



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:

Michael DeSalvio

Director, Environmental Health and Safety

April 28, 2021



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.

*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.

In alignment with the CSUEU/CSU Memorandum of Understanding regarding Vaccination Verification Program (VVP) for Cal/OSHA ETS Compliance, employees may voluntarily complete an attestation in accordance with the Vaccination Verification Program at which time they will be considered fully vaccinated and would follow procedures accordingly. All employees who have not completed an attestation are regarded as unvaccinated for the purposes of this plan and shall follow the appropriate safety procedures. Employees can complete their vaccination verification through their [MyCoyote Portal](#). Instructions are available in Appendix B of this plan.

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

COVID-19 Case: A person who meets any of the following three criteria. A person is no longer considered a COVID-19 case once the applicable criteria outlined in this plan has been satisfied.

- Has received a positive COVID-19 test, as defined by this plan; or
- Has a positive COVID-19 diagnosis from a licensed health care provider; or
- Is subject to a COVID-19-related order to isolate issued by a local or state health official; or
- 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: Potentially infectious material that may contain SARS-CoV-2, including airborne droplets, small particle aerosols, and airborne droplet nuclei, which most commonly result from a person 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: 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 determined the person's symptoms were caused by a known condition other than COVID-19.

COVID-19 Test: A viral test for SARS-CoV-2 that is approved by, or has an Emergency Use Authorization by the FDA, and is administered in accordance with the FDA requirements.

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.

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

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 high-risk exposure period. An exposed group may include employees from more than one employer.

Face Covering: 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, including KN95 type masks. A face covering has no visible holes or openings and must cover the nose and mouth. A suitable face covering does not include a scarf, ski mask, balaclava, bandana, turtleneck, collar, or single layer of fabric.

Fully Vaccinated: People are considered fully vaccinated in the following scenarios.

- The employer has documented that a person has received, at least 14 days prior, either a second dose in a two-dose COVID-19 vaccine (e.g. Pfizer or Moderna), or a single dose COVID-19 vaccine (e.g. Johnson & Johnson), and;
- The vaccine is FDA approved or has an emergency use authorization if vaccinated in the United States, or

- The vaccine is listed for emergency use by the World Health Organization (WHO) for persons vaccinated outside the United States.

High-Risk Exposure Period: a period where COVID-19 cases are most likely to spread the virus to others.

- 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 medication; 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 the first positive test for COVID-19 was collected.

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: 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. KN95 type facepieces do not qualify as a respirator.

Remote Employees: During a stay at home order, employees whose tasks and/or assignments can be completed remotely and do not require access to the campus to perform work.

Outbreak: The presence of three (3) or more employee COVID-19 cases within an exposed group visited the worksite during their high-risk exposure 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 COVID-19 prevention, a worksite is defined as a building, store, facility, agricultural field, or other location where a COVID-19 case was present during the high-risk period. It does not apply to buildings, floors, or other locations of the employer that the COVID-19 case did not enter.

Worksite Common Areas: A common area includes bathrooms, walkways, hallways, aisles, break or eating areas, and waiting areas at the worksite excluding the following:

- For the purposes 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.
- If the COVID-19 case was part of a distinct group of employees who are not present at the worksite at the same time as other employees,
- 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.

General Overview

This appendix is intended to align with the Cal/OSHA COVID-19 Emergency Temporary Standard which was adopted on November 30, 2020 and readopted on June 17 as well as current industry guidance from California Department of Public Health as well as local guidance specific to San Bernardino and Riverside Counties in an effort prevent the spread of novel Coronavirus (SARS-CoV-2).

SARS-CoV-2, the virus that causes COVID-19, is a novel coronavirus that was previously unknown prior to its discovery in December 2019. While some who are infected with the virus may be asymptomatic, symptoms are considered to present with 2-14 days after exposure and those with certain medical conditions, regardless of age, may be at higher risk for developing more severe symptoms. It is important to recognize the signs and symptoms of COVID-19 which include but are not necessarily limited to the following:

- Fever or 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
- Diarrhea

While many patients are able to recover without the need for medical attention, it's important to be familiar with symptoms that may warrant medical attention. It's recommended to call your health care provider, 911 or call ahead to the local Emergency Room (ER) to alert them that you are coming in so special instructions can be provided by hospital staff if applicable. Showing up to the ER unannounced is not recommended as this can increase the risk of spreading COVID-19 to others. The following symptoms are examples that require medical attention:

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

While the primary route of exposure for SARS-CoV-2 is direct contact, aerosols created by talking, vocalizing, coughing, sneezing, etc. can travel farther than six feet and these aerosols can remain airborne for several hours. The risk of acquiring the virus by touching a contaminated surface is less likely and often mitigated by appropriate controls. The following controls are considered to be the most effective methods to prevent the spread of COVID-19.

- Maintaining good hand hygiene,
- Proper cough and sneeze etiquette,
- Wearing a cloth face covering over the nose and mouth,
- Avoid touching your face with unwashed hands, and
- Follow all posted workplace procedures such as social distancing, designated entry/exit points, and administrative controls.

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:

- Perform periodic assessments of the work area to ensure alignment with all applicable standards, guidelines, as well as campus procedures and the implementation of those procedures at the departmental level;
- Submitting a worksite repopulation safety plan and ensuring that all requirements of the plan have been implemented prior to reopening;
- Ensuring that all employees receive a copy of the worksite repopulation safety plan and have the relevant training documented.
- Designating a safety coordinator who will oversee the implementation of the plan and work with EH&S when changes occur.
- Maintaining healthy operations in the work place;
- 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;
- Wearing cloth face coverings when required to do so, unless a reasonable accommodation has been provided. Reasonable accommodations can be requested through Human Resources;
- Maintaining and observing all applicable infection control measures that have been implemented by the University including but not limited to social distancing measures, hand hygiene and cough etiquette, avoiding crowded spaces, and refraining from coming to work when sick or awaiting results of a test as a result of a potential exposure;
- Complete the COVID-19 Overview Training prior to being approved to come to campus;
- Complete a daily health screening before entering the campus or off-campus center. Provide evidence of completed health screening upon request;
- Complete the COVID-19 Reporting Tool if the employee receives a positive COVID-19 test result or possible close contacts.
- Continue to communicate with the Risk Management during a COVID-19-related leave in an effort to identify when return to work criteria has been satisfied.

- Follow the appropriate disinfection plan for the department (if applicable) to ensure shared or specialized equipment is disinfected after use using materials provided by the campus.
- 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, including completing the Daily Health Screen before coming to campus.

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;
- Notifying employees of a possible worksite exposure within one business day where required by law;
- Reviewing site-specific work plans and making meaningful recommendations to improve the plans and employee safety;
- Offering testing to exposed employees when required;
- Ensuring the confidentiality and availability of records outlined in this plan to regulatory and health officials.
- 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:

- Reviewing site-specific work plans and making meaningful recommendations to improve the plans and employee safety;
- Conducting periodic inspections of work areas to ensure that applicable control measures are maintained;
- Providing training resources in support of this plan;
- Monitoring the effectiveness of this plan and control measures, making updates where required.

Preparing to Return to Work

In an effort to facilitate the return of on-site work activities, it is essential that we are able to understand the new hazards that COVID-19 poses in the workplace. To best understand these risks, it is equally essential that the workplace is assessed prior to any return to work effort, and periodically thereafter. To assist in this regard, CSUSB has implemented a return to work procedure which is intended to guide employees, specifically managers and supervisors in the order of operations to receiving approval for returning to work once appropriate.

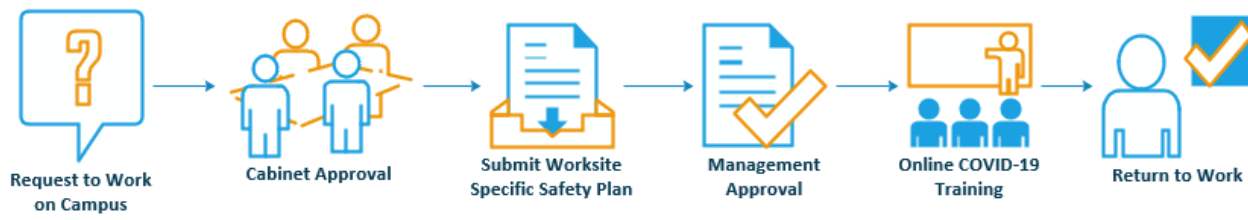


Figure 1: Summary of CSUSB return to work approval process. Cabinet approval is required prior to submitting a worksite specific safety plan for management approval.

Worksite Repopulation Safety Plan

Each department must complete a worksite-repopulation safety plan which is completed by the appropriate manager and outlines the basic requirements for return to work approval. Safety plan templates have been created by EH&S to ensure all safety requirements are in place. One of these requirements is the completion of a hazard assessment which we will briefly review in the next section. Other important elements of the site-specific plan include the implementation of the following protocols that should best align with the operational needs of the department.

- Implementation of a detailed risk assessment for site-specific control measures
- Implement individual control measures
- Implement a cleaning and disinfection protocol
- Establish maximum occupancy requirements for affected spaces Implement appropriate social distancing guidelines
- Offer PPE (when needed) and cloth face coverings to employees
- All employees and visitors must complete the Daily Health Screen before coming to campus
- All employees must complete the COVID-19 return to work training provided through CSU Learn.

All campus events must have a safety plan on-file and approved by the appropriate department administrator or campus sponsor. In addition, all events must be registered through [Special Events and Guest Services](#) and have an EMS Registration Number.

EH&S has provided templates for the [Worksite Safety Plan](#) which includes examples of a sample plan on the EH&S website. Additional resources related to the safety plan templates is available in **Appendix A**.

EH&S is available to consult with departments in the preparation of their worksite safety plans by submitting a [service request](#) through the EH&S Website. During the safety plan review process department administrators are reminded of their responsibility to provide a copy of the completed plan with their employees. Copies of completed safety plans can be requested by contacting [EH&S](#). During periodic walkthroughs conducted by EH&S, represented staff are invited to participate in the assessment process and identify any concerns they may have regarding COVID-19 hazards in the worksite.

Risk Assessments

The risk of spreading COVID-19 increases among larger populations where examples of community spread have been observed. Supervisors are asked to conduct a risk assessment during the return to work planning that will help to identify the risk level for their employees. The risk levels have been identified below for reference:

- Lower Risk: No close contact between employees and general public
- Medium Risk: Close contact between employees and general public

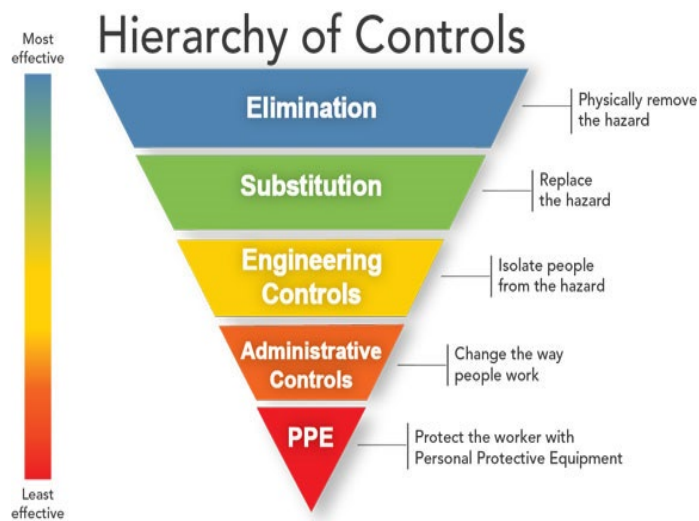
Identification of Risk Factors

Generally speaking, the risk of spreading COVID-19 increases the closer individuals interact with others as well as when the duration of those interactions increases. A good example of this may be large department meetings where attendees may be in close proximity for an extended period of time. It is necessary to review the work area as well as critical business functions to best understand the risks associated with common activities as well as those activities that cannot be rescheduled, modified, or adjusted. Risks can be mitigated through the use of infection and source control procedures.

Employees with certain medical or other conditions may have an increased risk of severe COVID-19 illness can request accommodations by contacting Human Resources. The control procedures outlined below are effective at controlling the spread of COVID-19 however, it's essential to monitor controls and make adjustments as needed to ensure controls remain effective. In the event of an outbreak, EH&S will conduct a review of the COVID-19 prevention plan as well as the appropriate worksite and document the assessment to determine any appropriate corrective actions. The assessment will be repeated every 30-days that the outbreak is in effect.

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 in an effort 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 2: 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 include the following:

- Encouraging employees and the general public to stay home when they are sick or have received a positive case (regardless of symptoms). Individuals not fully vaccinated but have had close contact with a confirmed case help to eliminate exposure to the hazard when they stay home, too.
- Limiting in-person interactions whenever possible can also be an effective method of elimination. Examples of this can include working remotely, avoiding crowded or populous areas, and relying on virtual meetings whenever possible.
- Eliminating or reducing shared equipment can help to exclude opportunities for disease transmission. Eliminating items like staplers, hole punches, microwaves, coffee makers, and reusable flatware can help in reducing the spread of COVID-19.
 - a. Not all shared equipment can be eliminated. Larger items like copiers may need to be frequently used by multiple people and should be included in the department disinfection plan. By considering the latter, having adequate disinfecting supplies nearby will be helpful in disinfecting the shared equipment between uses.
- Employees who will be accessing the campus or off-site locations shall complete a daily health screen through the MyCoyote app or [MyCoyote Portal](#). Approvals are good for a 24-hour period and must be submitted each day prior to coming to campus. Daily health screens are required for

anyone who will be working on campus or visiting campus. The screening takes less than 5 minutes to complete and will provide feedback to the employee based on their responses. Departments must advise any vendors or third parties of their obligation to complete the daily health screen prior to coming to campus using the following link:

- a. https://csusb.az1.qualtrics.com/jfe/form/SV_88saclqETW1amyx
- b. **Approved to come to campus:** Employees who receive an approval to be on campus will receive a copy of their approval via e-mail and shall provide the approval upon request.
- c. **Not Approved to come to campus:** Employees who are not approved to be on campus will receive a copy via e-mail. Additionally, the supervisor and Risk Management will be notified. Depending on the responses in the submission, Risk Management may implement reporting procedures as required by state and local requirements. Users are directed to complete the COVID-19 Reporting Tool in the event they are not cleared to come to campus.

Substitution:

Currently there are no effective methods to substitute the hazard of COVID-19, however some industry experts believe that vaccination may be one example of hazard substitution because those who have been fully vaccinated will have a significantly lower risk of acquiring COVID-19 and if exposed, may have less-severe symptoms.

Several vaccines have been developed and are being deployed to our communities.

Medical professionals are strongly recommending the seasonal flu vaccine to further reduce the risk of illness in the workplace since flu-like symptoms are similar to 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:

- 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 will focus on disinfecting high-touch and high traffic areas such as building entrances, elevator buttons, and lobbies, in occupied buildings on a daily basis.
 - b. Departments approved to return to campus must have adequate supplies to support their disinfection procedures as a functional part of the worksite specific safety plan.
- Implementing physical barriers or partitions which are cleanable and solid to separate employees from the general public and distancing workstations to separate employees during work hours.

- HVAC considerations are coordinated by Facilities Management who specialize in this area. Generally speaking, the manner in which 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.
 - a. CSUSB utilizes 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
 - 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.
- Implementing hands-free devices when possible. These may include soap or sanitizer dispensers, trash receptacles, as well as automatic doors if available.
- Water-bottle filling stations remain accessible for buildings that are actively being used.

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 considered to be 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.

- **Cloth Face Coverings:** The University will provide employees with cloth face coverings at no cost following the CDC and OSHA guidance. If the employees need to perform tasks with higher risk, the department should consult EH&S to identify if personal protective equipment is necessary. In alignment with current University Policy, all employees will wear a suitable face covering indoors.
 - a. Face coverings will be provided to all employees who are not fully vaccinated and ensure they are worn when indoors, or in vehicles, or when required by orders from the California Department of Public Health.
 - b. Face coverings when required shall be clean and undamaged, and are properly worn over the nose and mouth.
 - c. When employees are required to wear face coverings, the following exceptions apply:
 1. When an employee is alone in a room or vehicle,
 2. While eating or drinking at the workplace if:
 - i. Employees are at least six feet apart, and
 - ii. The amount of supplied outside air has been maximized to the extent feasible.
 3. When employees wearing respirators required by the employer and used in compliance with section 5144 of the respiratory protection standard.
 4. Employees who cannot wear face coverings due to a medical or mental health condition or disability, or who are hearing-impaired or communicating with a hearing-impaired person.

- i. Employees who are exempted under this item, shall wear an effective non-restrictive alternative, such as a face shield with a drape on bottom, if their condition or disability permits it.
 - 5. Specific tasks which cannot feasibly be performed with a face covering. This exception is limited to the time period in which such tasks are actually being performed and is subject to consultation with EH&S and documentation in the Worksite Repopulation Plan
- d. An employee not wearing a face covering due to a medical exemption or due to a specific task which cannot be performed with a face covering, and not wearing a non-restrictive alternative, shall maintain six feet from all other persons unless the unmasked employee meets one of the following conditions. Testing may not be used as an alternative to face coverings when otherwise required.
 - 1. Fully vaccinated or,
 - 2. Tested at least weekly in alignment with this plan
- e. Employees shall not be prevented from wearing a face covering unless it is determined to create a safety hazard, such as interfering with the safe operation of equipment.
- f. Face covering requirements must be communicated to non-employees.
- g. Employees may be exempt from wearing a face covering under certain circumstances such as those with a medical (including mental health) condition, or disability that prevents wearing a face covering, and persons who are hearing impaired, or communicating with a person who is hearing impaired, where the ability to see the mouth is essential for communication. Employees seeking an exemption for wearing a face covering should contact the Human Resources Office at 909-537-5138.
- h. Cloth face coverings are not considered personal protective equipment (PPE)
- i. [Specific guidance related to cloth face coverings](#) is available through the CDC website.
- j. In the event of an outbreak, all employees of an exposed group shall wear face coverings when indoors, or when outdoors and less than six feet apart from another person unless one of the exceptions in item (c) above applies.

Summary of Face Mask Applicability

The following summary tables outline the basic requirements for the use of face masks based on vaccination status as well as other factors such as work setting, and physical distance.

Where Can I Eat or Drink Without My Mask?

Setting:	Physical Distance	Unvaccinated	Fully Vaccinated
Indoors	< 6 ft	Not Permitted 3205 (c)(6)(D)(2)	Permitted
	> 6 ft	Permitted* 3205(c)(6)(D)(2)	Permitted
Outdoors	-	Permitted	Permitted

Table 1: The table above provides a summary of where employees can eat without face masks based on the June 17 readoption of the Cal/OSHA COVID-19 Emergency Temporary Standard.

* With 6 feet physical distancing and max outside air supply settings where feasible.

Where Can I Work Without a Face Covering?

Person	Unvaccinated Employees		Fully Vaccinated Employees	
	Other	Healthcare	Other	Healthcare
Settings:				
Outdoors	Yes 3205(c)(6)(A)	No CDPH per 3205 (c)(6)(B)	Yes	No CDPH per 3205 (c)(6)(B)
Indoors				
Symptom Screening Activities	No 3205 (c)(2)(B)	No 3205 (C)(2)(B)	Yes 3205 (c)(2)(B)	No CDPH per 3205 (c)(6)(B)
Alone in Room	Yes 3205 (c)(6)(D)(1)	Yes 3205 (c)(6)(D)(1)	Yes	Yes CDC per 3205 (c)(6)(B)
In a room with only Fully Vaccinated persons	No 3205 (c)(6)(A)	No 3205 (c)(6)(A)	No Campus Policy	No Campus Policy
In a room with both fully and non-vaccinated persons	No 3205 (c)(6)(A)	No 3205 (c)(6)(A)	No Campus Policy	No Campus Policy

Table 2: Summary of face mask requirements based on work setting and others who may be in the immediate area.

Can I Remove My Face Mask in a Vehicle?

Person	Unvaccinated Employees		Fully Vaccinated Employees	
	Other	Public Transit	Other	Public Transit
Settings:				
Transportation Method:				
Alone in vehicle	Yes 3205 (c)(6)(D)(1)	No CDPH per 3205 (c)(6)(B)	Yes	No CDPH per 3205 (c)(6)(B)
In vehicle with others	No 3205 (c)(6)(A)	No CDPH per 3205 (c)(6)(B)	Yes	No CDC per 3205 (c)(6)(B)

Table 3: Summary of face mask requirements based on transportation methods.

Major and Minor Outbreaks: Where Can I Work Without a Face Covering?

Person	Population of the Outbreak Exposed Group			
	Unvaccinated Employee		Fully Vaccinated Employee	
	Other	Healthcare	Other	Healthcare
Setting				
Outbreaks:				
Outdoors (< 6 ft.)	No 3205.1(d)	No 3205 (c)(2)(B)	No 3205.1(d)	No CDPH per 3205(6)(B)
Indoors	No 3205.1(d)	No 3205.1(d)	No 3205.1(d)	No 3205.1(d)
Alone in Room	Yes 3205(c)(6)(D)(1)	Yes 3205(c)(6)(D)(1)	Yes 3205(c)(6)(D)(1)	Yes 3205(c)(6)(D)(1)
Eating ≥ 6ft Distance	Yes 3205(c)(6)(D)(2)	Yes 3205(c)(6)(D)(2)	Yes 3205(c)(6)(D)(2)	Yes 3205(c)(6)(D)(2)

Table 4: Summary of face mask requirements based on outbreak conditions, work setting, and physical distance by vaccination status.

- **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 followed after touching commonly touched surfaces, shared equipment, using the restroom, coughing or sneezing, or touching your face. Avoid touching your face with unwashed hands.
- **Physical Distancing:** Observing or practicing social distancing is very effective at reducing the risk of exposure to COVID-19 because it reduces or eliminates the risk of close contact. It is important to observe all posted markings, maximum room occupancies and directional signage. Physical distancing should not be used to replace the use of cloth face coverings and is most effective when practiced with additional controls as outlined in this section.
 - a. In the event of an outbreak, the requirement for physical distancing between employees of an exposed group will be evaluated and in the event six feet of physical distancing is not feasible, the use of cleanable solid partitions of sufficient size will be evaluated for use.
 - b. In the event of a major outbreak, all employees not wearing a respirator required by the employer shall maintain six feet of physical distancing. Solid, cleanable partitions shall be installed if six feet physical distancing cannot be maintained.
- **Disinfection Procedures:** Disinfecting spaces or shared equipment is an effective administrative control.
 - a. Facilities Management custodial teams and contractors will continue to focus on disinfecting high-touch and high traffic areas (entrances, hallways, elevator buttons, and lobbies) on a daily basis. Products used for surface disinfection meet the EPA criteria for use against COVID-19 and are applied as directed for maximum efficacy. Additionally, classrooms are stocked with disinfectant wipes to facilitate additional cleaning as desired by building occupants.
 - b. Classroom chairs, tables and other common surfaces will continue to be disinfected daily by custodial services. Campus community members will be responsible for the appropriate cleaning of shared or specialized classroom or laboratory equipment and personal belongings, including any items that will be passed between individuals during a class.
 - c. Risk Management will notify Facilities Management to provide disinfection of an indoor area used by a COVID-19 case during the high-risk exposure period if the area will be used by another employee within 24 hours of the COVID-19 case being reported to the University.
 - d. Avoid sharing workstations, phones, other work supplies, or office equipment wherever possible. Avoid sharing PPE that cannot be disinfected prior to re-use.
 - e. The shared office equipment such as copiers, fax machines, printers, telephones, keyboards, staplers, surfaces in reception areas, shared workstations, etc., are disinfected between shifts or uses, whichever is more frequent, with disinfection wipes/spray.

- f. Cleaning and disinfection of the employee's own workstation and equipment are to be completed during working hours as part of the employee's job duties.

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. PPE may also apply to employees such as custodial operations for specific procedures such as terminal cleaning in certain circumstances but is generally not required when engineering and administrative controls are in place.

PPE that is adequate against COVID-19 includes the following and varies based on the type of operation and when task appropriate:

- a. N95
- b. Surgical Masks
- c. Procedure Masks
- d. Face Shields
- e. Protective eyewear
- f. Coveralls

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 voluntary 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

Employees who have not been fully vaccinated are encouraged to 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 who have not been fully vaccinated upon request, at no cost and may be requested 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, if they are not fully vaccinated. The following conditions apply to the voluntary use of N95 respirators.

1. Instructions on how to wear the respirator;
2. Instructions on performing a seal check according to the manufacturer's instructions each time the respirator is worn, and the fact that facial hair interferes with the respirator's ability to form a seal to the user's face.
3. Submit an online request for an N95; in alignment with the following section and
4. Provided with a copy copy of Appendix D of the respiratory protection standard 8 CCR §5144.

Resource Requests

Resources and supplies such as face coverings, sanitizers, and sanitizer wipes, are available to departments upon request. To request supplies, supervisors can submit a resource request using ICS Form 213. The form is accessible on the [EH&S COVID-19 Planning website](#). Departments should only acquire disinfecting supplies by submitting the ICS 213 form which once fulfilled, are provided to the department at no cost. Please do not purchase disinfecting materials from outside sources as these may not be approved materials and not be compatible with materials currently being used on campus.

Reporting a COVID-19 Case or Exposure

CSUSB has established protocols for reporting positive tests of COVID-19 and potential exposures. CSUSB or 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. If you have tested positive, or become aware of a member of the campus community who has tested positive, please follow the appropriate notification process. 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:

- 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.
- 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.

Required Reporting Information

The following information is required to submit a completed report for a suspected COVID case.

- Applicable campus affiliation,
- 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 14 days, and/or within 2 days before symptoms presented,
- Identify any areas on campus visited- include the dates, times and the specific locations,
- 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 and outcome,
- Confirm if any affected areas have been cleaned by trained staff.

Notification of Close Contacts

CSUSB will notify all employees who may have had COVID-19 exposure in the worksite and their authorized representatives within one business day, including independent contractors and other employers at the workplace during a high-risk exposure period.

Formal contact tracing will be performed by the respective County Department of Public Health unless otherwise directed, however CSUSB will investigate potential exposures in alignment with regulatory requirements and make notifications to those who may have been exposed as required by state and local guidance. Notifications do not include identification of the source of exposure or any confidential information. Cases will be reported to local health officials as required in alignment with local and state guidance. Written notifications to employees may include but not limited to the following methods:

- Personal service,
- Email,
- Text Message (if reasonably anticipated to be received within one business day of sending).
- Verbal notification may be used if CSUSB feels an employee has not received the notification, or if there is determined to be limited literacy in the language used in the notice. Such verbal notifications will be made as soon as practicable, in a language that is understandable by the employee.

Written notifications will be sent to the following:

- All employees at the worksite during the high-risk exposure period.
- Independent contractors and other employers at the worksite during the high-risk exposure period.
- Authorized Employee Representatives: within one business day of identifying a COVID-19 case, the authorized representative of any employees at the worksite during the high-risk exposure period will be notified.

Local Department of Public Health (DPH) contact information:

San Bernardino Campus

- Public Health Contact Information:
San Bernardino County DPH Communicable Disease
1-800-722-4794 option 0; or direct line: 909-387-9144)

Palm Desert Campus

- Public Health Contact Information:
Riverside County DPH Communicable Disease
(951) 358-5107

COVID-19 Testing

CSUSB recognizes that persons with asymptomatic or pre-symptomatic infection have been shown to contribute to community-based transmission of COVID-19. Effective screening, and testing regardless of signs and symptoms, is a key component to a layered approach to preventing the transmission of disease. Screening allows early identification and isolation of persons who are asymptomatic, pre-symptomatic, or only have mild symptoms and who might be unknowingly transmitting the virus. Any employees who are not fully vaccinated will be subject to periodic on-campus COVID-19 screening or testing. COVID-19 testing

Exceptions:

1. Employees who were fully vaccinated before the close contact and have not developed COVID-19 symptoms, as documented via the attestation outlined in the Vaccination Verification Program (VVP)
2. COVID-19 cases who returned to work by meeting the return to work requirements specified in this plan or,
3. Have remained free from COVID-19 symptoms for 90 days after the initial onset of COVID-19 symptoms, or
4. Have never developed COVID-19 symptoms for 90 days after the first positive test.

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
- Employees who were fully vaccinated before the outbreak and have not developed symptoms; or
- COVID-19 cases who did not develop COVID-19 symptoms after returning to work based on return to work criteria, or no testing is required for 90 days after the initial onset of COVID-19 symptoms, or for COVID-19 cases who never developed Symptoms, 90 days after the first positive test.

The testing shall meet the following requirements:

- 1) Testing will be offered immediately when an outbreak is determined and then tested again one week later. Exposed employees must meet the return to work criteria outlined in this plan and the quarantine period cannot be shortened by a negative test result.
- 2) After the first two tests as outlined in the subsection above, employees in the exposed group will be provided with weekly testing until an outbreak is no longer applicable.
- 3) Additional testing may be required as deemed necessary by the employer, Cal/OSHA, or local health officials.

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 with the following exceptions.

- a. Employees who were fully vaccinated before the close contact and who do not develop COVID-19 symptoms; and
- b. COVID-19 cases who returned to work pursuant to the return to work criteria outlined below and have remained free of COVID-19 symptoms for 90 days after initial onset of symptoms, or who never developed symptoms for 90 days after the first positive test.

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

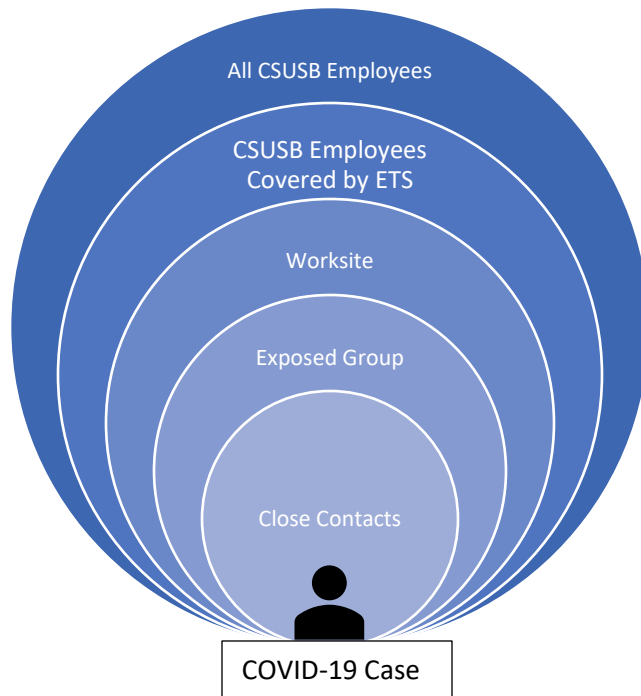


Figure 3: Illustration depicting the scope and populations defined by Cal/OSHA's COVID-19 Emergency Temporary Standard. Each category is further defined below.

- i. **All Employees:** Accounts for all CSUSB employees
- ii. **Employees Covered by the Emergency Temporary Standard (ETS):** 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, agricultural field, or other location where a COVID-19 case was present during the high-risk 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 high-risk exposure period.
- v. **Close Contacts:** Those 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. Does not include employees who wore a respirator in compliance with 8 CCR §5144.

Once the close contacts have been identified, these contacts can be further defined using the process outlined below.

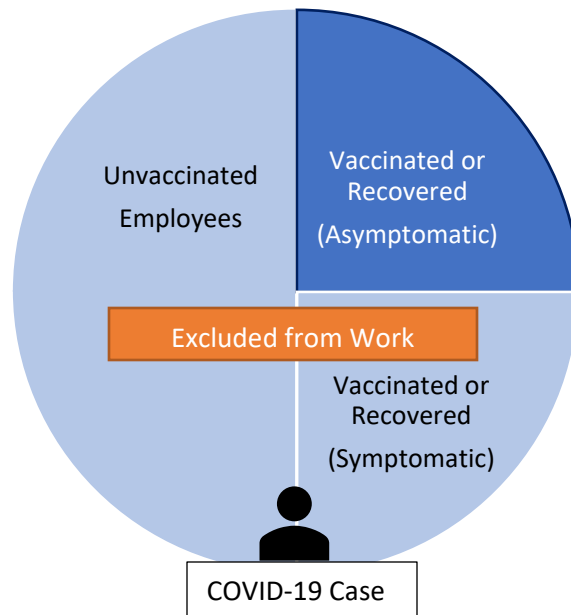


Figure 4: In alignment with 8 CCR §3205 (c)(9) – (10), the following is an illustration depicting how close contacts are further defined by vaccination status to determine employees who must be excluded from the worksite until return to work criteria has been met. For the purposes of this plan, fully vaccinated or recovered employees do not need to be excluded from the worksite unless COVID-19 symptoms present.

Disinfection of Campus Spaces

Areas or spaces used by a someone known or presumed to have COVID-19 will be closed and isolated for a minimum of 24-hours before cleaning and disinfecting the space. This minimum holding time aligns with industry-specific guidance from the California Department of Public Health and is sufficient to ensure that any potentially infectious aerosols have dissipated from the area. In this example, minimal PPE is required but can be utilized as a precautionary measure if other applicable engineering and administrative controls remain in active use. The prevailing need for PPE under this example should be to meet the recommendations in the Safety Data Sheets (SDS) for any materials or products being used.

Cleaning and disinfecting campus spaces is performed by trained staff or an approved contractor using an EPA-registered product effective against COVID-19. If the 24-hour holding time is determined to not be feasible, additional precautions will be implemented to ensure staff are protected against potential exposure through additional engineering or administrative controls or use of additional PPE.

Employees will be notified in advance of any special precautions and additional training provided as needed to ensure a safe work environment. Training may include but not necessarily limited to the appropriate and safe use of PPE, COVID-19 specific safety procedures, and chemical-specific training such as handling instructions, minimum contact time, and precautions outlined in the appropriate Safety Data Sheet (SDS).

Employees are responsible to follow their department’s disinfection plan which includes but may not be limited to disinfecting shared equipment such as phones, office supplies, specialized equipment, and workstations using disinfection supplies provided by the campus for such purpose.

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.

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

- Everyone must stay at home if they exhibit COVID-19 symptoms. If anyone develops COVID-19 symptoms while on campus, they should immediately notify their supervisor and leave campus.
- Those who have tested positive for COVID-19 must not be on campus until it is safe to be around others.
- - **Symptomatic COVID-19 Cases** (have symptoms) –
 - At least 10 days have passed since symptoms first appeared,
 - At least 24 hours have passed since a fever of 100.4 or higher has resolved, without the use of fever-reducing medication; and
 - Other COVID-19 symptoms have also improved.
 - **Asymptomatic COVID-19 Cases** (positive tests with no symptoms) –
 - A minimum of 10 days has passed since first positive test (sample collected)

Note: A negative test result shall not be required for an employee to return to work.

Ending Quarantine: Quarantining separates those who may have been in close contact with a positive case to see if they develop symptoms consistent with the disease.

- If the employee will not have further close contact, the employee may discontinue quarantine after 10 days from the date of last contact.
- If the employee lives with a lab confirmed case, but can avoid further close contact – the last day of quarantine is 10 days from when the person with COVID-19 began home isolation.
- If the employee is under quarantine and had additional close contact with someone who has COVID-19 – the last day of quarantine is determined by the date of most recent close contact with a person who has COVID-19, plus an additional 10 days for quarantine.

- If the employee lives with someone who has COVID-19 and cannot avoid continued close contact– the last day of quarantine is determined based on the date the person with COVID-19 ends home isolation, plus 10 additional days.

Employees with close contact who have since developed symptoms must follow the isolation procedures outlined above unless the following two are true:

- The person tested negative for COVID-19 using a polymerase chain reaction (PCR) COVID-19 test with specimen taken after the onset of symptoms; and
- At least 10 days have passed since the last known close contact; and
- The person has been symptom-free for at least 24 hours, without using fever-reducing medications.
- Fully vaccinated people who have had an exposure do not need to quarantine but must self-monitor their health and follow the appropriate procedures if symptoms present.

Note: A negative test result shall not shorten a quarantine period.

Considerations for Travel

The following align with current [CDC travel advisories](#):

Regardless of vaccination status, do NOT travel if you were [exposed to COVID-19, you are sick, you test positive for COVID-19](#), or you are waiting for results of a COVID-19 test. Learn when it is [safe for you to travel](#). Don't travel with someone who is sick.

Domestic Travel Recommendations for Unvaccinated People

Delay travel until you are fully vaccinated. If you are not fully vaccinated, you must follow CDC's [recommendations for unvaccinated people](#).

- **Before you travel:**
 - Get tested with a viral test 1-3 days before your trip.
- **While you are traveling:**
 - Wear a mask over your nose and mouth. [Masks are required](#) on planes, buses, trains, and other forms of public transportation traveling into, within, or out of the United States and in U.S. transportation hubs such as airports and stations.
 - Avoid crowds and stay at least 6 feet/2 meters (about 2 arm lengths) from anyone who is not traveling with you.
 - Wash your hands often or use hand sanitizer (with at least 60% alcohol).
- **After you travel:**
 - [Get tested with a viral test](#) 3-5 days after travel **AND** stay home and self-quarantine for a full 7 days after travel.
 - Even if you test negative, stay home and self-quarantine for the full 7 days.
 - If your test is positive, [isolate](#) yourself to protect others from getting infected.

- If you don't get tested, stay home and self-quarantine for 10 days after travel.
- Avoid being around people who are at [increased risk for severe illness](#) for 14 days, whether you get tested or not.
- Self-monitor for COVID-19 symptoms; isolate and get tested if you develop symptoms.
- Follow all [state and local](#) recommendations or requirements.

Domestic Travel Recommendations for Fully Vaccinated People

People who are [fully vaccinated](#) with an FDA-authorized vaccine or a vaccine authorized for emergency use by the World Health Organization can travel safely within the United States.

If you are [fully vaccinated](#), take the following steps to protect others if you travel:

- **During Travel**

- Wear a mask over your nose and mouth. [Masks are required](#) on planes, buses, trains, and other forms of public transportation traveling into, within, or out of the United States and in U.S. transportation hubs such as airports and stations.
- Avoid crowds and stay at least 6 feet/2 meters (about 2 arm lengths) from anyone who is not traveling with you.
- Wash your hands often or use hand sanitizer (with at least 60% alcohol).

- **After Travel**

- Self-monitor for COVID-19 symptoms; isolate and get tested if you develop symptoms.
- Follow all [state and local](#) recommendations or requirements.

You do NOT need to get tested or self-quarantine if you are fully vaccinated or have recovered from COVID-19 in the past 3 months. You should still follow all other travel recommendations.

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 prevention plan
- Daily health screening procedures
- Source Control Procedures
 - Hand Hygiene
 - Cough and Sneeze Etiquette
 - Cloth Face Coverings
 - Recommended for non-fully vaccinated employees when outdoors if six feet physical distancing between people cannot be maintained.
 - Face coverings can be requested at no cost and can be worn at the worksite regardless of vaccination status, without fear of retaliation.
 - Importance of staying home when ill
- Infection Control Procedures
 - Administrative and Engineering Controls
 - Personal Protective Equipment
 - PPE effective against COVID-19, use and limitations, and when it is appropriate for use.
 - Procedures for requesting voluntary use of N95 respirators without fear of reprisal and at no cost to the employee.
 - How to wear the respirator
 - How to perform the seal check each time the respirator is worn.
- 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.

Vaccination Verification Program

Employees may elect to submit a signed attestation of vaccination status to submit to CSUSB. These records will be maintained in accordance with the ETS and information will be shared with appropriate administrators who have a specific business need-to-know which employees are fully vaccinated for the purposes of administering workplace safety rules/procedures.

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 \(November 30, 2020\)](#)
- [Cal/OSHA Emergency Standard Readoption \(June 17, 2021\)](#)
- [Cal/OSHA Interim Guidance](#)
- [CDPH Industry Guidance for Institutions of Higher Education](#)
- [CDPH Guidance on Face Coverings](#)
- [Responding to COVID-19 in the Workplace](#)
- [CSUSB Health and Safety Requirements \(August 20, 2020\)](#)
- [CSUSB Injury Illness Prevention Program \(IIPP\)](#)

Addendum A: Requirements for Employer-Provided Housing

This section does not apply to units housing only one employee, or units in which all residents are fully vaccinated.

CSUSB provides housing to employees related to their employment and can be categorized with the following groups.

- **Student Leaders:** includes Resident Assistants, Academic Mentors, and Program Coordinators who receive room and board as their compensation for their role.
- **Area Coordinators for Residential Education (ACORES)-** professional staff who live-in and manage the functions and supervision of a residential community; ACORES are provided with an on-campus apartment as part of their employment compensation.
- **Faculty In Residence (FIR)-** CSUSB full-time faculty who live in and support residential students academically through programming, study sessions, workshops, etc. FIRs are provided with on-campus apartments as part of their role.

Housing Assignments

In an effort to reduce the risk of COVID-19 between cohorts, the following considerations will be given in the following order when determining housing assignments.

1. Residents who usually maintain a household together outside of work, such as family members, shall be housed in the same housing unit without other persons.
2. Residents who work in the same crew or work together at the same worksite shall be housed in the same housing unit without other persons.
3. Employees who do not usually maintain a common household, work crew, or worksite shall be housed in the same housing unit only when no other housing alternatives are possible.

Physical Distancing

When more than one person occupies a single residence, the premises must be of sufficient size and layout to permit at least six feet of physical distancing between residents. This includes housing units, shared common areas and other areas of the premises.

- Beds must be placed at least six feet apart in all directions and positioned to maximize the distance between sleepers' heads. This can be accomplished by alternating the sleeping direction for adjacently placed sleepers.
- Maximize the quantity and supply of outdoor air and increase filtration efficiency to the highest MERV rating compatible with existing ventilation system(s).

Face Coverings

The employer will provide face coverings to residents so they may be used in accordance with campus requirements.

Cleaning and Disinfecting

- Housing units, kitchens, bathrooms, and common areas shall be cleaned and disinfected once per day to prevent the spread of COVID-19. These services shall be performed in a manner which protects the privacy of the residents.
- Ensure that unwashed dishes, drinking glasses, cups, utensils, and similar items are not shared between residents.
- Cleaning and disinfecting supplies may be provided to residents in single occupancy rooms or apartments with clear instructions on how to use those products as well as the types of commonly touched surfaces to disinfect.

Screening

- Residents shall report COVID-19 symptoms in alignment with campus procedures as outlined in this plan.

COVID-19 Testing

- Testing shall be provided in accordance with this plan.

Isolation and Quarantine

Residents who have tested positive for COVID-19 or who have developed symptoms consistent with COVID-19 shall isolate in accordance with the requirements in this plan. The employer shall effectively isolate cases as follows:

- Isolate cases away from other occupants.
- Provide exposed residents with a private bathroom, sleeping area, cooking, and eating facility.
- Provide isolation cases with a private bathroom, sleeping area, cooking, and eating facility not shared by any non-COVID-19 case occupants.
- Ensure that any personal identifying information regarding COVID-19 cases or persons with symptoms is kept confidential.
- No special considerations are required for the handling or treatment of trash associated with quarantine or isolation cases.
 - Residents should be reminded that sharps should not be disposed of in the trash. If necessary, residents can be provided with liners to collect their trash and place it outside their door at a specific time for collection.
 - Trash can be disposed of through regular municipal trash service.
- Quarantine or isolation shall end in accordance with this plan.

Appendix A: Template Worksite Safety Plans

The following templates have been provided for specific types of campus operations.

- [Offices and Administrative Areas](#)
- [Laboratories and Research Areas](#)
- [Special Events and Outdoor Activities](#)

Safety plans are reviewed and approved at the department level by the appropriate department administrator and AVP or Dean. Approved plans must be filed with EH&S. Please follow all instructions noted on the plan template.

Appendix B: Employee COVID-19 Vaccine Self-Certification Instructions

Please follow the steps below to complete a COVID-19 Vaccine Self-Certification.

1. Login to the [My Coyote Portal](#)
2. Click on the Employee COVID-19 Vaccine Self-Certification tile



Figure 5: Tile icon in the MyCoyote Portal for employee COVID-19 Vaccine Self-Certifications.

3. Review Section I of the form. Make the appropriate selection from the provided options and complete the required fields.
4. Review and certify the statement in Section II.
5. Click "Submit"