International Computer Science Institute

COVID Prevention and Response Plan

2/01/2022

QUICK REFERENCE

Our core prevention strategy is to limit exposure to the virus by using PPE (such as masks), maintaining distance, and limiting contact time. This is coupled with COVID immunization to reduce risk of the adverse consequences of any infection.

Feeling sick or symptomatic? Potentially exposed to the virus?

- 1. Stay Home
- 2. Get Tested: Contact a healthcare professional to get tested. Consider using a home "antigen test" these may not identify very early infections, but if positive, one can be considered infected and capable of spreading COVID. Follow the advice of healthcare professionals.
- 3. Use Sick Leave

Tested positive?

- 1. Stay home & follow the advice of your healthcare professional.
- 2. Notify HR: (email jaci@icsi.berkeley.edu or call (510) 666-2922)
- 3. Use Sick Leave
- 4. Plan your return to the office with HR: a number of requirements must be met before returning to the office.

Have you been vaccinated/boosted?

TELL HR! Email icsihr@icsi.berkeley.edu

We require employees whose work duties require them to be on-site to be immunized as a protective measure. Such vaccination includes all CDC-recommended boosters.

Questions? Contact: icsihr@icsi.berkeley.edu

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Introduction

The ICSI COVID Prevention and Response Plan was developed using four guiding principles:

- 1. Our top priority is keeping our employees and their families safe;
- 2. We will contribute to keeping the communities in which we operate safe;
- 3. We will do our best to maintain operational excellence in service to our mission, our collaborators, and our funders; and,
- 4. Decisions will be made to ensure the long-term strength, resilience, and sustainability of ICSI.

Our core prevention strategy is to limit exposure to the virus by using PPE, maintaining distance, and limiting contact time.

This plan was formulated based upon established knowledge of the control of infectious disease and specifically, public health experience confronting the earlier 2003 SARS virus outbreak, as well as our growing knowledge of the SARS-CoV-2 coronavirus - the causal agent of COVID.

We recognize several key facts as critical to effective prevention and mitigation of infection by this virus:

- Respiratory transmission of COVID. The SARS-CoV-2 virus is primarily transmitted via
 respiratory particles, and thus we particularly stress three principles to prevent infection: (1)
 providing the most effective barriers (particularly high quality mask use); (2) maintaining
 distance; and, (3) limiting time of contact with others.
- Most COVID infections are mild or asymptomatic. Early in the pandemic, as many as four of five infections were undiagnosed, as most of these were younger, healthier individuals who were either asymptomatic or experienced mild disease. Due to the fact that such cases have comprised the vast majority of COVID infections, these may have been the source of over 80 percent of all new SARS-CoV-2 infections, including those which caused severe disease and death. Even with expanded COVID testing, at least one-third of infections appear to remain undiagnosed. While COVID vaccines reduce severe disease and death by over 90 percent, with the emergence of new virus variants such as Omicron, immunization is less effective in reducing infection though it reduces the severity of illness and the adverse outcomes of hospitalization and death. As this coronavirus develops new variants, this underscores the fact that reliance on a single measure, such as a vaccine, is insufficient to promote a safer workplace and community.
- **COVID poses a dynamic challenge.** COVID cannot be thought of as just like a "bad flu". Its effects extend far beyond that of a respiratory disease. Its impacts go far beyond the respiratory system as it can affect the heart, brain, and other organs and systems. As the virus mutates, new vaccines and mitigation measures may be employed. This is why we undertake monthly evaluation of the performance and periodic revision of this Plan.
- Multiple agencies and authorities are concerned with the risk of COVID in the workplace. We
 have designed the Plan to meet the requirements of Cal/OSHA, incorporate standards

established by the Centers for Disease Control and Prevention (CDC), and maintain compliance with state and federal law governing employers. While we aim to meet requirements, we exceed them in some critical provisions as we strive to ensure a safer work environment.

Authority and Responsibility

The Executive Director and Human Resources Manager have overall authority and responsibility for implementing and updating the provisions of this Plan in our workplace. In addition, all managers and supervisors are responsible for implementing and maintaining the Plan in their assigned work areas, and for ensuring employees receive answers to questions about the program in a language they can understand.

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

Identification and Evaluation of COVID Hazards

We will implement the following steps to help to reduce the risk of COVID infections in our workplace, effective 4/7/2021:

- Conduct workplace-specific evaluations using the Appendix A: Identification of COVID Hazards form.
- Evaluate employees' potential workplace exposures to all persons at, or who may enter, our workplace.
- Review applicable orders and general and industry-specific guidance from the State of California, Cal/OSHA, and the local health department related to COVID hazards and prevention.
- Evaluate existing COVID prevention controls in our workplace and the need for updated or additional controls.
- Conduct periodic inspections using the Appendix B: COVID Inspections form as needed to
 identify unhealthy conditions, work practices, and work procedures related to COVID and to
 ensure compliance with our COVID policies and procedures.

Employee Participation

Employees and their authorized employees' representatives are encouraged to participate in the identification and evaluation of COVID hazards by: Self-screening, proposing suggestions for safety improvements, and anonymous reporting of potential hazards to the Plan authority, including the Human Resources Manager and Executive Director.

Employee Screening

Employees self-screen via online webform prior to entering the workplace, in accordance with local, state, and federal guidelines.

Correction of COVID Hazards

Unsafe or unhealthy work conditions, practices, or procedures will be documented on the *Appendix B: COVID Inspections* form, and corrected in a timely manner based on the severity of the hazards, as follows:

- The manager on duty will assess the hazard and whether the hazard can be safely corrected immediately.
- If the hazard cannot be corrected immediately, then the manager will report the hazard to the Human Resources Manager. Otherwise, correction shall be made and the manager on duty will report such to the Human Resources Manager.
- The manager on duty will be responsible for timely correction of the hazard.
- Human Resources will be responsible for following up with the office manager to ensure timely correction.

Reducing Risk of COVID Hazards

Physical Distancing

Where possible, we ensure at least six feet of physical distancing at all times in our workplace by:

- Minimizing the need for workers to be in the workplace, e.g., telework or other remote work arrangements.
- Reducing the number of persons with access to the workplace.
- No more than one person per office at the same time.
- No more than one person in the bathroom at a time.
- Staggered arrival, departure, work, and break times.
- Individuals will stay as far apart as possible when in situations where six feet of physical distance cannot be achieved.

PPE Used to Reduce the Risk of Employees' Exposure to COVID

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

To address respiratory protection, we evaluate the need in accordance with CCR Title 8 section 5144 when the physical distancing requirements are not feasible or maintained.

We provide and ensure use of eye protection and respiratory protection in accordance with section 5144 when an employee performs duties that may aerosolize potentially infectious, material such as saliva or respiratory tract fluids. This may include, but is not limited to cleaning and sanitizing operations.

Face Coverings

We provide high filtration, industrial grade face masks. We are currently utilizing KN95 masks, a type comparable to the medical N95 mask, though less burdensome for most individuals to use (citations within this document to "KN95" apply also to any comparable mask approved by HR for use). Masks must be worn properly, i.e., fully covering the nose and mouth, when anyone is inside our ICSI facility, and when working outdoors and less than six feet away from another person, and where required by state or local authority. Employees and visitors may pick up a new mask as needed; masks are available at the main entrance of the ICSI workplace for employee and visitor use while in the office. The following are exceptions to the use of masks in our workplace:

- When an employee is alone in a room.
- While eating and drinking, provided they are at least six feet apart.
- 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. Specific accommodation will be considered on a case-by-case basis.

Any employee requiring accommodation due to inability to wear a KN95 mask shall be at least six feet apart from all other persons at all times, and shall have completed a full COVID immunization at least 14 days prior to entering the workplace.

Shared Tools, Equipment and Personal Protective Equipment (PPE)

PPE must not be shared, e.g., gloves, goggles, and face shields.

Items that employees come in regular physical contact with, such as phones, headsets, desks, keyboards, writing materials, instruments and tools should not be shared, to the extent feasible. Where there must be sharing, the items will be disinfected between uses by employees who have been provided with disinfection materials and training.

Engineering Controls

We lease an office suite on the 2nd floor of a 13-story mixed use commercial building, managed by GS Management Company, which has committed to the following mitigation measures:

- They shall maximize, to the extent feasible, the quantity of fresh, outside air for the building with mechanical or natural ventilation systems.
- The HVAC system runs only to floors housing essential businesses, Monday Friday from 8:00am 6:00pm PT. It does not circulate fresh air on weekends or after business hours.

Where we cannot maintain at least six feet between individuals, we will install a solid partition in accordance with 8 CCR 3205(c)(8)(A).

Cleaning and Disinfecting

We implement the following cleaning and disinfection measures for frequently touched surfaces:

- 1. Surfaces are first cleaned, and then disinfected using products from the EPA List N: Disinfectants for Coronavirus (COVID-19). Staff who perform cleaning/sanitizing functions are provided with additional PPE (gloves, face shields, masks) in accordance with CCR Title 9, section 3380.
- 2. High touch items in high traffic areas are disinfected at least once daily and throughout the day by employees after use. Restrooms are cleaned daily after 6pm.

Hand Sanitizing

In order to implement effective hand sanitizing procedures, we:

- Encourage and allow time for employee handwashing.
- Direct employees to wash their hands using warm water and disinfecting soap, for at least 20 seconds.
- Provide employees with an effective and safe ethanol-based hand sanitizer.

Environmental Response to an Incident COVID Case

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

- Building management and employees will be notified in the event of a positive COVID case in the workplace.
- The workplace will be temporarily closed, and employees will be instructed to work from home, for a minimum of 24 hours.
- All common areas will be thoroughly cleaned prior to opening. The office of the worker with
 the positive test will be locked, closed, and thoroughly cleaned and disinfected prior to
 reopening for use.

Investigating and Responding to COVID Cases

This will be accomplished by using the **Appendix C: Investigating COVID Cases** form.

Employees who have had a potential COVID exposure in our workplace will be:

- Offered COVID testing at no cost. They may test during normal working hours, or at other times convenient to the employee, or as otherwise medically advised. Such testing may be provided at an approved testing facility or via at home sample collection, consistent with current standards governing exposure and quarantine. Employees may submit a request for reimbursement for tests performed by another approved facility.
- Information on benefits described in Training and Instruction, and Exclusion of COVID Cases, below, will be provided to them.

The workspace of the employee who has had a potential exposure shall be cleaned and disinfected using products from the EPA List N: Disinfectants for Coronavirus (COVID-19). Staff shall assure that such additional cleaning is also performed on surfaces and equipment with which the affected employee may have had contact in the previous 24 hours. Staff who perform cleaning/sanitizing functions are provided with additional PPE (gloves, face shields, masks) in accordance with CCR Title 9, section 3380.

System of Communication

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

Hazards

- Information about COVID hazards that employees and other individuals in contact with our workplace may be exposed to, measures to control those hazards, and our COVID policies and procedures.
- Our procedures or policies for accommodating employees with medical or other conditions that may place put them at increased risk of severe COVID illness.
- Employees can report their concerns including behaviors posing risk, as well as perceived hazards, without fear of reprisal. Such reporting may be made anonymously.
- To whom and how employees should report COVID symptoms, concerns, or perceived hazards.

Reporting Hazards

Employees should report COVID symptoms, concerns, or perceived hazards to the ICSI HR manager by means of:

Anonymously, using the Hazard Reporting form at https://forms.gle/B5aQ1qEwFv44iReT7

- Self reporting via the Daily Symptom Screener at https://forms.gle/mmL94MVWy4RzAQHX7
- Directly notifying the HR Manager at jaci@icsi.berkeley.edu or (510) 666-2922

Immunization

Information about local COVID vaccination and eligibility can be found below.

- Berkeley Public Health at https://bit.ly/berkvaccine
- Alameda County Public Health at https://covid-19.acgov.org/vaccines
- California Department of Public Health https://myturn.ca.gov/

Screening and Testing

When testing is required because of a workplace exposure or outbreak, the HR manager will communicate the plan for providing testing and inform affected employees of the reason for the testing and the possible consequences of a positive test.

When testing is not required due to a potential exposure, employees are strongly encouraged to voluntarily seek out COVID testing if they have symptoms or suspect they may have been exposed to the virus. To access testing, employees may contact:

- Their regular healthcare provider.
- A community testing site in their area. Test sites and appointment information for Berkeley and nearby cities in Alameda county can be found at https://covid-19.acgov.org/testing.page
- You may be able to utilize a home "antigen test" which can provide results at home in as little as 15 minutes. Such tests may not identify very early infections, but if positive, one can be considered infected and capable of spreading COVID. These may be obtained directly from pharmacies and submitted for health insurance reimbursement, through a new direct federal program, or via other sources.

Training and Instruction

We will provide effective training and instruction on the following:

Facts

- COVID-19 is an infectious disease that is primarily spread through the air.
- COVID-19 may be transmitted when a person touches a contaminated object and then touches their eyes, nose, or mouth.
- An infectious person may have no symptoms.
- A vaccinated person may still transmit COVID to others if unmasked.

Policies and procedures to protect employees from COVID hazards

- Physical distancing must be combined with other protective measures, including face coverings and hand hygiene, to be effective indoors.
- Methods of physical distancing of at least six feet and the importance of combining physical distancing with the wearing of face coverings.
- Proper use of masks and the fact that these are most effective when both infected and uninfected individuals are properly using high quality medical-grade masks.
- The value of frequent hand washing with soap and warm water for at least 20 seconds and
 using hand sanitizer when employees do not have immediate access to a sink or hand washing
 facility, and that hand sanitizer does not work if the hands are soiled.
- COVID-19 symptoms, and the importance of obtaining a COVID test and not coming to work if the employee has had significant COVID exposure or experiences COVID symptoms.
- How to report symptoms, hazards, and suggestions for health and safety improvements.
- Information regarding COVID-19-related benefits to which the employee may be entitled under applicable federal, state, or local laws.

Appendix D: COVID Training Roster will be used to document this training.

Exclusion of COVID Cases from Work

Where we have a COVID case in our workplace, we will limit transmission by:

- Requiring that individuals who have been exposed to or are infected with COVID stay home and away from the workplace until our return-to-work requirements are met.
- Excluding employees with COVID exposure from the workplace for no less than the period as is determined to meet the most stringent standard required by legal authority following an individual's last known exposure to a COVID case.
- Continuing and maintaining an employee's earnings, seniority, and all other employee rights
 and benefits whenever we have demonstrated reasonable probability that the COVID
 exposure is work related. This will be accomplished by providing employee sick leave benefits,
 in conjunction with other available state and federal paid leave resources (where permitted by
 law), when exposure is not covered by workers' compensation.
- Providing employees with information on available benefits at the time of exclusion.

Reporting, Recordkeeping, and Access

It is our policy to:

- Report information about COVID cases at our workplace to the authorized local, state, or federal health authority whenever required by law, and provide any related information upon request.
- Report immediately to Cal/OSHA any COVID-19-related serious illnesses or death (as defined under CCR Title 8 section 330(h)) of an employee, occurring in our place of employment or in connection with any employment.
- Maintain records of the steps taken to implement our written COVID Prevention Program in accordance with CCR Title 8 section 3203(b).
- Make our written COVID Prevention Program available at the workplace to employees, authorized employee representatives, and authorized state and local authorities.
- Use the **Appendix C: Investigating COVID Cases** form to keep a record of and track all COVID cases. The information will be made available to employees, authorized employee representatives, or as otherwise required by law, with personal identifying information removed to the fullest extent permissible by law.

Return-to-Work Criteria

Those with confirmed COVID infection will not return to work until all the following conditions are satisfied:

- 1. If a fever of 100.4 or higher was present, at least 24 hours have passed since that fever resolved, and the individual is no longer using fever-reducing medications; and,
- 2. COVID symptoms have resolved; and,
- 3. At least 5 days have passed since the latter of the date that either the COVID symptoms first appeared <u>or</u> the individual tested positive; and,
- 4. The individual has subsequently received either a negative PCR or antigen test.

If an order to isolate or quarantine 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.

Multiple COVID Infections and COVID Outbreaks

This section applies if the workplace is identified by a local health department as the location of a COVID outbreak, or there are three or more COVID cases in our workplace within a 7-day period.

This section of the CPR Plan will stay in effect until there are no new COVID cases detected in our workplace for a 7-day period.

COVID Testing

We will assure that COVID testing is provided to all employees potentially exposed in our workplace, except for those employees who were not present during the period of an outbreak (as identified by a local health department), as well as at any time during the 7 days preceding the outbreak. COVID testing will be provided at no cost to employees. Such exposed individuals may test during normal working hours, or at other time convenient to the employee, or as otherwise medically advised. Such testing may be provided at an approved testing facility or via at home sample collection, consistent with current standards governing exposure and quarantine.

COVID testing consists of the following:

• Exposed Employees.

All employees with a potential exposure will be immediately tested and then re-tested one week later. We will arrange for test kits to be delivered to the employee's home. Negative test results will not impact the duration of any quarantine period required by, or orders issued by, the public health authority.

• <u>Unexposed employees</u>

We will provide COVID testing of employees who remain at the workplace at least once per week, or more frequently if recommended by the local health department, until there are no new COVID cases detected in our workplace for a 7-day period. We will supply tests that employees can take during regular work hours or at their convenience.

We will provide additional testing when deemed necessary by Cal/OSHA.

Exclusion of COVID Cases

We will ensure COVID cases and employees who have had COVID exposure are excluded from the workplace in accordance with our CPR Plan Exclusion of COVID Cases and Return-to-Work Criteria requirements, and local health officer orders if applicable.

Investigation of Workplace COVID Illness

We will immediately investigate and determine possible workplace-related factors that contributed to the COVID outbreak in accordance with our CPR Plan **Investigating and Responding to COVID Cases.**

COVID Investigation, Review and Hazard Correction

While we review performance, standards, and policies regarding our CPR Plan on a monthly basis, the occurrence of a COVID case in our workforce will prompt more extensive review. In addition to our CPR Plan Identification and Evaluation of COVID Hazards and Correction of COVID Hazards, we will immediately perform a review of potentially relevant COVID policies, procedures, and controls and implement changes as needed to prevent further spread of COVID.

The investigation and review will be documented and include:

- 1. Investigation of new or unabated COVID hazards, and evaluation of risk mitigation measures including, but not limited to:
 - Sufficiency of air quality and filtration
 - Physical distancing
 - PPE training sufficiency/deficits
 - Our COVID testing policies
 - Sufficiency of leave policies and practices
- 2. Updating the review:
 - Every thirty days that the outbreak continues
 - In response to new information or to new or previously unrecognized COVID hazards
 - When otherwise necessary or prudent
- 3. Implementing changes to reduce the transmission of COVID based on the investigation and review. We will consider:
 - Performing tasks remotely
 - Increasing air filtration/supply
 - Increasing physical distancing
 - Improved/upgraded PPE
 - Incorporating new knowledge and public health recommendations

Notifications to State and Local Health Authorities

- 1. Immediately, but no longer than 24 hours after learning of three or more COVID cases in our workplace, we will contact local and/or state health authorities as appropriate and require guidance on preventing the further spread of COVID within the workplace.
- 2. We will provide to local and state health authorities, as required, the total number of COVID cases and for each COVID case, the name, contact information, occupation, workplace location, business address, the hospitalization and/or fatality status, and North American Industry Classification System code of the workplace of the COVID case, and any other legally required information requested. We will continue to provide required notice to the local and state health authorities of any subsequent COVID cases at our workplace.

Major COVID Outbreaks

This section applies should our workplace experience 20 COVID cases within a 30-day period. It will remain in effect until:

- 1. There are no new COVID cases detected among employees who were present in the workplace during the 14-day period preceding the last reported case, and
- 2. Public health authorities concluded any advised investigation of the outbreak, and
- 3. Any remediation of hazard or additional preventive measure(s) recommended by such authorities have been employed.

Workplace Closure

The workplace shall be closed to all individuals, accepting those performing duties including cleaning and disinfecting, outbreak investigation, or essential work to secure the site.

Exclusion of Employees from Workplace

Employees excluded from the workplace will be expected to perform work remotely to the degree reasonably possible. No employee whose work requires duties to be performed on site shall be penalized for their inability to perform said work.

COVID Testing

We will provide COVID testing to all employees exposed in our workplace, except for those employees who were not present during the period of an outbreak (as identified by a local health department), as well as at any time during the 14 days preceding identification of the last COVID case. COVID testing will be provided at no cost to employees. Such exposed individuals may test during normal working hours, or at other time convenient to the employee, or as otherwise medically advised. Such testing may be provided at an approved testing facility or via at home sample collection, consistent with current standards governing exposure and quarantine.

COVID testing consists of the following:

All employees with a potential exposure will be immediately tested and then re-tested one week later. We will arrange for test kits to be delivered to the employee's home. Negative test results will not impact the duration of any quarantine period required by, or orders issued by, the public health authority.

We will provide additional testing when deemed necessary by Cal/OSHA.

Investigation of Workplace COVID Illnesses

We will comply with the requirements of our CPR Plan Investigating and Responding to COVID Cases.

COVID Investigation, Review and Hazard Correction

The occurrence of a major outbreak will prompt extensive investigation. In addition to our CPR Plan Identification and Evaluation of COVID Hazards and Correction of COVID Hazards, we will immediately perform a review of potentially relevant COVID policies, procedures, and controls and implement changes as needed to prevent further spread of COVID-19.

The investigation and review will be documented and include:

- 1. Investigation of new or unabated COVID hazards, and evaluation of risk mitigation measures including, but not limited to:
 - Sufficiency of air quality and filtration
 - Physical distancing
 - PPE training sufficiency/deficits
 - Our COVID testing policies
 - Sufficiency of leave policies and practices
- 2. Updating the review:
 - Every thirty days that the outbreak continues
 - In response to new information or to new or previously unrecognized COVID hazards
 - When otherwise necessary or prudent
- 3. Implementing changes to reduce the transmission of COVID based on the investigation and review. We will consider:
 - Performing tasks remotely
 - Increasing air filtration/supply
 - Increasing physical distancing
 - Improved/upgraded PPE
 - Incorporating new knowledge and public health recommendations

COVID Hazard Correction

In addition to the requirements of our Plan **Correction of COVID Hazards**, we will assure the following mandated actions have been taken:

- In buildings or structures with mechanical ventilation, air is recirculated 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, we confirm that filters are utilized of the highest compatible filtering efficiency. We will also evaluate whether additional portable or mounted High Efficiency Particulate Air (HEPA) filtration units, or other air cleaning systems would reduce the risk of transmission and implement their use to the degree feasible.
- We will determine the need for a respiratory protection program or changes to an existing respiratory protection program under CCR Title 8 section 5144 to address COVID hazards.
- Implement any other control measures deemed necessary by Cal/OSHA.

Notifications to the Local Health Department

We will comply with the requirements of our **Multiple COVID Infections** and COVID **Outbreaks-Notifications** to the Local Health Department.

Conclusion

The virus which causes COVID is both new and evolving. We will thus regularly review and adapt this plan to better protect the ICSI community. We welcome suggestions for program improvement, and urge all to actively participate in keeping our community safe. Please do not hesitate to contact HR or use the hazard reporting forms. We're all in this together!

Appendix A: Identification of COVID Hazards

All persons, regardless of symptoms or negative COVID test results, will be considered potentially infectious. Particular attention will be paid to areas where people may congregate or come in contact with one another, regardless of whether employees are performing an assigned work task or not. For example: meetings, entrances, bathrooms, hallways, aisles, walkways, elevators, break or eating areas, cool-down areas, and waiting areas.

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

| workplace, in addition to addressing fixed work locations. |
|--|
| Date: |
| Person(s) Conducting the Evaluation: |
| |
| Name(s) of employee and authorized employee representative(s) that participated: |
| |
| |
| |

| Area, activity, work task, process, equipment, and material that potentially exposes employees to COVID hazards | Places and times | Potential for COVID exposures | Existing and/or additional COVID prevention controls, including barriers, partitions and ventilation |
|---|----------------------|-------------------------------|--|
| Lobby, Main entrance | Daily exit and entry | Low | Mandatory mask wearing; Improved sanitization (touchless hand sanitizer, daily cleaning & disinfection of touched surfaces) |
| Kitchen and open areas | Lunch and meal times | Moderate | Mandatory mask wearing; Improved sanitization (touchless hand sanitizer, daily cleaning & disinfection of shared touched surfaces). Provision of continuous HEPA air filtration. |

| Area, activity, work task, process, equipment, and material that potentially exposes employees to COVID hazards | Places and times | Potential for COVID exposures | Existing and/or additional COVID prevention controls, including barriers, partitions and ventilation |
|---|---------------------------|-------------------------------|--|
| Conference & meeting rooms | Occasional, as needed | Moderate | In-person meetings are discouraged and limited in size and duration. |
| Shared offices | Ongoing | High | Maintain single occupancy offices until COVID threat has abated. Use continuous HEPA air purification. |
| Frequently touched surfaces | Daily, or more, as needed | Low | Cleaning with approved products and use of appropriate PPE. |
| Printing, scanning, copying (use of shared office equipment) | Ongoing | Low | Mandatory mask wearing; Improved sanitization (hand sanitizer, daily cleaning & disinfection of shared touched surfaces) |
| Communal food, snacks | Occasional | Moderate | May provide single serving or pre-packaged items as alternatives (grab & go). |
| Accidental exposure (entering another employee's office) | Ongoing | Low | Entering another person's office will be discouraged. We will implement a Closed Door Policy: if alone in an office with a mask off, the door must be closed. All closed doors will have signs, warning others to knock prior to entering. |

Appendix B: COVID Inspections

Date of periodic inspection: Person(s) Conducting the Evaluation:

Name of Location Evaluated:

| _ | Exposure Controls | Status | Person Assigned to Correct | Date Corrected | |
|----------------|--|--------|-------------------------------|-------------------|--|
| Engineering | | | | | |
| | Isolated Break Areas | | | | |
| | Single Occupancy Offices | | | | |
| | Additional room air filtration | | | | |
| | Disinfect shared Workspaces after use | | | | |
| | Other: | | | | |
| Administrative | | | | | |
| | Physical distancing | | | | |
| | Surface cleaning and disinfection | | | | |
| | Hand washing facilities | | | | |
| | Disinfecting and hand sanitizing solutions used according to manufacturer instructions | | | | |
| | Other: | | | | |
| PPE | | | l | | |
| | Face coverings (KN95) | | | | |
| | Gloves | | | | |
| | Face shields/goggles | | | | |
| | Other | | | | |

Appendix C: Investigating COVID Cases

All personal identifying information of COVID cases will be kept confidential. All COVID testing or related medical services provided by us will be provided in a manner that ensures the confidentiality of employees, with the exception of unredacted information that will be provided immediately upon request to the local health department, CDPH, Cal/OSHA, the National Institute for Occupational Safety and Health (NIOSH), or as otherwise required by law.

All employees' medical records will also be kept confidential and not disclosed or reported without the employee's express written consent to any person within or outside the workplace, with the following exceptions: (1) Unredacted medical records provided to the local health department, CDPH, Cal/OSHA, NIOSH, or as otherwise required by law immediately upon request; and (2) Records that do not contain individually identifiable medical information or from which individually identifiable medical information has been removed.

| Person(s) Conducting the Investigation: | | |
|--|--|--|
| Name(s) of staff involved in the investigation: | | |
| | | |
| | | |
| Date ICSI was informed of the potential case: | | |
| Name of confirmed case: | | |
| Job title, if applicable: | | |
| Date the individual first had one or more COVID symptoms (if they had no symptoms, please indicate): | | |
| Date and time the case was last present in the workplace? | | |
| Was a COVID test offered? □Yes □No | | |
| Date of test: | | |
| Type of testing and result (PCR, antigen, or antibody): | | |
| Did the individual have recent exposure to a COVID case outside the workplace in the previous 14 days? ☐Yes ☐No | | |
| If yes, please describe: | | |

| ICSI was given documentation regarding COVID test results and onset of symptoms. ☐Yes ☐No If yes, attach documentation. | | | | |
|--|--|-----------------------------|-----------|------------------|
| ,, | | | | |
| Locations at the workplace that may and list of who may have been expos | | | gh-risk e | exposure period, |
| | | | | |
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| Notice given (within one business da COVID case) of the potential COVID of | | ot reveal personal identify | ing info | rmation of the |
| All employees who may have had | Date of notification: | | | |
| COVID exposure and their authorized representatives. | Names of employees that were notified: | | | |
| | | | | |
| Other individuals present at the | Date of notification: | | | |
| Other individuals present at the workplace during the high-risk exposure period. | Names of individuals that were notified: | | | |

| Were there workplace conditions that could have contributed to the risk of COVID exposure? If yes, list below: |
|--|
| |
| |
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| |
| If such conditions were identified, list possible mitigation measures to reduce risk: |
| |
| |
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| |
| |
| Was the local health department notified? Yes No Date: |
| Date report was completed: |
| Report completed by: |

Appendix D: COVID Training Roster

| Person(s) Conducting the Training: | | |
|------------------------------------|--|--|
| | | |
| | | |

| Date | Employee Name | Signature |
|------|---------------|-----------|
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