

Covid-19 Prevention Program

Effective Date:	3/5/24
Revised Date:	3/5/24
Issuing Authority: Chief Probation Officer	

313.1 SECTION TITLE

See attachment: [Covid-19 Prevention Program Attachment 3-5-24.pdf](#)

Attachments

Covid-19 Prevention Program Attachment 3-5-24.pdf



Interoffice Memo

DATE: March 4, 2024

PHONE: [REDACTED]

FROM: VICTOR TORDESILLAS, Director
Department of Risk Management

A handwritten signature in black ink, appearing to read "V. Tordesillas".

TO: ELECTED DEPARTMENT HEADS, ASSISTANT EXECUTIVE OFFICERS, COUNTY CHIEF FINANCIAL OFFICER, DEPUTY EXECUTIVE OFFICERS AND DEPARTMENT HEADS

SUBJECT: COVID-19 PREVENTION PROGRAM – UPDATE

Effective January 9, 2024, the California Department of Public Health (CDPH) revised their recommendation for COVID-19 positive individuals to move away from five days of isolation and instead focus on clinical symptoms to determine when to end isolation, if the individual is well with no symptoms, or symptoms are mild or improving and is fever-free for 24 hours. Subsequently, Cal/OSHA adopted this guidance, updating the definition for the infectious period to reflect the CDPH update on their [FAQ](#) page.

The updated isolation and return to work criteria are:

- For COVID-19 cases with symptoms, it is a minimum of 24 hours from the day of symptom onset:
 - COVID-19 cases may return if 24 hours have passed with no fever, without the use of fever-reducing medications, AND
 - Their symptoms are mild and improving.
- For COVID-19 cases with no symptoms, there is no infectious period for the purpose of isolation or exclusion. If symptoms develop, the criteria above will apply.

To keep the COVID-19 Prevention Plan (CPP) up-to-date, Departments are asked to attach this IOM to their CPP **and/or** to make the following updates within their plan:

- Page 5 - Update the definition of Infectious Period
- Page 13 - Update the Return-to-Work criteria.
- Page 17 - Update the Additional Resources links to include Cal/OSHA's [Fact Sheet](#) and [FAQs](#).

The updated verbiage may be found in the [revised CPP](#) on the Risk Management website.

Please note that the masking guidance has not changed. Employees who are symptomatic or who test positive are still required to wear a mask for 10 days after onset of symptoms or date of positivity

Failure to comply with the Cal/OSHA regulations could result in penalties in the event Cal/OSHA initiates an investigation. As a reminder, please contact Risk Management should your department be contacted by a Cal/OSHA inspector or receive a Letter of Alleged Conditions from Cal/OSHA.

Please contact me and/or your Human Resources Business Partner with any questions regarding this new Cal/OSHA Standard.

cc: Luther Snoke, Chief Executive Officer
Human Resources Business Partners
Executive Secretaries to AEOs, DEOs and Department Heads



COVID-19 Prevention Program

Revised
April 2023

San Bernardino County

sbcounty.gov | sbccovid19.com



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Scope

This COVID-19 Prevention Plan (CPP), CCR Title 8 Sections 3205 and 3205.1 is designed to control employees' exposures to the SARS-CoV-2 virus (severe acute respiratory syndrome coronavirus 2) that causes COVID-19 (Coronavirus Disease 2019) that may occur in our workplace. The CPP shall apply until **February 3, 2025**, except for the recordkeeping, which shall apply until **February 3, 2026**. This plan applies to all employees and departments, with the following exceptions:

- Work locations with one employee who does not have contact with other people.
- Employees working from home.
- Employees with occupational exposure as defined by section 5199 (Aerosol Transmissible Disease Program), when covered by that section.
- Employees teleworking from a location of the employee's choice, which is not under the control of the employer.

Nothing in this plan is intended to limit more protective or stringent state or local health department orders or guidance.

Definitions

- **Close contact** means the following, unless otherwise defined by regulation or order of the California Department of Public Health (CDPH), in which case the CDPH definition shall apply:
 - In indoor spaces of 400,000 or fewer cubic feet per floor, a close contact is defined as sharing the same indoor airspace as a COVID-19 case for a cumulative total of 15 minutes or more over a 24-hour period during the COVID-19 case's infectious period, regardless of the use of face coverings.
 - In indoor spaces of greater than 400,000 cubic feet per floor, a close contact is defined as being within six feet of the COVID-19 case for a cumulative total of 15 minutes or more over a 24-hour period during the COVID-19 case's infectious period, regardless of the use of face coverings.
 - Offices, suites, rooms, waiting areas, break or eating areas, bathrooms, or other spaces that are separated by floor-to-ceiling walls shall be considered distinct indoor spaces. **EXCEPTION:** Employees have not had close contact if they wore a respirator required by the employer and used in compliance with section 5144.
- **COVID-19 case** means a person who has a positive COVID-19 test; 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** means potentially infectious material that may contain SARS-CoV-2, the virus that causes COVID-19. Potentially infectious materials include airborne droplets, small particle aerosols, and airborne

droplet nuclei, which most commonly result from a person or persons exhaling, talking, or vocalizing, coughing, or sneezing, or from procedures performed on persons which may aerosolize saliva or respiratory tract fluids.

- **COVID-19 symptoms** mean fever of 100.4 degrees Fahrenheit or higher, chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, or diarrhea, unless a licensed health care professional determines the person's symptoms were caused by a known condition other than COVID-19.
- **COVID-19 test** means a test for SARS-CoV-2 that is: Cleared, approved, or authorized, including in an Emergency Use Authorization (EUA), by the United States Food and Drug Administration (FDA) to detect current infection with the SARS-CoV-2 virus (e.g., a viral test); and administered in accordance with the authorized instructions. To meet the return-to-work criteria, 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** means all employees at a work location, working area, or a common area at work, where an employee COVID-19 case was present at any time during the infectious period.
 - A common area at work includes bathrooms, walkways, hallways, aisles, break or eating areas, and waiting areas. The following exceptions apply:
 - For the purpose of determining the exposed group, a place where persons momentarily pass through, without congregating, is not a work location, working area, or a common area at work.
 - If the COVID-19 case was part of a distinct group of employees who are not present at the workplace at the same time as other employees, for instance a work crew or shift that does not overlap with another work crew or shift, only employees within that distinct group are part of the exposed group.
 - If the COVID-19 case visited a work location, working area, or a common area at work for less than 15 minutes during the infectious period, and the COVID-19 case was wearing a face covering during the entire visit, other people at the work location, working area, or common area are not part of the exposed group.
 - NOTE: An exposed group may include the employees of more than one employer. See Labor Code sections 6303 and 6304.1.
- **Face covering** means a surgical mask, a medical procedure mask, a respirator worn voluntarily, or a tightly woven fabric or non-woven material of at least two layers 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, or single layer of fabric. This definition includes clear face coverings or cloth face coverings with a clear plastic panel that 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.

- **Infectious period** means the following time period, unless otherwise defined by CDPH regulation or order, in which case the [CDPH definition](#) shall apply:
 - For COVID-19 cases with COVID-19 symptoms, from two days before the date of symptom onset until:
 - Ten days have passed after symptoms first appeared, or through day five if testing negative on day five or later: and
 - Twenty-four hours have passed with no fever, without the use of fever-reducing medications, and symptoms have improved.
 - For COVID-19 cases without COVID-19 symptoms, from two days before the positive specimen collection date through 10 days (or through day five if testing negative on day five or later) after the date on which the specimen for their first positive test for COVID-19 was collected.
- **Respirator** means a respiratory protection device approved by the National Institute for Occupational Safety and Health (NIOSH) to protect the wearer from particulate matter, such as an N95 filtering facepiece respirator.
- **Returned case** means a COVID-19 case who was excluded from work but returned after meeting the [return to work criteria](#), and did not develop any COVID-19 symptoms after returning. A person shall only be considered a returned case for 30 days after the initial onset of COVID-19 symptoms or, if the person never developed COVID-19 symptoms, for 30 days after the first positive test. If a period of other than 30 days is required by a CDPH regulation or order, that period shall apply.
- **Worksite** means the building, store, facility, agricultural field, or other location where a COVID-19 case was present during the infectious period. It does not apply to buildings, floors, or other locations of the employer that a COVID-19 case did not enter. When determining measures to prevent COVID-19 transmission and to identify and correct COVID-19 hazards, employers shall consider all persons to be potentially infectious, regardless of symptoms, vaccination status, or negative COVID-19 test results.



Identification and Evaluation of COVID-19 Hazards

The Probation Department has identified the following operations employees may generally be exposed to COVID-19 in the workplace. The list of operations are:

Juvenile Detention and Assessment Centers

HD ARISE

Day Reporting Centers

All Probation buildings

- We implement the following in our workplace:
 - Evaluate employees’ potential workplace exposures to all persons at, or who may enter, our workplace.
 - Develop and implement COVID-19 policies and procedures to respond effectively and immediately to individuals at the worksite who are a COVID-19 case to prevent or reduce the risk of transmission at the worksite. **Describe your Department’s specific policies & procedures and where to locate them:**
 - Probation Department’s policies and procedures on COVID-19 can be viewed as part of the Occupational Injury and Illness Prevention Plan (IIPP). The IIPP is located in the Department’s Policy Manager.
 - Review applicable orders and general and industry-specific guidance from the State of California, Cal/ OSHA, and the local health department related to COVID-19 hazards and prevention including:
 - CDPH [Interim Guidance for Ventilation, Filtration, and Air Quality in Indoor Environment](#).
 - CDPH Face Covering Requirements.
 - CDPH Isolation and Quarantine Guidance.
 - Applicable CDPH Employees & Workplaces Guidance.
- Evaluate existing COVID-19 prevention controls in our work and the need for different or additional controls, including maximizing the effectiveness of ventilation and air filtration.
- Conduct periodic inspections using the [COVID-19 Inspections form](#) as needed to identify and evaluate unhealthy conditions, work practices, and work procedures related to COVID-19 and to ensure compliance with our COVID-19 policies and procedures.
- **Describe other specific evaluation measures you take in your workplace:**
 - Department provides rapid self-test kits for COVID detection.

Employee participation

Employees are encouraged to participate in the identification and evaluation of COVID-19 hazards by:

- Notifying their supervisor, HRBP or Department Risk Control Specialist of any concerns.



- Submitting their concerns by completing [DRM's Hazard Report](#)
- Assisting the facility safety coordinator in inspections
- Complying with all health and safety requirements for their worksite.
- Employees can report symptoms and hazards without fear of reprisal or disciplinary action.
- **Describe below how worker suggestions and feedback have been integrated into developing this plan:**
 - Every office has a building coordinator who is the representative for their respective area. The coordinator can bring the concerns or needs for their areas to the Safety and Emergency Operations unit.

Health Screening Process:

- Staff have been informed of and encouraged to self-monitor for signs and symptoms of COVID-19.
- Recommended signage regarding signs and symptoms:
 - Precautions to stay healthy
 - Visitor Health Check

Correction of COVID-19 Hazards

Unsafe or unhealthy work conditions, practices or procedures are documented on the COVID-19 Inspections form, and corrected in a timely manner based on the severity of the hazards, as follows:

- The severity of the hazard will be assessed, and correction time frames assigned, accordingly.
- Individuals to contact for supplies, janitorial and other services may be found on the Contacts page.
- Additional administrative and engineering controls may be considered depending on the hazard.
- Hazard mitigation progress (e.g., FMS work order, in-house repair) may be documented on the COVID-19 inspection form.

Control of COVID-19 Hazards

Face Coverings/Masks

- Our department will provide face coverings and ensure they are worn by employees when required by regulation or order (e.g., CDPH order, CDC Community Levels, etc.).
- COVID-19 cases are required to wear a face covering in the workplace until **10 days have passed** since their symptoms began.
- COVID-19 cases without symptoms are required to wear a face covering in the workplace until **10 days have passed from the date of their first positive COVID-19 test.**
- Employees required to wear face coverings in our workplace may remove them under the following conditions:
 - When an employee is alone in a room or a vehicle.
 - While eating or drinking at the workplace, provided employees are at least six feet apart and outside air supply to the area, if indoors, has been maximized to the extent feasible.

- Employees who cannot wear face coverings due to a medical or mental health condition or disability, or who are hearing-impaired or communicating with a hearing-impaired person. Such employees will wear an effective, non-restrictive alternative, such as a face shield with a drape on the bottom, if their condition permits it.
- Specific tasks that cannot feasibly be performed with a face covering. This exception is limited to the time in which such tasks are being performed.
- Face coverings will also be provided to any employee that requests one, regardless of their vaccination status.
- In our department, face coverings will be provided and supplied by (e.g., supervisor, lead, designated staff):
 - Safety and Emergency Operations unit
- We will not prevent any employee from wearing a face covering when it is not required unless it creates a safety hazard, such as interfering with the safe operation of equipment.
- Filtering face piece respirators (e.g., [N95 Respirator](#)) are available upon request for voluntary use by employees when not required under 5144. When employees request to voluntarily use a respirator the department will ensure that:
 - The [Voluntary Use form](#) is completed by employee and signed by a supervisor.
 - [Training and Education](#) by the employee is completed and documented.

Personal Protective Equipment (PPE)

- The department has evaluated the need for [PPE \(such as gloves, goggles, and face shields\)](#) and provides and ensures use of such PPE as needed.
- If applicable, we also provide and ensure use of eye and respiratory protection when employees are exposed to procedures that may aerosolize potentially infectious material such as saliva or respiratory tract fluids.

Cleaning and Disinfectant items are available for employees to use to clean their workstation.

- Sanitizing Spray located: Each building maintains a supply in a designated location.
- Sanitizing Wipes located: Each building maintains a supply in a designated location.
- Alcohol-based (60%+) cleaning solutions located: Each building maintains a supply in a designated location.

Sanitation and Respiratory etiquette:

- Directions are provided to staff and visitors on proper handwashing procedures.
 - Recommended signage in restroom areas: [Stay Healthy Flyer](#)
 - Inform staff, and potentially visitors, to cover their mouth and nose with their sleeve or a tissue when coughing or sneezing and to avoid touching their face, in particular their mouth, nose, and

- eyes, with their hand.
- Other (**Please describe**): Daily sanitation of public areas is completed by custodial staff.
- Recommended signage for work areas:
 - [Precautions to stay healthy](#)
 - [Stop the Spread](#)

Employee Hygiene:

- Employees are encouraged to wash their hands frequently and especially prior to eating or drinking.
- Employees are encouraged to wash their hands after handling external elements (e.g., mail and packages, currency, etc.)
- Employees are encouraged to wash their hands for at least 20 seconds each time.
- We provide employees with an effective hand sanitizer, and prohibit hand sanitizers that contain methanol (i.e., methyl alcohol).
- Other (**Please describe**): The Department has established training videos and safety topics regarding proper sanitation and personal hygiene.
- Recommend signage for handwashing:
 - [Precautions to stay healthy](#)
 - [Stop the Spread](#)

Facility Housekeeping and Ventilation:

- Frequent cleaning will be conducted in high-touch areas, such as phones, keyboards, touch screens, controls, door handles, elevator panels, railings, copy machines, etc.
- Specialized cleaning operations will occur in worksites that have an outbreak.
- For our indoor workplaces we will:
 - Review the CDPH’s Interim Guidance for Ventilation, Filtration, and Air Quality in Indoor Environments.
 - In vehicles, we will maximize the supply of outside air to the extent feasible, except when doing so would cause a hazard to employees or expose them to inclement weather.
- Facilities Management and Real Estate Services will develop, implement, and maintain effective methods to prevent transmission of COVID-19, including one or more of the following actions to improve ventilation:
 - Maximize the supply of outside air to the extent feasible, except when the United States Environmental Protection Agency (EPA) Air Quality Index is greater than 100 for any pollutant or if opening windows or maximizing outdoor air by other means would cause a hazard to employees, for instance from excessive heat or cold.

- In buildings and structures with mechanical ventilation, filter circulated air through filters at least
- As protective as Minimum Efficiency Reporting Value (MERV)-13, or the highest level of filtration efficiency compatible with the existing mechanical ventilation system.
- Use High Efficiency Particulate Air (HEPA) filtration units in accordance with manufacturers' recommendations in indoor areas occupied by employees for extended periods, where ventilation is inadequate to reduce the risk of COVID-19 transmission.
- Determine if our workplace is subject to CCR, Title 8 section 5142 Mechanically Driven Heating, Ventilating and Air Conditioning (HVAC) Systems to Provide Minimum Building Ventilation, or section 5143 General Requirements of Mechanical Ventilation Systems, and comply as required.

External Risk Mitigation:

- Every effort is made to keep persons who may be sick separate from employees through social distancing. If deliveries have to be taken inside, employees are encouraged to wear masks. Additionally, when practical, the number of employees interacting with delivery people is limited.
- All visitors are encouraged to wear masks in the juvenile detention centers and other Department buildings. When practical, limit the number of staff interacting with the sick individual and maintain social distancing. In addition, sanitation of the areas occupied by those who may have been sick is completed.
- Recommended visitor signage regarding signs and symptoms:
 - [Visitor Health Check \(sbcounty.gov\)](https://sbcounty.gov)

Transportation and Use of County Vehicles

- Whenever possible, employees should travel in separate vehicles.
- Vehicles, especially high-touch areas, must be disinfected before use and/or between multiple drivers.
- The air system should be set at fresh air and not set to recycle air. Refer to the vehicle manual if needed to know how to set the fresh air.
- When possible, windows should be kept open.
- Hand sanitizers, disinfectant wipes, masks, and gloves are available for use in vehicles.
 - [COVID-19 vehicle checklist](#)
- Other (**Please describe**): Electrostatic sprayers are available for additional sanitizing.

Testing of employees

We make COVID-19 testing available at no cost, during paid time, to all employees:

- Who had close contact in the workplace; or
- Who have COVID-19 symptoms, and
- During outbreaks ([see below for further details](#))



COVID-19 Illness at the Worksite

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

- Ensuring that COVID-19 cases are excluded from the workplace until the return-to-work criteria are met.
- Reviewing current [CDPH guidance](#) for persons who had close contacts, including any guidance regarding quarantine or other measures to reduce transmission.
- Our department will work closely with the HR Business Partner (HRBP) to address COVID positive cases and implementation of the latest requirements and [CDPH guidance](#).
- Investigating and responding to COVID-19 cases as described below.

Investigating and Responding to COVID-19 Cases

We have developed effective procedures to investigate COVID-19 cases that include seeking information from our employees regarding COVID-19 cases, close contacts, test results, and onset of symptoms. This is accomplished by completing the [COVID-19 Reporting survey](#) form.

- Within one business day of a COVID-19 exposure, Leadership will communicate, in a way that does not reveal any personal identifying information to coworkers who may have been exposed to the COVID-19 positive employee. For those individuals, Leadership will consider if:
 - The employee can telecommute.
 - Any employee who may have come into contact with the positive employee be given the option to self-quarantine on personal leave or sick leave, as applicable.
 - Employees from the affected worksite should not be redeployed to other office locations.
- Leadership will investigate whether any workplace conditions could have contributed to the risk of COVID-19 exposure and what could be done to reduce it.
- Additional administrative and engineering controls should be considered when the site is deemed an “outbreak” site.
- Investigation findings, corrections, cleaning/disinfecting and other results should be shared with staff.
- Leadership will contact Facilities Management to have the work site cleaned and sanitized in accordance with CDC guidelines.
- Leadership will communicate the following to all staff following a COVID-19 positive:
 - Notification of an employee with a confirmed COVID-19 diagnosis within the worksite, while maintaining the employee’s privacy.
 - Notification of when the positive employee was last at the worksite.
 - Assurances that the worksite will be thoroughly cleaned and sanitized in accordance with CDC guidelines.
 - Reference material via links to CDC, Public Health, and HR guidance will be provided.



- Referring employees to their health care provider if they experience symptoms associated with COVID-19, as well as telemedicine information.
- As necessary, Human Resources will identify non-employees (e.g., independent contractors) that may have come in close contact with the positive employee and inform their employer of the positivity.
- Risk Management will be notified of major outbreaks, employee COVID-19 related hospitalizations, and deaths **within 4-hours** of the supervisor or department's knowledge of the incident. Applicable illnesses will be reported to Cal/OSHA by Risk Management in accordance with the CCR Title 8 regulations.

Protocols for an Outbreak

The following protocols must be implemented and stay in effect until there are one or fewer new COVID-19 cases detected in the exposed group for a 14-day period.

Outbreaks (3 or more cases)

In the event that there are 3 or more work related COVID-19 cases within a 14-day period at one worksite, your assigned Human Resources Business Partner (HRBP) and a Department Risk Control Specialist (DRCS) from Risk Management will coordinate with your leadership team on an appropriate response and support for your department.

- Employees in the exposed group have the ability to test weekly.
- Employees in the exposed group are required to wear face coverings when indoors, or when outdoors and less than six feet from another person, unless an exception applies.
 - Respirators will be provided upon request for voluntary use to employees in the exposed group.
 - Recommend signage for outbreak mask requirement: [Masks are Mandatory](#)
- Our Department will evaluate whether it is necessary that members of the public who enter a worksite that has been deemed a COVID-19 Outbreak worksite during the pendency of an Outbreak be recommended to wear a mask. Only those locations identified as Outbreak worksites would be recommended for mask wearing. Upon completion of the mandate Outbreak protocol, the recommended mask wearing would be eliminated.
- Departments must evaluate whether it is necessary to implement physical distancing and barriers during an outbreak (3 or more cases in an exposed workplace within a 14-day period).

Major Outbreaks (20 or more cases)

In the event that there are **20 or more work related COVID-19 cases** within a 30-day period at one worksite, your assigned Human Resources Business Partner (HRBP) and a Department Risk Control Specialist (DRCS) from Risk Management will coordinate with your leadership team on an appropriate response and support for your department.

- For major outbreaks, COVID-19 testing is required of all employees in the exposed group, regardless of vaccination status, twice a week or more frequently if recommended by the local health department.
- Employees in the exposed group must be tested or shall be excluded and follow the [return-to-work](#) requirements starting from the date that the outbreak begins.

- The department will work with the HRBP and Risk Management to evaluate whether to halt some or all operations at the workplace until COVID-19 hazards have been corrected.
- Respirators for voluntary use will be provided to employees in the exposed group, and the need for a respiratory protection program or changes to an existing respiratory protection program to address COVID-19 hazards will be evaluated.
- The ventilation system will be reassessed to determine if ventilation and filtration are adequate, and where ventilation is inadequate to reduce the risk of COVID-19 transmission, High Efficiency Particulate Air (HEPA) filtration units will be used in accordance with the manufacturer’s recommendations in indoor areas occupied by employees for extended periods of time.
- Risk Management will report the major outbreak to Cal/OSHA in accordance with 8 CCR 3205.1(g)(2).

In the event of an outbreak or major outbreak, the following methods can be evaluated for implementing physical distancing when required:

Employees:

- Telework or staggered work schedule.
- Reconfigured break room for physical distancing.
- Posted social distance signage throughout department.
- Limited employee capacity in training, break, and conference rooms.
- Implemented plexi-glass at the front reception area and executive secretary workstation.
- Purchased mobile plexi-glass for use in conference and training rooms.
- Using conference calling or web applications as the first option for meetings.
- Implemented electronic processing of paperwork as feasible.
- Limiting unnecessary exposure to staff by having all deliveries or pickups of documents, PPE, etc. to one individual.

Members of the public, visitors, and/or vendors:

- As much as possible, use conference calling and web applications to conduct outside meetings.
- Maintain six feet of distance between customers.
- Use plexi-glass if in person meetings are necessary.
- Other (**Please describe**): Post signs in public areas advising of proper social distancing.

Return-to-Work Criteria

We will meet the following return to work criteria for COVID-19 cases and employees excluded from work:

- COVID-19 cases without COVID-19 symptoms will not return to work during the [infectious period](#);
- COVID-19 cases with COVID-19 symptoms will not return to work during the shorter of the following:
 - The infectious period; or
 - Until 10 days after onset of symptoms and at least 24 hours have passed since a fever of 100.4 °F

or higher has resolved without the use of fever-reducing medication.

- COVID-19 tests may be self-administered and self-read only if the following independent verification of the results can be provided such as a time-stamped photograph of the results.
- 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.

System for Communicating

Our goal is to ensure that we have effective two-way communication with our employees, in a form they can readily understand, and that it includes the following information:

- Who employees should report COVID-19 symptoms, possible close contacts, and hazards to, and how.
- That employees can report symptoms, possible close contacts, and hazards without fear of reprisal.
- That employees with medical or other conditions that put them at increased risk of severe COVID-19 illness can request accommodations through their supervisor and HRBP.
- Access to [COVID-19 testing](#) when testing is required.
- Posting of notifications at the worksite whenever there is a COVID-19 case or outbreak.

Training and Instruction

[Basic Employee Training on COVID](#) is available for all employees to take through PERC.



We provide effective employee training and instruction that includes:

- What COVID-19 is, what are the symptoms and how it is transmitted?
- Resources for COVID-19, vaccines, and testing
- How to properly wear face coverings/mask, and how to request an N95 for voluntary use.
- The conditions where face coverings must be worn at the workplace.
- Available resources for more information

Reporting, Recordkeeping, and Access

It is our policy to:

- Report information about COVID-19 cases and outbreaks at our workplace to the local health department whenever required by law, and provide any related information requested by the local health department.
- Make our written COVID-19 Prevention Program available at the workplace to employees, authorized employee representatives, and to Risk Management and HR upon request.
- Use the [COVID-19 Reporting survey](#) form to keep a record of and track all COVID-19 cases.



Contacts

Supplies

- Sanitization Supplies: [REDACTED]
- Sneeze Guards [REDACTED]

Janitorial Services

- Leased Facilities:
[REDACTED]

- County-Owned Facilities:
[REDACTED]

Security Guard Questions


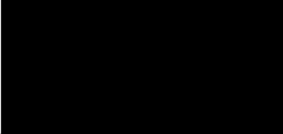
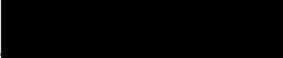
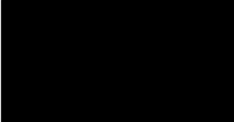


[REDACTED]

Employee Health & Safety

- Training, respirator fit testing and training, risk mitigation assessment
 - Department of Risk Management – [REDACTED]



Additional Support and References

Workplace Controls for Safety and Health	Resource/Contact
Adhere to cleaning and disinfecting procedures in accordance with governing authorities and/or best practices	
Provide appropriate PPE for customers and staff. A list of available PPE can be requested from the Purchasing Department	
Risk Mitigation Assessment Resource	
Install safeguards – plexi-glass, sneeze guards, directional arrows, or clearly communicated standards	Real Estate Services
Install high-efficiency air filters or increase ventilation where viable	Real Estate Services
Provide additional station to wash hands or alcohol-based hand rubs (At least 60% alcohol), install wall mounted hand sanitizers	
Policy, Rights and Notifications	
Supply necessary PPE (If obtainable)	
Train staff and volunteers on customer service standards	Probation Department
Train staff and volunteers on cleaning standards	Probation Department
Train staff and volunteers how to use PPE	Risk Management 

Modifications to County-Leased facilities would need to be coordinated through the appropriate RESD Leasing Agent and receive the property owner’s approval. Once approved, any space improvements would need to be made by the property owner’s contractors/vendors.

COVID-19 Regulatory Standards

[3205, COVID-19 Prevention](#)

[3205.1, Multiple COVID-19 Infection and COVID-19 Outbreaks](#)

[3205.2, Major COVID-19 Outbreaks](#)

Guidance on COVID-19 Best Management Practices

www.cdc.gov/coronavirus/2019-nCoV

<https://www.dir.ca.gov/dosh/coronavirus/Health-Care-General-Industry.html>

<https://hr.sbcounty.gov/employee-benefits/coronavirus-resources/>

Face Coverings/Mask Up-to-Date Guidance

[CDC's Community Levels](#)

[CDPH Face Covering Guidance](#)

Handwashing

www.cdc.gov/handwashing/when-how-handwashing.html

www.cdc.gov/handwashing

<https://www.youtube.com/watch?v=d914EnpU4Fo>

Respiratory etiquette: Cover your cough or sneeze

www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/prevention.html

www.cdc.gov/healthywater/hygiene/etiquette/coughing_sneezing.html

Physical distancing

[How to Protect Yourself and Others | CDC](#)

Housekeeping

www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html

www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/disinfecting-your-home.html

www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2

Employees exhibiting signs and symptoms of COVID-19

www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/steps-when-sick.html

Training

<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/prevention.html>

www.osha.gov/Publications/OSHA3990.pdf

[Basic Employee Training on COVID](#) is available and recommended for all employees to take through PERC.



Basic Employee Training
on COVID-19 Infection
Prevention

COVID-19 Prevention Program



Date of Implementation: 9-1-23

Authorized by: [Signature]

Title: Chief Probation Officer