Safety, Health & Sustainability | Programs



COVID-19 Prevention Program

I. Policy

It is the policy of California State University San Marcos to maintain, insofar as can reasonably be expected, a campus environment for faculty, staff, students, and the public that will not adversely affect their health and safety nor subject them to avoidable risks of accidental injury or illness. CSUSM also requires compliance where the word "shall" is used and offers guidance when the word "should" is used.

The purpose of this program is to outline the CSUSM procedures to identify potential COVID-19 exposure hazards and mitigate these hazards to prevent the spread of COVID-19 on campus.

II. Authority & Accountability

8 CCR §3205-3205.4

8CRR §3203

Any campus community member or volunteer who discriminates, harasses, or retaliates against another member of the campus community for wearing or not wearing a face covering or fails to adhere to the mitigation measures noted below is in violation of this program. If a contractor, vendor, or visitor discriminates, harasses, or retaliates against a member of the campus community for wearing or not wearing a face covering or fails to comply with campus protocol, they may be barred from campus owned or leased property and have their business relationship with the campus suspended or terminated.

III. Scope

This program applies to all CSUSM employees, students, and visitors who come on campus except for those employees covered under the Aerosol Transmissible Disease Infection Control Plan. (At this time, only specific Student Health & Counseling Services employees are covered under the infection control plan.)

IV. Definitions

COVID Management Team: the COVID Case Management Team is responsible for receiving and tracking COVID-19 cases and coordinating response activities.

Close Contact:

- Someone who shares the same indoor airspace of 400,000 or fewer cubic feet per floor for a
 cumulative total of 15 minutes or more over a 24-hour period. For large indoor spaces greater
 than 400,000 cubic feet per floor, someone who was within 6 feet of a person infected with
 COVID-19 for a cumulative total of 15 minutes or more over a 24-hour period with someone
 who has COVID-19.
- 2. In large indoor spaces greater than 400,000 cubic feet per floor (such as open-floor-plan offices, warehouses, large retail stores, manufacturing, or food processing facilities), close contact is defined as being within 6 feet of the infected person for a cumulative total of 15 minutes or more over a 24-hour period during the confirmed case's infectious period.

Spaces that are separated by floor-to-ceiling walls (e.g., offices, suites, rooms, waiting areas, bathrooms, or break or eating areas that are separated by floor-to-ceiling walls) must be considered distinct indoor airspaces.

COVID-19 (Coronavirus Disease 2019): the disease caused by SARS-CoV-2 (severe acute respiratory syndrome coronavirus 2).

COVID-19 case: a person who:

- A. Has a positive "COVID-19 test" as defined in this section; or
- B. Has a positive COVID-19 diagnosis from a licensed health care provider; or
- C. Is subject to a COVID-19-related order to isolate issued by a local or state health official; or
- D. Has died due to COVID-19, in the determination of a local health department or per inclusion in the COVID-19 statistics of a county.

COVID-19 hazard: 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, 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 determines the person's symptoms were caused by a known condition other than COVID-19.

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

- A. 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);
- B. Administered in accordance with the authorized instructions; and
- 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).

Exposed Group: all employees at a work location, working area, or a common area at work, where an employee COVID-19 case was present at any time during the high-risk exposure period. A common area at work includes bathrooms, walkways, hallways, aisles, break or eating are as, waiting areas, employer provided transportation and housing.

The following exceptions apply:

- A. For the purpose of determining the exposed group, a place where persons momentarily pass through while everyone is wearing face coverings, without congregating, is not a work location, working area, or a common area at work.
- B. If the COVID-19 case was part of a distinct group of employees who are not present at the workplace at the same time as other employees, for instance a work crew or shift that does not overlap with another work crew or shift, only employees within that distinct group are part of the exposed group.
- C. If the COVID-19 case visited a work location, working area, or a common area at work for less than 15 minutes during the high-risk exposure period, and the COVID-19 case was wearing a face covering during the entire visit, other people at the work location, working area, or common area are not part of the exposed group.

NOTE: An exposed group may include the employees of more than one employer. See Labor Code sections 6303 and 6304.1.

Face covering: 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 (i.e., fabrics that do not let light pass through when held up to a light source) 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. If gaiters are worn, they shall have two layers of fabric or be folded to make two layers. A face covering is a solid piece of material without slits, visible holes, or punctures, and must fit snugly over the nose, mouth, and chin with no large gaps on the outside of the face. A face covering does not include a scarf,ski mask, balaclava, bandana, turtleneck, collar, neck gaiter, or single layer of fabric.

This definition includes clear face coverings or cloth face coverings with a clear plastic panel that, despite the non-cloth material allowing light to pass through, otherwise meet this definition and which may be used to facilitate communication with people who are deaf or hard-of-hearing or others who need to see a speaker's mouth or facial expressions to understand speech or sign language respectively.

Fully Vaccinated (Cal/OSHA): the employer has documented:

- A. A person's status two weeks after completing primary vaccination with a COVID-19 vaccine with, if applicable, at least the minimum recommended interval between doses in accordance with the approval, authorization, or listing that is:
 - 1. Approved or authorized for emergency use by the FDA;
 - 2. Listed for emergency use by the World Health Organization (WHO); or

- 3. Administered as part of a clinical trial at a U.S. site, if the recipient is documented to have primary vaccination with the active (not placebo) COVID-19 vaccine candidate, for which vaccine efficacy has been independently confirmed (e.g., by a data and safety monitoring board) or if the clinical trial participant at U.S. sites had received a COVID-19 vaccine that is neither approved nor authorized for use by FDA but is listed for emergency use by WHO; or
- B. A person's status two weeks after receiving the second dose of any combination of two doses of a COVID-19 vaccine that is approved or authorized by the FDA or listed as a two-dose series by the WHO (i.e., a heterologous primary series of such vaccines, receiving doses of different COVID-19 vaccines as part of one primary series). The second dose of the series must not be received earlier than 17 days (21 days with a 4-day grace period) after the first dose.

Fully Vaccinated and Up to Date (CSU Office of the Chancellor): a person's status after receiving a complete COVID-19 vaccine series authorized by the FDA, or listed as a two-dose series by the WHO, with booster once they become booster eligible.

Isolation: the practice of separating sick people infected with COVID-19 from people who are not infected.

Isolation Period: (Updated 1/2024 CDPH)

- A. Stay home if you have COVID-19 symptoms, until you have not had a fever for 24 hours without using fever reducing medication AND other COVID-19 symptoms are mild and improving.
 - a. If you do not have symptoms, you should follow the recommendations below to reduce exposure to others.
- B. Mask when you are around other people indoors for the 10 days after you become sick or test positive (if no symptoms). You may remove your mask sooner than 10 days if you have two sequential negative tests at least one day apart. Day 0 is symptom onset date or positive test date.

High-risk exposure period: the following time period:

- A. For COVID-19 cases who develop COVID-19 symptoms: from two days before they first develop symptoms until all the following are true: it has been 10 days since symptoms first appeared; 24 hours have passed with no fever, without the use of fever-reducing medications; and symptoms have improved.
- B. For COVID-19 cases who never develop COVID-19 symptoms, from two days before until 10 days after the specimen for their first positive test for COVID-19 was collected.

Quarantine: the practice of separating individuals who have had close contact with someone with COVID-19 to determine whether they develop symptoms or test positive for the disease. Quarantine reduces the risk of transmission if an individual is later found to have COVID-19. Quarantine for COVID-19 should last for 14 days after the exposure has ended. Fully vaccinated individuals do not have to quarantine unless they develop symptoms following exposure to the COVID-19 case. Local, state, or federal guidance may require quarantine following travel.

Worksite/A Specific Place of Employment:

A. Worksite (8 CCR 3205):

The building, store, facility, agricultural field, or other location where a COVID-19 case was present during the high-risk exposure period.

Does **not apply** to buildings, **floors**, or other locations of the employer that a COVID-19 case did not enter, locations where the worker worked by themselves without exposure to other employees.

B. A Specific Place of Employment (CA Labor Code 3212.88):

The building, store, facility, or agricultural field where an employee performs work at the employer's direction.

Does **not include** the employee's home or residence or alternative work location chosen by the worker when working remotely.

V. Responsibilities

- A. Safety, Health & Sustainability
 - 1. Maintain the COVID-19 Prevention Program (CPP). Make the program available to affected departments.
 - 2. Provide assistance to individual departments concerning implementation of the program.
 - 3. Provide consultation regarding federal, state, and local guidance.
 - 4. Provide personal protective equipment, community protective equipment, hand sanitizer, and disinfectant products to campus departments through the Covered Cougar
 Distribution Center.
 - 5. Conduct periodic inspections of in use areas.
 - 6. Collaborate with the COVID Case Management Team during investigations of outbreaks.
- B. COVID Case Management Team
 - 1. Investigate reports of COVID-19 cases and potential exposures.
 - 2. Collaborate with the Office of Human Resources (OHR) & Faculty HR regarding communication of COVID related benefits to employees.
 - 3. Coordinate campus communication with the local health department.
 - 4. Coordinate and provide required notifications to affected employees and authorized representatives.
 - 5. Notify SHS of exposed worksites and Cal/OSHA reportable incidents in a timely manner.
- C. Office of Human Resources. CCMT will collaborate with OHR.
 - 1. Provide required notifications to employees and authorized representatives asapplicable.
 - 2. Provide required benefit information to employees and their authorized representatives as applicable.
 - 3. For employees excluded from work under 8 CCR 3205 and otherwise able and available to

work, OHR will continue and maintain an employee's earnings, seniority, and all other employee rights and benefits, including the employee's right to their former job status, as if the employee had not been removed from their job.

D. Department Supervisors and Managers

- 1. Ensure procedures prescribed herein are followed by employees.
- 2. Report COVID-19 cases and potential exposures to the COVID Case Management Team.
- 3. Disseminate required notification emails to employees when a COVID-19 case has been on campus during their high-risk exposure period.

E. Employees

- 1. Encourage to report COVID-19 symptoms, positive tests, close contacts, or quarantine needs to the COVID Case Management team, COVID-19 Self-Reporting Form.
- 2. Report COVID-19 symptoms, positive tests to their supervisor without fear of reprisal.
- 3. Complete required screening procedures.
- 4. Do not report to campus if sick without fear of reprisal.
- Stay home if you have COVID-19 symptoms, until you have not had a fever for 24 hours without using fever reducing medication AND other <u>COVID-19 symptoms</u> are mild and improving.
- 6. If exposed by a positive COVID case (on or off campus), recommend wearing a well fitted mask for 10 days from the last exposure date.

F. Students

- 1. The <u>COVID-19 Resources & Guidelines</u> website provides current information and guidelines.
- G. Communicate COVID-19 hazards to supervisors or SHS without fear of reprisal.

VI. Program

A. Communication

- 1. The form to report COVID-19 symptoms, possible close contacts, and possible COVID-19 hazards can be found here.
 - a. The <u>COVID-19 Resources & Guidelines</u> website encourages the campus community to report symptoms, exposures, and hazards.
 - b. Additional campus departments provide links to the reporting forms.
- 2. Procedures/Policies for Accommodating Employees and Students with Medical or Other Conditions That Put Them at Increased Risk of Severe COVID-19 Illness
 - a. Employees:

The Office of Human Resources coordinates with deans, managers, and divisions to

provide appropriate accommodations for employees at high risk for serious COVID illness.

b. Students:

The <u>Cougar Care Network</u>, <u>Student Health & Counseling Services</u> (SHCS), and <u>Disability Support Services</u> provide support to students with special needs who need assistance accessing virtual services.

- 3. Procedures to communicate COVID-19 hazards (exposures) and policies to employees and others on campus.
 - a. The <u>COVID-19 Resources & Guidelines</u> website provides on-campus exposure locations of COVID-19 cases and campus mitigation and prevention policies.

B. Identification and Evaluation of COVID-19 Hazards

- 1. Employee and Authorized Employee Representative participation in the identification and evaluation of COVID-19 hazards.
 - a. Area managers or MPP will be responsible for completing a workplace specific assessment of their areas to identify areas, activities and processes that could potentially expose employees to COVID-19 hazard.
 - b. Employees may report areas and circumstances of COVID hazards (i.e. potential exposure) using the <u>Report a Safety Concern</u> online form, <u>emailing SH&S</u>, or calling SH&S at 760-750-4502. Anonymous reporting is available when using the online form or calling.
 - c. Collective bargaining units participate in the identification through direct reporting of unit members concerns and through participation in the Environmental Health, Occupational & Public Safety Committee (EHOPS).

2. COVID-19 Screening

- a. Employees are required to conduct a COVID-19 symptom self-assessment prior to arriving on any University property or participating in any University-related activity. Employees may download and print the CDC Symptoms of Coronavirus (COVID-19)
 Fact Sheet for personal reference. Employees will not need to submit the screening formthrough the campus app or website. By showing up at work, all employees are confirming that they are not experiencing any COVID-19 symptoms. Employees should stay home if they are sick. Anyone who is not coming to work because of COVID-19 symptoms should notify their manager.
- b. Students, employees, visitors, and vendors reporting to campus are required to conduct a personal health assessment prior to arriving on any University property or participating in any University-related activity. Students, visitors, and vendors may download and print the <u>CDC Symptoms of Coronavirus (COVID-19) Fact Sheet</u> for personal reference. Students, visitors, and vendors will not need to submit the screening form through the campus app or website. By showing up on campus, all individuals are confirming that they are not experiencing any COVID-19 symptoms. Students, employees, visitors, and vendors should not come to campus if they are

sick.

- c. Anyone experiencing COVID-19 related symptoms may not come to the campus or participate in any University-related activity on University property. In addition, University community members who develop COVID-19 related symptoms while on University property or participating in any University-related activity must leave campus or remove themselves from a University-related activity. Any member of the University community who tests positive for COVID-19 or becomes aware that they may have been in close contact with someone who either has tested positive for or is suspected to have COVID-19 is strongly encouraged to report the positive result or exposure using the COVID-19 Self-Reporting Form.
- 3. Procedures to respond to a COVID-19 case in the workplace to prevent or reduce transmission.
 - a. Employees:

The COVID Case Management team coordinates with the employee's manager, close contacts; provide information testing and isolation; if necessary; and communicate required information to the appropriate campus community members.

b. Students:

The COVID Management team coordinates with to identify close contacts; provide information on testing and isolation, ifnecessary; and communicate required information to the appropriate campus community members.

c. Residential Students:

In addition to the above, Housing & Residential Education-Coordinates with the COVID Case Management Team to identify close contacts: provide information on testing and isolation; if necessary; and communicate required information to the appropriate campus community members.

- 4. Identify workplace-specific areas, activities and processes that could potentially expose employees to COVID-19 hazards.
 - a. The COVID-19 Response Team has coordinated a campus wide evaluation of workplaces to develop general COVID prevention procedures including instructions for a safe return, cleaning, and disinfection procedures if a COVID-19 case is identified on campus, and vehicle use procedures.
- 5. Evaluate how to maximize ventilation with outdoor air; the highest level of filtration efficiency compatible with the existing ventilation system; and whether the campus needs to provide an alternative solution for the space. This risk assessment will be conducted by SH&S, as needed and if necessary, to further reduce the risk of COVID-19 transmission.

Energy Management & Utility Services evaluated the HVAC systems throughout campus. The ventilation systems, where feasible, utilize MERV13 or higher filters. Most laboratory systems already provide 100% fresh air intake. For other indoor spaces, the intake levels

of fresh air were maximized to the extent compatible with the system.

- 6. Review applicable orders and guidance from the State of California and the local health department related to COVID-19 hazards and prevention.
 - a. CSUSM follows CDPH COVID-19 guidance.
 - b. The CSU Chancellor's Office provides updates and guidance for the entire CSUsystem.
 - c. Staff from various departments attend <u>County of San Diego Colleges and Universities</u> <u>telebriefing</u> and the CSU EHS Directors systemwide COVID update. The campus also maintains contacts with the county's epidemiology department.
- 7. Evaluate existing COVID-19 prevention controls at the workplace and the need for different or additional controls.
 - CSUSM evaluates and updates controls based on needs communicated by staff and students; changes to federal, state, and county guidance; and prevention gaps identified during case investigations.
- 8. Conduct periodic inspections as needed to identify unhealthy conditions, work practices, and work procedures related to COVID-19 and to ensure compliance with employers' COVID-19 policies and procedures.
 - a. SH&S conducts periodic walkthroughs of laboratories and other high usage areas to identify areas of concern related to COVID-19.
 - b. SH&S has added COVID-19 observations to the annual health and safety inspections for those completed during Spring, Summer and Fall 2021. These will continue as needed depending on the needs of the campus community and the regulations.
- C. Investigating and Responding to COVID-19 Cases in the Workplace
 - The CSUSM COVID Case Management Team investigates COVID-19 cases in the workplace and coordinates with the County of San Diego Health & Human Services Agency as needed.
 - 2. CSUSM takes the following actions when there has been a COVID-19 case on campus:
 - The COVID Case Management team identifies the case's last time on campus, test dates, and/or diagnosis, symptomology timeline and on campus locations during their infectious period.
 - The COVID Case Management team coordinates with the case's department manager or college and the County to determine campus members who may have had a close contact.
 - c. As applicable, the COVID Case Management team works with University Communications, Housing & Residential Education, and other staff to provide required notifications (general and/or focused) to campus members and others who may have been at the worksite and their authorized representatives as appropriate.
 - d. The campus allows employees who had a close contact in the workplace to obtain a testing kit from SH&S during working hours. The Office of Human Resources provides

information on applicable leaves and other available benefits.

- e. The COVID Case Management team works with SH&S as needed to investigate whetherworkplace conditions could have contributed to the risk of COVID-19 exposure andwhat could be done to reduce exposure to COVID-19 hazards.
- 3. Personal identifying information of COVID-19 cases or persons with COVID-19 symptoms, and any medical records required by 8 CCR §3205-3205.4 are kept confidential except when requested by the local health department, CDPH, the Division, the National Institute for Occupational Safety and Health (NIOSH), or as otherwise required by law.

D. Correction of COVID-19 Hazards

SH&S works with Facilities Development &Management (EMUS, PDC, FS) and the managers of the departments for which hazards have been identified to correct such hazards.

E. Vaccination

- Vaccinations are not mandatory. California State University San Marcos strongly
 recommends that all individuals who attend or participate in an in-person program or
 activity operated or controlled by the University follow COVID-19 vaccine
 recommendations adopted by the U.S. Centers for Disease Control and Prevention (CDC)
 and the California Department of Public Health (CDPH) applicable to their age, medical
 condition, and other relevant indications.
- 2. CSU Chancellor and University Communications on January 3, 2022,
- 3. Use VaccineFinder to locate a COVID vaccine near you.

F. Face Coverings

- 1. As of March 14, 2022, use of face coverings or 'masking' is no longer required in non-instructional indoor spaces.
- 2. When employees are required to wear face coverings, the following exceptions apply:
 - a. When an employee is alone in a room or vehicle.
 - b. While eating or drinking at the workplace, provided employees are at least six feet apart and, if indoors, the supply of outside or filtered air has been maximized to the extent feasible.
 - c. While employees are wearing respirators required by the employer and used in compliance with section 5144.
 - d. 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 hearingimpaired person. Such employees shall wear an effective non-restrictive alternative, such as a face shield with a drape on the bottom, if the condition or disability permits it.
 - e. During 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.

- 3. Face coverings continue to be strongly recommended indoors at Student Health and Counseling Services.
- 4. Employees may request masks or N95 respirators for voluntary use by submitting a resource request through the <u>Covered Cougar Distribution Center</u>.
- 5. Employees are required to wear respirators in accordance with our respiratorprogram that meet section 5144 requirements.
- 6. Face coverings for employees and students are provided through the <u>Covered Cougar Distribution Center</u> and in vending machines throughout campus. Face coverings are worn over the nose and mouth when required by orders from the CDPH or local health department. Specific guidance is provided on the <u>COVID-19 Resources & Guidelines</u> website.
- 7. CSUSM supports employees continuing to wear masks at any time and will not tolerate any reprisals or negative workplace responses including verbal harassment, teasing, or requests to justify actions. Please contact Human Resources (staff/MPPs) or Faculty Affairs (faculty) to report a concern.
- G. Other Engineering Controls, Administrative Controls, and PPE

1. Solid Partitions

At fixed work locations where the customer service areas have existing cleanable solid partitions, depending on the community served, they may choose to keep this engineering control. Per CDPH & Cal OSHA, solid partitions are no longer required for infection control of COVID-19.

2. Ventilation

In response to COVID-19, Facilities, Development and Management has implemented the following measures in accordance with Cal OSHA requirements, California Department of Public Health requirements, and recommendations made by the CDC, ASHRAE, and the Chancellor's Office:

- ✓ Analyzed and replaced all campus building HVAC filters. Most filters already had a rating of MERV 13 or 14. (MERV Minimum Efficiency Reporting Values measures how much matter passes through an air filter. MERV ratings are on a scale of one to 20 depending on the minimum size of the particles a filter can be expected to filter). In systems not designed for MERV 13 or 14, those filters were upgraded to as high a MERV rating as possible.
- ✓ Maximized the amount of outside air drawn into buildings to the extent feasible, except when the Environmental Protection Agency (EPA) Air Quality Index is greater than 100 for any pollutant or if opening windows or maximizing outdoor air by other means would cause a hazard to employees, for instance from excessive heat, cold or wildfire smoke.
- ✓ Ran building HVAC systems for longer hours so that the buildings are "flushed" two hours before and after occupancy.
- ✓ Disabled our Demand Control Ventilation systems allowing more outside air into

the buildings while purging CO2.

All of our HVAC systems go through regular preventive maintenance by FDM's highly trained, qualified technicians.

3. Cleaning and Disinfection

- a. CSUSM's cleaning and disinfection protocols will return to pre-pandemic status. The exception to this is if there is a confirmed COVID-19 case on campus, in which case enhanced cleaning procedures may be utilized depending on the risk assessment, the location and timing of the case.
- b. To the extent feasible, items that employees come in regular physical contact with such as phones, headsets, desks, keyboards, writing materials, instruments, and tools is minimized.

Any person wishing to perform additional cleaning or disinfecting of their personal workspace or equipment can obtain cleaning/sanitizing supplies by contacting the CCDC.

4. Handwashing

- a. CSUSM promotes hand hygiene activities through training, signage, guidance, websites, and accessibility.
- b. CSUSM evaluated its handwashing facilities and allows time for employee handwashing.
- c. CSUSM encourages employees to wash their hands for at least 20 seconds each time.

5. Personal Protective Equipment

- a. CSUSM evaluates the need for personal protective equipment to prevent exposure to COVID-19 hazards, such as gloves, goggles, and face shields, and provide such personal protective equipment as needed. Such evaluations are conducted by SH&S in coordination with individual departments as part of the Return to Campus work plan process.
- b. Upon request, CSUSM will provide respirators for voluntary use by unvaccinated employees who work indoors or in vehicles with more than one person in compliance with 8 CCR §5144(c)(2).
- c. SHCS provides and ensures the use of eye protection and respiratory protection in accordance with 8 CCR §5144 when employees are exposed to procedures that may aerosolize potentially infectious material such as saliva or respiratory tract fluids. At this time, such employees are covered under the Student Health and Counseling Services Aerosol Transmissible Disease Infection Control Plan.

H. Exclusion of COVID-19 Cases, Close Contact, and Exposed Group

1. The COVID Case Management Team coordinates the exclusion of COVID-19 cases and employees who had a close contact from the physical workplace with consultation from the Office of Human Resources, and in accordance with the most recent public health orders and CDC guidance.

- 2. CSUSM will exclude employees with a COVID-19 case or when three or more employee COVID-19 cases within an exposed group, as defined by subsection 3205(b)(7), visited the worksite during their infectious period at any time during a 14-day period unless a California Department of Public Health (CDPH) regulation or order defines outbreak using a different number of COVID-19 cases and/or a different time period, in which case section 3205.1 applies when the number of cases at the worksite constitutes an outbreak under CDPH's definition.
- 3. At the time of exclusion, HR will provide the employee the information on benefits.
- 4. Managers will ensure that COVID-19 cases are excluded from the workplace until the return-to-work requirements have been met.

I. Isolation

- 1. Anyone who develops symptoms or tests positive for COVID-19 is required to isolate and refrain from coming to campus They must wear a well-fitting mask for the next 10 days when around others and remain in isolation until the following conditions are met:
 - a. May end isolation if no fever for 24 hours without using fever reducing medication AND other COVID-19 symptoms are mild and improving.
 - b. May end isolation if they do not have symptoms, they should follow the 10-day masking recommendations.
- 2. After ending isolation before day 10:
 - a. Wear a mask through day 10, or;
 - b. Consider taking an antigen test. With two sequential negative tests 48 hours apart, employees may remove their mask sooner than day 10.
 - c. Watch for symptoms for 10 days after exposure. If symptoms develop within the 10-day window, immediately self-isolate and test.

J. Return to Work Criteria

- 1. The COVID Case Management Team will coordinate with the positive and determine an employee's allowable return to work date based on current CDPH guidelines.
- COVID-19 cases who do not develop COVID-19 symptoms shall not return to work during the infectious period may return back to work and should follow the 10-day masking recommendations.
- 3. COVID-19 cases who develop COVID-19 symptoms shall not return to work during the shorter of the following: the infectious period; or through 10 days after the onset of symptoms and at least 24 hours have passed since a fever of 100.4 degrees Fahrenheit or higher has resolved without the use of fever-reducing medication.
- 4. Regardless of vaccination status, previous infection, or lack of COVID-19 symptoms, a COVID-19 case shall wear a face covering in the workplace until 10 days have passed since the date that COVID-19 symptoms began or, if the person did not have COVID-19 symptoms, from the date of their first positive COVID-19 test or they two sequential

- negative tests 24 hours apart.
- 5. The requirements in (a) and (b) of this section apply regardless of whether an employee has previously been excluded or other precautions were taken in response to an employee's close contact or membership in an exposed group.
- 6. If an order to isolate, quarantine, or exclude an employee is issued by a local or state health official, the employee will not return to work until the period of isolation or quarantine is completed or the order is lifted.
- 7. Employees that travel, whether for business or personal reasons, should follow <u>CDC</u> <u>travel guidance</u> for quarantining after travel and other precautions that should be taken during travel.
- K. Multiple COVID-19 Infections and COVID-19 Outbreaks (8 CCR §3205.1)
 - 1. If three or more employee COVID-19 cases within an exposed group were present on campus during their high-risk exposure period at any time during a 14-day period, unless a California Department of Public Health (CDPH) regulation or order defines outbreak using a different number of COVID-19 cases and/or a different time period, in which case section 3205.1 applies when the number of cases at the worksite constitutes an outbreak under CDPH's definition.

2. COVID-19 Testing

- a. All employees in the exposed group will be offered testing with exceptions noted below. Such testing is available at no cost to employees during employees' working hours at the county testing site.
 - i. Employees who were not present on campus during the relevant period
 - ii. Employees who were fully vaccinated before the outbreak and who do not have COVID-19 symptoms.
 - iii. For COVID-19 cases who did not develop COVID-19 symptoms after returning to work pursuant to the exclusion section, 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.
- b. COVID-19 testing shall consist of the following:
 - Immediately upon being covered by this section, all employees in the exposed group will be offered testing, regardless of vaccination status, during employees' paid time.
 - ii. Employer shall then make testing available on a weekly basis to all employees in the exposed group who remain at the workplace.
 - iii. Employees who had close contacts shall have a negative COVID-19 test taken within three to five days after the close contact or shall be excluded and follow the return-to-work requirements of subsection 3205(c)(5) starting from the date of the last known close contact. After the first two COVID-19 tests noted above, employees who remain at the workplace shall be offered

testing continuously at least once per week,or more frequently if recommended by the local health department, until this section no longer applies.

- iv. Employees shall be offered additional testing when deemed necessary by Cal/OSHA through the Issuance of Order to Take Special Action, in accordance with title 8, section 332.3.
- c. Check the <u>COVID-19 Resources & Guidelines</u> page for more information on COVID-19 testing on campus.

3. Additional Work Practices

- a. Employees in the exposed group, regardless of vaccination status, shall wear face coverings when indoors, or when outdoors and less than six feet from another person, unless one of the exceptions previously noted applies.
- b. CSUSM will provide a notice to employees in the exposed group reminding them of their right to request a respirator for voluntary use.

4. COVID-19 Investigation, Review and Hazard Correction

During an outbreak, CSUSM will immediately perform a review of potentially relevant COVID-19 policies, procedures, and controls and implement changes as needed with the intent to prevent further spread of COVID-19. The investigation and review will be documented and include:

- a. Investigation of new or unabated COVID-19 hazards including CSUSM's leave policies and practices and whether employees are discouraged from remaining home when sick; the COVID-19 testing policies; insufficient outdoor air; insufficientair filtration; and insufficient physical distancing.
- b. The review will be updated every thirty days that the outbreak section applies, in response to new information or to new or previously unrecognized COVID-19 hazards, or when otherwise necessary.
- c. CSUSM will implement changes to reduce the transmission of COVID-19 based on the investigation and review including moving indoor tasks outdoors or having them performed remotely, increasing outdoor air supply when work is done indoors, improving air filtration, increasing physical distancing to the extent feasible, respiratory protection, and other applicable controls.

5. Ventilation

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

L. Major COVID-19 Outbreaks (8 CCR §3205.2)

If 20 or more employee COVID-19 cases within an exposed group were present on campus during their high-risk exposure period at any time during a 30-day period, the requirements below will be completed and continue until there are fewer than 3 COVID-19 cases in the exposed group detected in a workplace for a 14-day period.

1. COVID-19 Testing

- a. All employees in the exposed group will be offered testing available on a weekly basis at no cost to its employees within the exposed group, regardless of vaccination status, during employees' paid time, except for returned cases and employees who were not present at the workplace during the relevant 14-day period(s).
- b. Employees who had close contacts shall have a negative COVID-19 test taken within three to five days after the close contact or shall be excluded and follow the return-to-work requirements starting from the date of the last known close contact.

2. Face Coverings

Employees in the exposed group, regardless of vaccination status, shall wear face coverings when indoors, or when outdoors and less than six feet from another person, unless one of the exceptions in previously noted applies.

3. Respirators

- d. CSUSM will provide a respirator for voluntary use to employees in the exposed group.
- e. CSUSM will determine the need for changes to the existing respiratory protection program under 8 CCR §5144 to address COVID-19 hazards.

4. Physical Distancing and Barriers

- f. Employees in the exposed group who are not wearing a respirator required by CSUSM will maintain a distance of 6 feet from others.
- g. If six feet of distance is not feasible, then individuals will be as far apart as feasible.
- h. If an employee works at a fixed location for long periods of time, and distancing cannot be maintained, then a cleanable partition will be installed.

In addition to the practices noted in the general and outbreak sections, CSUSM will evaluate whether to halt some or all operations at the workplace until COVID-19 hazards have been corrected.

M. Reporting, Recordkeeping, and Access

- 5. The COVID Case Management team reports information about COVID-19 cases and outbreaks at the workplace to the local health department whenever required by law, and provides any related information requested by the local health department.
- 6. The-COVID Case Management team coordinates with the OHR and SHS to immediately report any COVID-19-related serious illnesses or death of an employee occurring in aplace

of employment or in connection with any employment to Cal/OSHA.

- 7. CSUSM maintains records of the steps taken to implement the written COVID-19 Prevention Program, such as training and inspection reports, in accordance with 8 CCR section 3203(b).
- 8. This written COVID-19 Prevention Program will be made available to employees, authorized employee representatives, and to representatives of Cal/OSHA immediately upon request.
- The COVID Case Management Team maintains a record of and tracks all COVID-19 cases with the employee's name, contact information, occupation, location where the employee worked, the date of the last day at the workplace, and the date of a positive COVID-19 test.
- J. COVID-19 Prevention in Employer-Provided Housing (8 CCR §3205.3)
 - 1. CSUSM does not provide employer-provided housing.
 - 2. Resident Directors and Resident Advisors lease housing from CSUSM Corporation. These units are considered private residences.
- K. COVID-19 Prevention in Employer-Provided Transportation (8 CCR §3205.4)

To the extent feasible, reduce exposure to COVID-19 hazards by recommending that departments that assign employees vehicles to:

1. Screening

The same screening procedures as those described in section B of the Program section above apply to drivers and riders of University provided transportation.

- 2. Cleaning and Disinfecting CSUSM recommends that:
 - a. All high-contact surfaces (door handles, seatbelt buckles, armrests, etc.) used by passengers are cleaned to prevent the spread of COVID-19 and are cleaned and disinfected if used by a COVID-19 case during the high-risk exposure period, when the surface will be used by another employee within 24 hours of the COVID-19 case.
 - b. All high-contact surfaces used by drivers, such as the steering wheel, armrests, seatbelt buckles, door handles and shifter, are cleaned to prevent the spread of COVID-19 between different drivers and are disinfected after use by a COVID-19 case during the high-risk exposure period, if the surface will be used by another employee within 24 hours of the COVID-19 case.
 - c. CSUSM provides sanitizing materials, training on how to use them properly, and ensure they are kept inadequate supply.

3. Ventilation Delete

CSUSM recommends-that vehicle windows are kept open, and the ventilation system is set tomaximize outdoor air and not set to recirculate air. Windows do not have to be kept

open if one or more of the following conditions exist:

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

4. Hand Hygiene

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

Responsible Manager: Regina Frasca

Responsible Department: Safety, Health, & Sustainability

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