during the infectious period, and the COVID-19 case was wearing a face covering during the entire visit, other people at the work location, working area, or common area are not part of the exposed group.
- An exposed group can include employees from other employers depending on who was present.

Face covering: means a surgical mask, a medical procedure mask, a respirator worn voluntarily, or a tightly woven fabric or non-woven material of at least two layers that completely covers the nose and mouth and is secured to the head with ties, ear loops, or elastic bands that go behind the head.

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

A. For COVID-19 cases with symptoms:

   1. The infectious period is a minimum of 24 hours from the day of symptom onset.
   2. COVID-19 cases may return to work if:

      a. 24 hours have passed with no fever, without the use of fever-reducing medications, **AND**
      b. Their symptoms are mild and improving.

B. For COVID-19 cases without symptoms:

   1. There is no infectious period for the purpose of isolation or exclusion.
   2. If symptoms develop, the criteria for symptomatic cases will apply.

Isolation: Separates those who are sick (exhibiting symptoms, or a positive test result) from those who are not sick.

Quarantine: Separates those who may have been exposed to a disease to see if they develop symptoms consistent with the disease

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.

Remote Employees: Employees with an active and approved telecommuting agreement who are able to perform tasks and/or assignments remotely.

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

Outbreak: three (3) or more employee COVID-19 cases within an exposed group, visited the worksite during their infectious period at any time during a 14-day period.

Major Outbreak: The presence of twenty (20) or more employee COVID-19 cases in an exposed group visited the workplace during their high-risk period within a 30-day period and continues until there are no new cases in an exposed workplace for a 14-day period.

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

General Overview

This appendix is intended to align with the Cal/OSHA COVID-19 Standard, specifically Title 8 Section 3205 which was adopted in February 2023 and remains in effect until February 2026. The following document aims to incorporate requirements, guidance, and best practice from these standards, as well as county public health information to help the campus community stay healthy and aware of recent changes specific to the spread of novel Coronavirus (SARS-CoV-2). As more information is learned about SARS-CoV-2 and its variants, these requirements may change to provide the best level of protection.

Roles and Responsibilities

In addition to the roles and responsibilities defined in the IIPP, the following responsibilities apply to COVID-19. All roles and responsibilities shall remain consistent with the current IIPP.

Supervisors:

In addition to the responsibilities defined in the IIPP, Managers and supervisors are responsible for the following:

- Monitoring department safety conditions and implementing changes in response to exposures when directed or identified.
- Ensuring that all employees receive a copy of the worksite repopulation safety plan and have the relevant training documented.
- Maintaining safe work practices in the workplace and ensuring they are being followed.
- Timely reporting COVID-19 cases to Risk Management through the COVID-19 Reporting Tool;
- Providing resources to employees that includes leave options provided through Human Resources, referral to their primary care physician, and campus COVID-19 resources which are available on the University website for information and updates related to COVID-19.

Employees:

In addition to the responsibilities defined in the IIPP, employees are expected to follow all applicable guidelines and policies implemented by the institution once those policies have been formally approved. This includes but may not be limited to the following:

- Self-monitoring symptoms on a regular basis, and before coming to the workplace.
- Wear suitable face masks (surgical mask or better) when required to do.

- Maintaining and observing all applicable infection control measures that have been implemented by the University both at the campus and department levels.
- Complete the COVID-19 Reporting Tool upon receiving a positive COVID-19 test result or possible close contacts.
- Ensure regular communication with your supervisor and Risk Management regarding your return.
- Report to the appropriate administrator, or EH&S, any possible COVID-19 hazards. Reports can be submitted anonymously or directly and in alignment with the campus IIPP, all reports regarding safety are encouraged to be reported without any fear of reprisal. Anonymous and direct safety concerns can be reported on the EH&S website by using the Report a Safety Concern button.

Non-Employees or Third Parties:

Including but not necessarily limited to visitors, vendors, contractors, and other employers; these groups shall follow all current requirements defined by CSUSB.

Risk Management:

In addition to the responsibilities defined in the IIPP, Risk Management is primarily responsible for the following.

- Investigating reported cases to determine if workplace conditions could have contributed to the risk of COVID-19 and providing relevant information to the Local Health Officer in a timely manner, when required to do so.
- Notifying employees of a possible worksite exposure once identified and confirmed.
  - Student Health Center supports the investigation of student reports and any associated communications.
- Offering testing options to employees when required in alignment with regulatory standards.
- Ensuring the confidentiality and availability of records outlined in this plan to regulatory and health officials when requested.
- Immediately report serious illness or death as defined under Title 8 section 330(h) to Cal/OSHA

Environmental Health and Safety

In addition to the responsibilities defined in the IIPP, Environmental Health and Safety (EH&S) will be responsible for the following:

- Conducting periodic inspections (as needed) of work areas to ensure that applicable control measures are maintained.
- Providing training resources in support of this plan when applicable.
- Monitoring the effectiveness of this plan and control measures, making updates where required.

Risk Assessments

The risk of spreading COVID-19 increases among larger populations where examples of community spread have been observed. The following section will help in assessing risk related to COVID-19 transmission in the worksite.

Infection Control Procedures

The core function of the Injury Illness Prevention Program (IIPP) is the identification of hazards in the workplace and advising employees of these hazards to prevent workplace injuries and illnesses. One way that we can articulate the methodology to preventing workplace injuries and illnesses once they have been identified is through the NIOSH standard hierarchy of controls which can help us to understand which controls would be most effective in preventing COVID-19, as well as when to use them. Pandemic conditions are dynamic, and the use of specific safety controls will reflect current regulation and guidance. The University will continue to evaluate if controls need to be implemented when there is an outbreak and are required by law to implement them in the applicable worksite when there is a major outbreak.
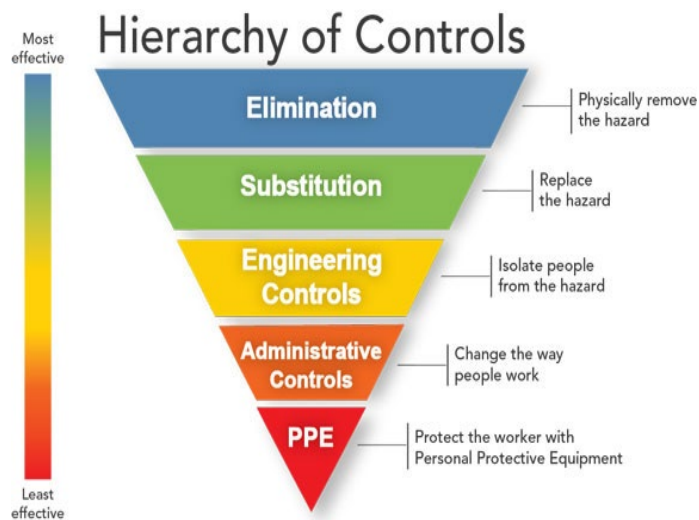
As shown in *Figure 2*, the Hierarchy of Controls is a methodology that helps us to understand the relationship between different control methods and their effectiveness at addressing a hazard. Controls at the top of the hierarchy are more effective than controls on the bottom. As it pertains to COVID-19 infection control procedures, we aim to apply this same methodology to understand what methods will be most effective in preventing the spread of COVID-19. Controls change based on the risk profile of COVID-19 cases in a particular area. The Campus will evaluate and/or implement various controls when an outbreak (3 or more cases) or major outbreak (20 or more cases) occurs.

Figure 1: NIOSH Hierarchy of Controls

Elimination:

Traditionally speaking, elimination is the most effective way to prevent exposure to a hazard and its effectiveness can also be applied to COVID-19 prevention as well. Key elements in hazard elimination as it pertains to infection control includes encouraging the campus community to test for COVID-19 if similar symptoms present, and follow proper procedures in the event of receiving a positive test. Avoid coming to the worksite when sick, especially with fever as this increases the likelihood of being contagious to others.

Substitution:

Currently there are no effective methods to substitute the hazard of COVID-19, however some industry experts believe that the use of vaccinations and boosters may be one example of hazard substitution because those who have been fully vaccinated and boosted will have a significantly lower risk of acquiring

COVID-19 or serious disease and if exposed, may experience less-severe symptoms. Medical professionals are strongly recommending the seasonal flu vaccine to further reduce the risk of illness in the workplace since flu-like symptoms are like those consistent with COVID-19.

Engineering Controls:

Implementing controls which are typically in the form of physical barriers or other comparable engineering means can reduce the risk of exposure because they are installed solutions that work automatically and without regard to individuals remembering to use them.

Examples of engineering controls includes but is not necessarily limited to the following:
   a. Using only disinfectants that have been approved by the EPA as being effective against COVID-19 as defined by EPA List-N.
        a. Facilities Management custodial teams focus on disinfecting high-touch and high traffic areas such as building entrances, elevator buttons, and lobbies, in occupied buildings on a regular basis.
   b. HVAC considerations are coordinated by Facilities Management who specialize in this area. The way rooms are air balanced, the percentage of fresh outside air, and the types of filters being used can be helpful controls to reduce the spread of COVID-19 and these parameters must be appropriately managed in response to frequent weather changes.
        a. CSUSB continues to utilize MERV-13 air filters whenever possible and if an HVAC system will not support a MERV-13 filter, the highest efficiency-rated filter will be used.
        b. CSUSB maximizes the percentage of outside air whenever possible and when the current Air Quality Index is less than 100 or when doing so does not create a hazard of excessive heat or poor air quality.
        c. Portable HEPA air filtration units or other options will be assessed in consultation with Facilities Management and/or EH&S when ventilation systems do not meet the CSU Mechanical Review Board recommendations which align with NIOSH and other industry guidelines for COVID-19. If units are deemed necessary, they will be purchased by the University.
   c. Hands-free devices such as product dispensers, actuators, openers, and sensors have been widely implemented throughout the campus to assist with access and reduce additional high-contact surfaces.
   d. Water-bottle filling stations remain in use.

Administrative Controls:

Trainings, policies, or procedures are administrative controls that implement changes to reduce the risk of exposure. There are many examples of administrative controls which are very effective at controlling the spread of COVID-19, especially when they are used in coordination with the other types of control methods and procedures outlined above.

Face Masks: While the campus policy no longer requires the use of face masks indoors, face masks are strongly recommended by CDPH as a source control. Additionally, face masks must be worn when notified by Risk Management to do so in response to an exposure or outbreak conditions as outlined by this plan. The use of face coverings shall not be discouraged.

Cough and sneeze etiquette are important infection control procedures that help to reduce the risk of spreading disease. Common examples of this are to cough or sneeze into a tissue or your sleeve. Proper hand hygiene should be used immediately after coughing or sneezing.

Hand Hygiene: Proper hand hygiene is essential and reinforces cough and sneeze etiquette. Individuals are encouraged to wash their hands often with soap and warm water for at least 20-seconds, or to sanitize their hands with an alcohol-based sanitizer (>60 alcohol) when soap and water are not immediately available. These procedures should be used after touching high-contact surfaces, shared equipment, using the restroom, coughing or sneezing, or touching your face. Avoid touching your face with unwashed hands.

Personal Protective Equipment (PPE):

PPE is often considered to be the least effective way to protect an individual from a hazard because it is often regarded as the last line of defense for a protective measure. PPE for COVID-19 is generally only required for first responders and health care providers because they may have direct occupational exposure due to their assigned job functions in situations when engineering and administrative controls may be less feasible.

Respiratory Protection Requirements

Use of a respirator, including disposable filtering facepiece respirators such as N95 masks for non-voluntary use conditions requires enrollment in the respiratory protection program and shall be worn in alignment with 8 CCR §5144 of the respiratory protection standard and manufacturer recommendations when required. In the event of a major outbreak, employees of an exposed group will be provided a respirator for use. A brief summary of the program requirements is listed below, and it is recommended that inquiries be sent to EH&S to discuss program enrollment.

1) **Medical Questionnaire**- Completion of an online medical questionnaire is needed to determine if the prospective wearer is medically fit to wear a respirator.
2) **Respirator Training**- Completion of the training can often be done online and is intended to provide an overview of basic type of respirators, protection factors, and how to don (put on) and doff (take off) the respirator.
3) **Fit Test**- The fit test is an in-person assessment where an EH&S specialist will test the respirator to determine if the respirator fits the wearer properly. Fit tests are specific to the make, model, and size respirator and must be repeated for changes in equipment.

Voluntary Respirator Use

All employees may request the use of N95 filtering facepiece for voluntary use when working indoors to further reduce the risk of exposure to COVID-19. Respirators are provided to employees at no cost and may be requested and used without fear of reprisal. In the event of an outbreak, employees in an exposed group will be notified of their right to request a respirator for voluntary use.

Employees who request the voluntary use of an N95 will be provided with five (5) disposable N95 respirators for voluntary use per request and are limited to one request per week. To request N95 respirators for voluntary use, please submit a request using the provided link.

Reporting a COVID-19 Case or Exposure

CSUSB has established protocols for reporting positive tests of COVID-19 and potential exposures. CSUSB or an authorized representative will investigate COVID-19 exposures to determine if workplace conditions could have contributed to the exposure and what can be done to reduce exposure to COVID-19 hazards, if applicable.

CSUSB will report information about COVID-19 cases at the workplace to the local health department whenever required by law and shall provide any related information requested by the local health department. Individuals who have tested positive for or have been exposed to COVID-19 must follow the procedures outlined below. Additional resources and instructions, including frequently asked questions are accessible on the CSUSB COVID-19 website.

A. Employees and Students: Please report positive cases and/or exposures using the COVID-19 Reporting Tool. Employees should seek medical care through their regular health care provider. Students can call the Student Health Center at (909) 537-5241 for instructions on self-care or to make a telehealth or in-person appointment. Acutely ill students should seek medical care from a healthcare provider in their area.

B. Supervisors or Managers should instruct employees to leave the workplace and/or stay home upon reporting:
   - Symptoms consistent with COVID-19,
   - Have received a positive test,
   - Awaiting results of a test due to close contact with a confirmed case,
   - Close contact with a confirmed positive case, or
   - Are suspected to have COVID-19.

   Note: Users should not use the Reporting Tool to report an exposure based on a notification from Risk Management or the Contact Tracing Team unless you feel you may have had close contact with a positive case.

Required Reporting Information

The following information is required to submit a completed report for a suspected COVID case. The reporting tool requires a CSUSB login however, the tool allows reports to be submitted on behalf of another community member or guest.
   - Applicable campus affiliation, (Faculty, Staff, Student)
   - Contact information for the Case and the immediate supervisor,
   - Any relevant details of the Case,
   - Confirm if symptoms presented and when,
   - Confirm the date last on campus, if the Case was on campus within the last 10 days, and/or within 2 days before symptoms presented,
   - Identify any areas on campus visited- include the dates, times, specific locations, and any close contacts.
   - Confirm if the Case is currently off work or off campus,
   - Confirm if there was a close contact,
   - Confirm if the Case has been tested for COVID-19. If known, provide the testing date,

Reporting on Behalf of a COVID-19 Case

Under certain circumstances, members of the campus community may need to report a COVID-19 case on behalf of another person. The COVID-19 reporting tool allows CSUSB community members (students and employees) to submit a report on behalf of a COVID-19 positive case. This reporting mechanism should include the name and contact information for the case to ensure CSUSB is able to contact the case for additional information.

Notification of Close Contacts

Based on the information provided in the report, CSUSB will attempt to contact any close contacts within the exposed group. Notifications are processed in several different ways, depending on what information is provided to CSUSB via the reporting tool.

Confirmed close contacts who are listed by a positive case by name will receive a direct communication from Risk Management or authorized agent with exposure instructions. In the absence of confirmed close contacts, Risk Management will send an exposure notification to all occupants of the same general work area where close contacts were likely to occur.

COVID-19 Testing

Testing opportunities are available through the MyTurn website and at-home test kits may also be used to meet return to work criteria. Testing is available at no cost and during paid time, to all employees who have had close contact in the workplace. A summary of these instructions and other applicable employee benefits are provided upon submission in the Reporting Tool or notification from Risk Management.

Starting in late September 2024, every home in the US is eligible for free at-home test kits. This program has re-emerged after previously expiring and may only be available for limited time. You may order them online and they will be delivered to your address while supplies last. California also offers free testing in the community. Visit the following website https://covid19.ca.gov/get-tested/ to make your appointment today!

Testing during an outbreak:

In the event of an outbreak, testing shall be provided to all employees in the exposed group based on the following procedures during paid time except the following:

- Employees who were not present at the worksite during the relevant 14-day period(s); or
- COVID-19 cases who did not develop COVID-19 symptoms after returning to work based on return-to-work criteria

Testing during a major outbreak:

In the event of a major outbreak, employers are required to provide COVID-19 testing twice per week to all employees present in the exposed workplace during the applicable 30-day period and who remain at the workplace until the provision is no longer applicable.

Exclusion of COVID-19 Cases

All COVID-19 cases are to be excluded from the workplace until the return-to-work requirements outlined below have been met. This section is applicable to employees who have had a close contact and will be excluded from the workplace in alignment with CDPH requirements.

Employees excluded from work under this section will have the following protections as if the employee had not been removed from their job.

    a. Employee's earnings, wages, seniority
    b. Employee rights and benefits, including rights to former job status

Wages due under this section 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 section are subject to enforcement through procedures available in existing law. If it is determined that one of the exceptions below is applicable, the employee shall be informed of the denial and the applicable exception in alignment with current campus procedures.

    a. This section does not apply when it has been determined through the exposure investigation that the close contact is not work related.
    b. This section does not limit any other applicable law, employer policy, or collective bargaining agreement that provides for greater protections.
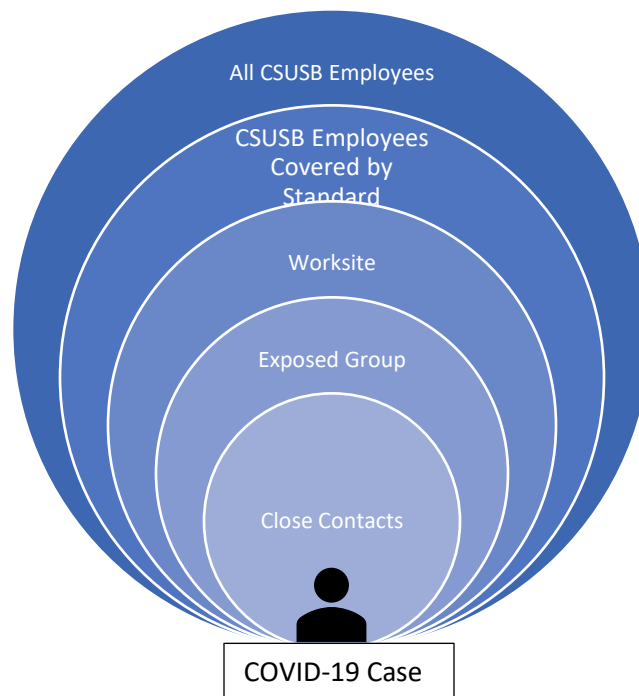   c. At the time of exclusion, the employee shall be provided with information on applicable benefits

Figure 2: Illustration depicting the scope and populations defined by Cal/OSHA's COVID-19 Emergency Temporary Standard. Each category is further defined below.

    i. **All Employees**: Accounts for all CSUSB employees
    ii. **Employees Covered by the COVID-19 Standard**: all CSUSB employees not otherwise covered under the Aerosol Transmissible Diseases Standard defined by 8 CCR §5199.

iii. **Worksite**: For the limited purposes of COVID-19 prevention, a worksite is defined as a building, store, facility, or other location where a COVID-19 case was present during the infectious period. It does not apply to buildings, floors, or other locations of the employer that the COVID-19 case did not enter.
iv. **Exposed Group**: All employees at a work location, working area, or common area as defined by this plan where an employee COVID-19 case was present at any time during the infectious period.
v. **Close Contacts**: In areas with less than 400,000 cf air, close contacts include all individuals within the space when the positive case was present. This includes the two days preceding their positive test or symptoms. Areas larger than 400,000 cf air can rely on 6 feet to gauge close contacts. Close contacts still consider being present for 15-min over a 24 hour period.

Exclusion Procedures

The following procedures are used to determine the criteria for cases that will be excluded from the worksite. These procedures are based on several key factors including but not limited to vaccination status, recent test results, and type of test administered.

Required Exclusion from Campus:

1. Any individual who has a positive PCR test for SARS-CoV-2, OR
2. Individual diagnosed by a physician as having COVID-19 regardless of test results, OR
3. An unvaccinated individual who has had close contact with someone who tested positive for SARS-CoV-2

Return to Work Criteria

California Department of Public Health and the CDC have identified clear criteria for when employees who have been exposed to a positive case, have received a positive COVID test result, or have symptoms consistent with COVID-19 are considered safe to return to the worksite. Based on this guidance, it is safe to be around others once the criteria have been satisfied; however, it is important to note that every case is unique, and a determination will be made based on the specific circumstances of that case. A summary of the criteria is listed below.

For employees with symptoms:

1. The employee must be excluded from the workplace until the following criteria are met.
   a. Fever-free for at least 24 hours without the use of a fever-reducing medication, AND
   b. Their symptoms are mild and improving.
2. Employees must wear a well-fitting mask around others through Day 10 from symptom onset to protect others.
   a. You may discontinue wearing a mask earlier than Day 10 after two sequential negative tests, at least one day apart.

Considerations for Travel
The following align with current CDC travel advisories:

Recommendations from CDPH for airline travel: https://covid19.ca.gov/travel/

Whether your travel is domestic or international, follow CDC travel guidelines for testing, masking, and quarantine:

- Stay up-to-date with your vaccines

- Wear a high-quality mask in poorly ventilated areas such as transportation hubs, particularly if you have a weak immune system or higher risk for severe disease.

- Don't travel while sick

- Try to keep test kits on-hand and test if you experience symptoms

- Seek treatment if you test positive

- Check for any specific requirements for the country you intend to visit

- Self-monitor after travel and test as necessary.

Training and Communication

All employees must complete the returning to work during COVID-19 training prior to receiving approval to return to work. Training may be supplemented with additional information as necessary to ensure the elements of this plan have been implemented. Additional training for site-specific activities such as custodial and health care operations may be required when appropriate.

Training Topics:

- COVID-19 information, preventing the spread, routes of transmission, recognizing the signs and symptoms, and when to seek medical attention.
- Procedures for hazard reporting
- Information related to COVID-19 benefits
- Campus COVID-19 prevention plan
- Daily health screening procedures
- Source Control Procedures
- Infection Control Procedures
- Reporting Procedures
- COVID-19 Testing, and how to access testing and vaccination.
- Return to work criteria
- Overview and acknowledgement of the COVID Prevention Plan: this serves as a method to demonstrate to regulatory officials that the COVID Prevention Plan has been provided to employees as required.

Recordkeeping

The following section outlines the records that are maintained in alignment with 8CCR section 3205.

COVID Prevention Plan

The COVID Prevention Plan, including records pertaining to the implementation of the plan will be maintained by EH&S as required. The plan will be provided to all employees.

COVID Cases

CSUSB will maintain records of all COVID-19 cases which will include 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-19 test. Any medical information shall be kept confidential. The information shall be made available to employees, authorized employee representatives, or as otherwise required by law, with personal identifying information removed.

Training Records

EH&S shall maintain the associated training records pertaining to employee COVID-19 training completion.

References

- Cal/OSHA Emergency Standard Cal/OSHA ETS FAQ
- CA COVID-19 Website
- CSUSB Injury Illness Prevention Program (IIPP)