

COVID-19 Prevention Program (“CPP”)

Update July 1, 2021

COVID-19 PREVENTION PROGRAM (CPP)

I. Purpose:

The purpose of the **San Francisco Friends School's (also referred to as "SFFS")** COVID-19 Prevention Program ("CPP") is to provide employees a healthy and safe workplace consistent with the California Occupational Safety and Health Act ("Cal/ OSHA") (Lab. Code §§ 6300, *et seq.*) and associated regulations (8 C.C.R. § 3205).

Nothing in this CPP precludes the **SFFS** from complying with federal, state, or local laws or mandates, or public health orders or guidance that may recommend or require measures that are more prescriptive and/or restrictive than those that are provided herein.

II. Scope

Unless one of the exceptions provided below applies, this CPP shall apply to all **SFFS** employees (hereinafter referred to as "employees"), including those who are "fully vaccinated".

The following employees are exempt from coverage under the CPP: (1) Employees who are teleworking from home or a location of the employee's choice that is not under the control of SFFS, (2) Employees who are working in or at a work location and do not have contact with any other individuals; and (3) Employees who because of their tasks, activities, or work location have with occupational exposure as defined by the Aerosol Transmissible Diseases ("ATD") regulation (*i.e.*, 8 C.C.R. § 5199).

III. DEFINITIONS:

For the purposes of the CPP, the following definitions shall apply:

"Close contact COVID-19 exposure" means being within six (6) feet of a COVID-19 case for a cumulative total of 15 minutes or greater in any 24-hour period within or overlapping with the "high-risk exposure period" as defined here. This definition applies regardless of the use of face coverings. Employees who were wearing a respirator as required by **SFFS** and who used such respirator in compliance with Title 8 Section 5144 during contact with a COVID-19 case will be deemed not to have had close contact COVID-19 exposure. This does not include or except employee who voluntarily elect to wear a respirator.

"COVID-19" means coronavirus disease, an infectious disease caused by the severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2).

"COVID-19 case" means a person who either: (1) Has a positive COVID-19 test as defined in this section; (2) Is subject to COVID-19-related order to isolate

issued by a local or state health official; (3) Has a positive COVID-19 diagnosis from a licensed health care provider; or (4) 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. This also includes objects or surfaces that may be contaminated with SARS-CoV-2.

“COVID-19 symptoms” means one of the following: (1) fever of 100.4 degrees Fahrenheit or higher or chills; (2) cough; (3) shortness of breath or difficulty breathing; (4) fatigue; (5) muscle or body aches; (6) headache; (7) new loss of taste or smell; (8) sore throat; (9) congestion or runny nose; (10) nausea or vomiting; or (11) 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 viral test for SARS-CoV-2 that is both: (1) Approved by the United States Food and Drug Administration (“FDA”) or has an Emergency Use Authorization (“EUA”) from the FDA to diagnose current infection with the SARS-CoV-2 virus; and (2) Administered in accordance with the FDA approval or the FDA EUA as applicable.

“Exposed group” means all employees at a work location, working area, or a common area at work, where a COVID-19 case was present at any time during the high-risk exposure period. However, 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 all employees were wearing face coverings at the time the COVID-19 case was present, other people at the work location, working area, or common area would not constitute part of the exposed group. Common areas at work includes bathrooms, walkways, hallways, aisles, break or eating areas, and waiting areas. However, places where employees momentarily pass through while everyone is wearing face coverings, without congregating, is not a work location, working area, or a common area at work.

“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. A face covering has no visible holes or openings, and must cover the nose and mouth. A face covering does not include a scarf, ski mask, balaclava, bandana, turtleneck, collar, or single layer of fabric.

“Fully vaccinated” means the **SFFS** has documented that the person received, at least 14 days prior, either the second dose in a two-dose COVID-19 vaccine series or a single-dose COVID-19 vaccine. Vaccines must be FDA approved;

have an emergency use authorization from the FDA; or, for persons fully vaccinated outside the United States, be listed for emergency use by the World Health Organization (WHO).

“High-risk exposure period” means the following: For COVID-19 cases who develop COVID-19 symptoms: from two (2) days before they first develop symptoms until each of the following are true: (1) it has been ten (10) days since symptoms first appeared; (2) 24 hours have passed with no fever, without the use of fever-reducing medications; and (3) symptoms have improved. For COVID-19 cases who never develop COVID-19 symptoms: from two (2) days before until ten (10) days after 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.

“Worksite,” for the limited purposes of COVID-19 prevention regulations only, means the building, store, facility, agricultural field, or other location where a COVID-19 case was present during the high-risk exposure period. It does not apply to buildings, floors, or other locations of the **SFFS** that a COVID-19 case did not enter.

“Workplace Coordinator means the individual assigned by SFFS who will be responsible for COVID-19 issues on the SFFS’s behalf. The CFOO is the Workplace Coordinator.

IV. Program

A. SYSTEM FOR COMMUNICATING WITH EMPLOYEES

1. Reporting COVID-19 Symptoms, Possible COVID-19 Close Contact Exposures, and Possible COVID-19 Hazards at SFFS Worksites and Facilities

The **SFFS** requires that employees immediately report to their manager or supervisor or to the **Workplace COVID-19 Coordinator** any of the following: (1) the employee’s presentation of COVID-19 symptoms; (2) the employee’s possible COVID-19 close contact exposures; (3) possible COVID-19 hazards at the **SFFS** worksite or facilities.

The **SFFS** will not discriminate or retaliate against any employee who makes such a report.

2. Accommodations Process for Employees

The School provides an accommodation process for employees to request an accommodation who (1) can demonstrate that they remain at increased risk of severe illness from COVID-19 despite being fully vaccinated; or (2) can demonstrate that they are precluded from being fully vaccinated against COVID-19 due to disability, medical condition, or a sincerely held religious belief.

To request an accommodation, employees may make a request with their manager or supervisor or the **Director of Human Resources**.

3. COVID-19 Testing

SFFS possesses authority to require that employees who report to work at **SFFS** worksites or facilities be tested for COVID-19.

Where **SFFS** requires testing, **SFFS** has adopted policies and procedures that ensure the confidentiality of employees' medical information and comply with the Confidentiality of Medical Information Act ("CMIA"). Specifically, **SFFS** will keep confidential all personal identifying information of COVID-19 cases or persons with COVID-19 symptoms, unless expressly authorized by the employee to disclose such information or as other permitted or required under the law.

4. COVID-19 Hazards

SFFS will notify employees and subcontracted employees of any potential COVID-19 exposure at a **SFFS** worksite or facility where a COVID-19 case and employees were present on the same day. **SFFS** will notify employees of such potential exposures within one (1) business day, in a way that does not reveal any personal identifying information of the COVID-19 case.

SFFS will also notify employees of cleaning and disinfecting measures **SFFS** is undertaking in order to ensure the health and safety of the **SFFS** worksite or facility where the potential exposure occurred.

B. IDENTIFICATION AND EVALUATION OF COVID-19 HAZARDS AT SFFS WORKSITES AND FACILITIES

1. Screening Employees for COVID-19 Symptoms

SFFS possesses authority to **screen employees or require that employee self-screen** for COVID-19 symptoms.

The **SFFS** requires that employees will self-screen for COVID-19 symptoms prior to reporting to any **SFFS** worksite or facility.

2. Responding to Employees with COVID-19 Symptoms

Should an employee present COVID-19 symptoms during an **SFFS administered screening or a self-screen**], the employee must remain at or return to their home or place of residence and not report to work until such time as the employee satisfies the minimum criteria in order to return to work (as discussed in Section IV.J. of this CPP).

SFFS will advise employees of any leaves to which they may be entitled during this self-quarantine period, including, but not limited to COVID-19 Supplemental Paid Sick Leave (“SPSL”).

Further, **SFFS** has adopted policies and procedures that will ensure the confidentiality of employees and comply with the CMIA, and **SFFS** will not disclose to other employees the fact that the employees presented COVID-19 symptoms.

3. SFFS’s Response to COVID-19 Cases

In the event that an employee tests positive for COVID-19 or is diagnosed with COVID-19 by a health care provider, **SFFS** will instruct the employee to remain at or return to their home or place of residence and not report to work until such time as they satisfy the minimum criteria to return to work (as discussed in Section IV.J. of this CPP).

SFFS will advise employees of any leaves to which they may be entitled during this self-isolation period, including, but not limited to SPSL.

SFFS shall comply with all reporting and recording obligations as required under the law, including, but not limited to, reporting the COVID-19 case to the following individuals and entities as required based on the individual circumstances: (1) The local health department; (2) Cal/OSHA; (3) Employees who were present at a **SFFS** worksite or facility when a COVID-19 case was present; (4) Employers of any subcontracted employees who were present at the **SFFS** worksite or facility; and (5) The **SFFS** workers’ compensation plan administrator.

If possible, **SFFS** will interview the COVID-19 case(s) in order to ascertain the nature and circumstances of any contact that the employee(s) had or may have had with other employees during the high-risk exposure period. If **SFFS** determines that there were any close contact COVID-19 exposures, **SFFS** will instruct those employees to remain at their home or place of residence and not report to work until such time as the employees satisfy the minimum criteria to return to work (as discussed in Section IV.J. of this CPP).

SFFS has adopted policies and procedures to promote the confidentiality of employees and comply with the CMIA. Specifically, **SFFS** will not disclose to other employees, except for those who need to know, the fact that the employee(s) tested positive for or were diagnosed with COVID-19. Further, **SFFS** will keep confidential all personal identifying information of COVID-19 cases or persons, unless expressly authorized by

the employees to disclose such information or as other permitted or required under the law.

4. Workplace-Specific Identification of COVID-19 Hazards

SFFS will periodically conduct workplace-specific assessments of all interactions, areas, activities, processes, equipment, and materials that could potentially expose employees to COVID-19 hazards.

As part of this process, **SFFS** identified places (e.g., work locations, work areas, and common areas) and times when employees and individuals congregate or come in contact with one another, regardless of whether employees are performing an assigned work task or not, including, for example, during meetings or trainings, in and around entrances, bathrooms, hallways, aisles, walkways, elevators, break or eating areas, cool-down areas, and waiting areas.

SFFS will provide notice of any such potential workplace exposure to all persons at **SFFS** worksites and facilities, including employees, employees of other entities, members of the public, customers or clients, and independent contractors. **SFFS** considered how employees and other persons enter, leave, and travel through **SFFS** worksites and facilities, in addition to addressing employees' stationary workspaces or workstations.

Further, **SFFS** will treat all persons, regardless of the presentation of COVID-19 symptoms or COVID-19 status, as potentially infectious.

5. Maximization of Outdoor Air and Air Filtration

For indoor **SFFS** worksites and facilities, **SFFS** evaluates how to maximize the ventilation of outdoor air; provide the highest level of filtration efficiency compatible with the worksites and facilities' existing ventilation systems; and whether the use of portable or mounted High Efficiency Particulate Air ("HEPA") filtration units, or other air cleaning systems, would reduce the risk of COVID-19 transmission.

6. SFFS Compliance with Applicable State and Local Health Orders

SFFS monitors applicable public health orders and guidance from the State of California and the local health department related to COVID-19 hazards and prevention.

SFFS shall comply with all applicable orders and guidance from the State of California and the local health department.

7. Evaluation of Existing COVID-19 Prevention Controls and Adoption of Additional Controls

Periodically, **SFFS** evaluates existing COVID-19 prevention controls at the workplace and assess whether different and/or additional controls may be needed.

This includes evaluation of controls related to the correction of COVID-19 hazards, physical distancing, face coverings, engineering controls, administrative controls, and personal protective equipment (PPE) (as discussed at Section VI, subsections D, and F-H of this CPP).

8. Periodic Inspections

SFFS conducts periodic inspections of **SFFS** worksites and facilities as needed to identify unhealthy conditions, work practices, and work procedures related to COVID-19 and to ensure compliance with the **SFFS** COVID-19 policies and procedures, including, but not limited to this CPP.

C. INVESTIGATING AND RESPONDING TO COVID-19 CASES IN SFFS WORKSITES AND FACILITIES

1. Procedure to Investigate COVID-19 Cases

SFFS developed a procedure for investigating COVID-19 cases in the workplace, which provides for the following: (1) requesting information from employees regarding COVID-19 cases; (2) contact tracing of employees who may have had a close contact COVID-19 exposure; (3) requesting COVID-19 test results from employees who may have had a close contact COVID-19 exposure; (4) requesting information from employees regarding the presentation of COVID-19 symptoms; and (5) identifying and recording all COVID-19 cases.

2. Response to COVID-19 Cases

As provided above at Section IV.B.3., in the event that an employee tests positive for COVID-19 or is diagnosed with COVID-19 by a health care provider, **SFFS** will instruct the employee to remain at or return to their home or place of residence and not report to a **SFFS** worksite or facility until such time as the employees satisfy the minimum criteria to return to work (as discussed in Section IV.J. of this CPP).

a. Contact Tracing

If possible, the **SFFS** will interview the COVID-19 case(s) in order to ascertain the following information: (1) the date on which the employee(s) tested positive, if asymptomatic, or the date on which the employee(s) first presented COVID-19 symptoms, if symptomatic; (2) the COVID-19 case(s) recent work history, including the day and time they were last present at **SFFS** worksite or facility; and (3) the nature and circumstances of the COVID-19 case(s)' contact with other employees during the high-

risk exposure period, including whether any such contact qualifies as a close contact COVID-19 exposure.

If **SFFS** determines that there was or were any close contact COVID-19 exposures, the **SFFS** will instruct those employees to remain at their home or place of residence and not report to work until such time as the employees satisfy the minimum criteria to return to work (as discussed in Section IV.J. of this CPP). Further, **SFFS** will instruct those employees to be tested for COVID-19, and that **SFFS** will provide for such testing during paid time, as discussed in subsection c. below.

b. Reporting the Potential Exposure to Other Employees

SFFS shall comply with all reporting and recording obligations as required under the law, including, but not limited to, reporting the COVID-19 case to the individuals and entities described below.

Within one (1) business day of the time that **SFFS** knew or should have known of a COVID-19 case, **SFFS** will give written notice of a potential workplace exposure to the following individuals: (1) All employees at the worksite or facility during the COVID-19 case's high-risk exposure period; (2) Independent contractors at the worksite or facility during the COVID-19 case's high-risk exposure period; and (3) Other employers at the worksite or facility during the COVID-19 case's high-risk exposure period. **SFFS** will provide notice by either personal service, email, or text message.

The **SFFS** notice(s) will not reveal any personal identifying information of the COVID-19 case. The notice will include information about the **SFFS** disinfection plan.

c. Offer of Free COVID-19 Testing Following a Close Contact COVID-19 Exposure

The **SFFS** makes COVID-19 testing available at no cost to employees to all employees who had a close contact COVID-19 exposure at a **SFFS** worksite or facility. The **SFFS** will offer employees COVID-19 testing during paid time, whether during the employee's regular work schedule or otherwise, and will provide compensation for the time that the employee spends waiting for and being tested.

SFFS will not provide free COVID-19 testing to the following two (2) classes of employees: (1) Employees who were fully vaccinated before the close contact COVID-19 exposure and who do not have COVID-19 symptoms, and (2) COVID-19 cases who returned to work pursuant to the criteria set forth in Section K of this CPP and have remained free of COVID-19 symptoms, for 90 days after the initial onset of COVID-19 symptoms or, for COVID-19 cases who never developed symptoms, for 90 days after the first positive test.

d. Leave and Compensation Benefits for Close Contact Exposures

SFFS provides employees that had a close contact COVID-19 exposure with information regarding COVID-19-related benefits to which the employees may be entitled under applicable federal, state, or local law, SFFS’s own leave policies, and leave guaranteed by contract. These benefits include, but are not limited to, SPSL.

SFFS will continue and maintain these employees’ earnings, seniority, and all other employee rights and benefits, including the employees’ right to their former job status, as if the employees had not been removed from their jobs.

SFFS may require that these employees use **SFFS**-provided employee sick leave benefits for this purpose and consider benefit payments from public sources in determining how to maintain earnings, rights and benefits, where permitted by law and when not covered by workers’ compensation.

e. Investigation to Determine Whether Workplace Conditions Contributed to COVID-19 Exposure

SFFS will conduct an investigation in order to determine whether any workplace conditions could have contributed to the risk of COVID-19 exposure and what may be done to reduce exposure to such COVID-19 hazards, if any.

3. Confidential Medical Information

SFFS will protect the confidentiality of the COVID-19 cases, and will not disclose to other employees the fact that the employees tested positive for or were diagnosed with COVID-19.

SFFS will keep confidential all personal identifying information of COVID-19 cases unless expressly authorized by the employees to disclose such information or as other permitted or required under the law.

D. CORRECTION OF COVID-19 HAZARDS AT SFFSWORKSITES AND FACILITIES

SFFS will implement effective policies and/or procedures for correcting unsafe or unhealthy conditions, work practices, policies and procedures in a timely manner based on the severity of the hazard.

This includes, but is not limited to, implementing controls and/or policies and procedures in response to the evaluations conducted related to the identification and evaluation of COVID-19 hazards and investigating and responding to COVID-19 cases in the workplace. This also includes implementing controls related to physical distancing, face coverings, engineering controls, administrative controls, and personal protective equipment (“PPE”).

E. TRAINING AND INSTRUCTION OF EMPLOYEES

1. COVID-19 Symptoms

SFFS provides employees training and instruction on COVID-19 symptoms, including advising employees of COVID-19 symptoms, which include the following: (1) fever of 100.4 degrees Fahrenheit or higher or chills; (2) cough; (3) shortness of breath or difficulty breathing; (4) fatigue; (5) muscle or body aches; (6) headache; (7) new loss of taste or smell; (8) sore throat; (9) congestion or runny nose; (10) nausea or vomiting; or (11) diarrhea, unless a licensed health care professional determines the person's symptoms were caused by a known condition other than COVID-19.

SFFS monitors and adheres to guidance issued by the CDC concerning COVID-19 symptoms, including guidance provided at the following web address: <https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html>. The **SFFS** will advise employees in the event that the CDC revises the symptoms that its associates with COVID-19.

In addition to providing training and instruction on COVID-19 symptoms, **SFFS** provides information and instruction on the importance of employees not coming to work if they have any COVID-19 symptoms. As discussed below, **SFFS** provides information on paid leaves to which employees may be entitled if they are experiencing a COVID-19 symptom and would like to be tested for COVID-19.

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2. COVID-19 Vaccinations

SFFS provides employees information and instruction on the fact that COVID-19 vaccines are effective at both preventing the transmission of the virus that causes COVID-19 and preventing serious illness or death, and how employees may receive paid leave for reasons related to COVID-19 vaccinations.

As discussed below, **SFFS** provides information on paid leaves to which employees may be entitled in order for them to be vaccinated and in the event that they experience any illness or adverse effects as a result of such vaccination.

3. SFFS's COVID-19 Policies and Procedures

SFFS provides regular updates to employees on the school's policies and procedures adopted in order to prevent COVID-19 hazards at **SFFS** worksites and facilities, how such policies and procedures are intended to protect the health and safety of employees and **SFFS** worksites and facilities, and how employees may participate in the identification and evaluation of COVID-19 hazards in order to make such worksites and facilities healthier and safer for themselves and others.

4. COVID-19 Related Benefits

SFFS advises and provides updates to employees on the leaves to which employees may be entitled under applicable federal, state, or local laws as well as the **SFFS**'s own leave policies. Paid leave benefits include, but are not limited to, SPSL.

Further, when employees require leave in order to receive a COVID-19 test or to be vaccinated or are directed not to report to work by **SFFS** for reasons related to the presentation of COVID-19 symptoms, a COVID-19 case, close contact COVID-19 exposure, **SFFS** will advise the employees of the leaves to which the employees may be entitled for that specific reason.

5. Spread and Transmission of the Virus that Causes COVID-19

SFFS advises and provides updates to employees about the known spread and transmission of COVID-19. **SFFS** specifically advises employees of the following: (1) that COVID-19 is an infectious respiratory disease; (2) that the virus that causes COVID-19 can be spread through the air when an infectious person talks or vocalizes, sneezes, coughs, or exhales; (3) that particles containing the virus can travel more than six (6) feet, especially indoors, so physical distancing must be combined with other controls, including face coverings and hand hygiene, including hand washing, in order to be effective; (4) that COVID-19 may be transmitted when a person touches a contaminated object and then touches their eyes, nose, or mouth, although that is less common; and (5) that an infectious person may have present no COVID-19 symptoms or be pre-symptomatic.

6. Hand Hygiene, and Face Coverings and Respirators

SFFS advises employees of the importance of physical distancing, face coverings, and hand hygiene, including hand washing, and instructs employees that the combination of physical distancing, face coverings, increased ventilation indoors, and respiratory protection make such preventative measures most effective.

With respect to hand hygiene, **SFFS** provides employees information regarding the importance of frequent hand washing, that hand washing is most effective when soap and water are used and the employees washes for at least 20 seconds. **SFFS** instructs employees to use hand sanitizer when employees do not have immediate access to a hand washing facility (*i.e.*, a sink) and that hand sanitizer will not be effective if the employee's hands are soiled.

With respect to face coverings and respirators, **SFFS** provides employees information on the benefits of face coverings, both to themselves and to others. **SFFS** also provides employees instructions on the proper use of face coverings and the differences between face coverings and respirators.

SFFS will provide certain employees respirators for their use in certain circumstances, including to individuals who are not fully vaccinated, who are working indoors or in a vehicle with more than one person, and who request the devices for their use at work.

At such time as **SFFS** provides respirators to employees for their use, it will provide such employees training on the proper use of such respirators, including, but not limited to, the method by which employees may check the seal of such respirator in conformance with the manufacturer's instructions.

SFFS will provide training on the conditions under which face coverings must be worn at the workplace and that face coverings are additionally recommended outdoors for people who are not fully vaccinated if six (6) feet of distance between people cannot be maintained. Employees can request face coverings from **SFFS** at no cost to the employee and can wear them at work, regardless of vaccination status, without fear of retaliation.

F. FACE COVERINGS

1. General Face Covering Requirements

All employees must wear face coverings while in indoor settings at **SFFS** worksites and facilities and while in **SFFS** vehicles regardless of vaccination status subject to the limited exceptions set forth below.

SFFS adheres to the most restrictive or prescriptive federal and state public health orders, mandates, laws, and regulations regarding face coverings, including those from the CDPH, Cal/OSHA, and the local health department, applicable to **SFFS** and will provide face coverings to employees and enforce the wearing of face coverings by employees when so required.

SFFS requires that employees' face coverings be clean and undamaged. **SFFS** allows employees to use face shields to supplement, not supplant, face coverings.

2. Limited Exceptions

SFFS provides for the following exceptions to the face coverings requirement:

1. When an employee is alone in a room (e.g., alone in an office or another space with walls that extend from the floor to the ceiling and a door that may be closed in order to close the space to others) or vehicle;
2. While eating and drinking at the workplace, provided employees are at least six (6) feet apart and outside air supply to the area, if indoors, has been maximized to the extent feasible.
3. Employees wearing respirators required by the **SFFS** and being used in compliance with the regulatory requirements for the use of such respirators.

4. Employees who cannot wear face coverings due to a medical or mental health condition or disability, or who are hearing-impaired or communicating with a hearing-impaired person.
5. Specific tasks which cannot feasibly be performed with a face covering. This exception is limited to the time period in which such tasks are actually being performed

3. **Required Use of Effective Non-Restrictive Alternative for Employees Exempted from Face Covering Requirement**

SFFS requires that its employees who are exempted from wearing face coverings due to a medical condition, mental health condition, or disability wear an effective non-restrictive alternative, such as a face shield with a drape on the bottom, if their condition or disability permits it.

4. **Physical Distancing Required If Employee Is Not Wearing Face Covering or Non-Restrictive Alternative**

SFFS requires that any employees not wearing a face covering due to either exception number 4 or 5, identified in Subsection 2 above, and not wearing a face shield with a drape or other effective alternative as described in Subsection 3 above, shall remain at least six (6) feet apart from all other persons unless the unmasked employees are tested at least weekly for COVID-19 during paid time and at no cost to the employee or are fully vaccinated.

In situations where a face covering is otherwise required, face coverings must be worn, and the exceptions to face coverings contained in this section no longer apply.

However, **SFFS** does not use COVID-19 testing as an alternative to face coverings when face coverings are otherwise required by this section.

5. **Prohibition on Preventing Employees from Wearing Face Covering**

The **SFFS** does not prevent any employee from wearing a face covering when wearing a face covering is not required by this section, unless wearing a face covering would create a safety hazard, such as interfering with the safe operation of equipment.

6. **Communication to Non-Employees Regarding Face Covering Requirement**

SFFS posts signage to inform non-employees of the **SFFS** requirements concerning the use of face coverings at **SFFS** worksites and facilities.

G. OTHER ENGINEERING CONTROLS, ADMINISTRATIVE CONTROLS AND PERSONAL PROTECTIVE EQUIPMENT (PPE)

1. Maximization of Outdoor Air

As provided above at Section IV.B.5., for indoor **SFFS** worksites and facilities, the **SFFS** evaluated how to maximize the quantity of outdoor air.

Further, for **SFFS** worksites and facilities with mechanical or natural ventilation, or both, the **SFFS** maximizes the quantity of outside air provided to the extent feasible, except when the Environmental Protection Agency (“EPA”) Air Quality Index (“AQI”) is greater than 100 for any pollutant or if opening windows or letting in outdoor air by other means would cause a hazard to employees, for instance from excessive heat or cold.

2. Cleaning Procedures

SFFS undertakes the following cleaning measures:

1. Identify and regularly clean frequently touched surfaces and objects, such as doorknobs, elevator buttons, equipment, tools, handrails, handles, controls, phone, headsets, bathroom surfaces, and steering wheels;
2. Inform employees and authorized employee representatives of the **SFFS**'s cleaning and disinfection protocols, including the planned frequency and scope of cleaning and disinfection; and
3. Clean areas, material, and equipment used by a COVID-19 case during the high-risk exposure period and disinfection if the area, material, or equipment is indoors and will be used by another employee within 24 hours of the COVID-19 case.

Further, **SFFS** requires that cleaning must be done in a manner that does not create a hazard to employees or subcontracted employees who do the cleaning and disinfecting.

3. Evaluation of Handwashing Facilities

In order to protect employees, **SFFS** evaluates its handwashing facilities in order to determine the need for additional facilities, encourage and allow time for employee handwashing, and provide employees with an effective hand sanitizer.

SFFS encourages employees to wash their hands with soap and water for at least 20 seconds each time.

SFFS does not provide hand sanitizers with methyl alcohol.

4. Personal Protective Equipment (“PPE”)

a. Evaluation of the Need for PPE

SFFS evaluates the need for PPE in order to prevent employees from being exposed to COVID-19 hazards.

b. Provision of PPE When Necessary

SFFS provides PPE, including, but not limited to, face coverings, respirators, gloves, goggles, and face shields, to and for employees who require such equipment in order to perform their job duties in a healthy and safe manner, including where employees are exposed to procedures that may aerosolize potentially infectious material such as saliva or respiratory tract fluids.

Upon request, **SFFS** shall provide respirators to employees for voluntary use to all employees who are not fully vaccinated and who are working indoors or in vehicles with more than one person. Whenever **SFFS** makes respirators available for voluntary use, **SFFS** will provide employees with a respirator of the correct size and will provide such employees training on the proper use of such respirators, including, but not limited, the method by which employees may check the seal of such respirator in conformance with the manufacturer’s instructions, as discussed in Section IV.E.6.

5. Testing of Symptomatic Employees Who Are Not Fully Vaccinated

SFFS makes COVID-19 testing available at no cost to employees with COVID-19 symptoms who are not fully vaccinated. This testing will be made available during the employees’ paid time.

H. REPORTING, RECORDKEEPING AND ACCESS

1. Reporting COVID-19 Cases to the Local Health Department

SFFS reports COVID-19 cases and COVID-19 outbreaks at **SFFS** worksites and facilities to the local health department. Further, **SFFS** provides any related information requested by the local health department.

2. Maintenance of Records Related to the Adoption of the CPP

The **SFFS** maintains records of the steps it has taken to implement the provisions described in this CPP.

3. Availability of the CPP for Inspection

SFFS makes this written CPP available to employees at **SFFS** worksites or facilities. Further, **SFFS** makes this written CPP available to Cal/OSHA representatives immediately upon request.

4. Records Related to COVID-19 Cases

SFFS keeps a record of and tracks all COVID-19 cases with the following information: (1) employee's name; (2) contact information; (3) occupation; (4) location where the employee worked; (5) the date of the last day at the workplace; and (6) the date of a positive COVID-19 test.

SFFS keeps employees' medical information confidential.

I. EXCLUSION OF COVID-19 CASES AND EMPLOYEES WHO HAD A CLOSE CONTACT COVID-19 EXPOSURE

1. Exclusion of COVID-19 Cases from SFFS Worksites and Facilities

SFFS ensures that COVID-19 cases are excluded from **SFFS** worksites and facilities until the employee satisfies the minimum return to work criteria, as provided in Section IV.J.

2. Exclusion of Employees with Close Contact COVID-19 Exposures from SFFS Worksites and Facilities

SFFS takes steps to exclude employees who had a close contact COVID-19 exposure from **SFFS** worksites and facilities until the employee satisfies the minimum return to work criteria, as provided in Section IV.J.

SFFS may allow the following employees to continue to report to **SFFS** worksites and facilities: (1) Employees who were fully vaccinated before the close contact COVID-19 exposure and who have not developed COVID-19 symptoms since such exposure; and (2) COVID-19 cases who returned to work pursuant to the return to work criteria, as provided in Section IV.J. and have remained free of COVID-19 symptoms for 90 days after the initial onset of COVID-19 symptoms, or, for COVID-19 cases who never developed COVID-19 symptoms, for 90 days after the first positive COVID-19 test.

3. **Provision of Benefits to Employees Excluded from Work as a Result of a Positive COVID-19 Test or Diagnosis or a Close Contact COVID-19 Exposure**

a. **Employees Who Are Able to Telework During Isolation or Quarantine Period**

SFFS allows employees who are able to telework to telework during the isolation or quarantine period. **SFFS** will provide these employees their normal compensation for the work that they perform for **SFFS** during the isolation or quarantine period.

SFFS continues and maintains such an employee's earnings, wages, 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.

b. **Employees Who Are Unable to Telework During Isolation or Quarantine Period**

The following employees are not entitled to the benefits described below: (1) Employees for whom **SFFS** can demonstrate that the close contact COVID-19 exposure was not work-related; and (2) Employees who received disability payments or were covered by workers' compensation and received temporary disability. Such employees may still use paid sick leave for the purpose of receiving compensation during the isolation or quarantine period if they elect to do so.

For other employees, **SFFS** requires that employees who are unable to telework, but are otherwise able and available to work, **SFFS** may use paid sick leave available to the employee, including but not limited to SPSL, for the purpose of continuing and maintaining the employee's earnings during the isolation or quarantine period. If the employee has exhausted their SPSL entitlement, **SFFS** may use the employee's paid sick leave in order to continue and maintain the employee's earnings during the isolation or quarantine period.

Employees retain their entitlement to elect not to use other earned or accrued paid leave during this time. **SFFS** may provide such employees who are unable to telework, but who do not have any paid sick leave available, paid administrative leave in order to receive compensation during the isolation or quarantine period.

For all employees who are subject to an isolation or quarantine because of a COVID-19 case or a close contact COVID-19 exposure, **SFFS** will maintain the employees' seniority and all other employee rights and benefits, including the employees' right to their former job status, during the isolation or quarantine period.

4. **Adherence with Laws, Policies, and/or Agreements Providing Excluded Employees Greater Protections**

The obligations set forth in this section do not limit any other applicable law, **SFFS** policy, or collective bargaining agreement that provides employees with greater protections or benefits.

5. Provision of Information Concerning Benefits to Excluded Employees

At the time of exclusion, **SFFS** provides the excluded employees the information on paid leave benefits to which the employees may be entitled under applicable federal, state, or local laws.

This includes, but is not limited to, COVID-19 Supplemental Paid Sick Leave (“SPSL”) (under Labor Code section 248.2), any paid leave benefits available under workers’ compensation law, Labor Code sections 3212.86 through 3212.88, **[any applicable local governmental requirements]**, **SFFS’s** own leave policies, and leave guaranteed by contract.

J. RETURN TO WORK CRITERIA

1. Minimum Criteria to Return to Work for Symptomatic COVID-19 Cases

SFFS requires that a COVID-19 case with one or more COVID-19 symptoms remain at their home or place of residence and not report to any **SFFS** worksite or facility until they satisfy each of the following conditions: (1) At least 24 hours have passed since a fever of 100.4 degrees Fahrenheit or higher has resolved without the use of fever-reducing medications; (2) COVID-19 symptoms have improved; and (3) At least 10 days have passed since COVID-19 symptoms first appeared.

2. Minimum Criteria to Return to Work for Asymptomatic COVID-19 Cases

SFFS requires that COVID-19 cases who tested positive but never developed COVID-19 symptoms not report to any **SFFS** worksite or facility until a minimum of 10 days have passed since the date of specimen collection of their first positive COVID-19 test.

3. COVID-19 Testing Not Required in Order to Return to Work

In accordance with CDC guidance concerning symptom-based strategies for the discontinuation of isolation, once an employee has satisfied the criteria to return to work, as provided in this Section, the **SFFS** will not require that the employee submit to a COVID-19 test or produce a negative COVID-19 test result, in order to return to **SFFS** worksites or facilities.

4. Minimum Criteria to Return to Work for Close Contacts

a. Asymptomatic Employees

An employee who had a close contact COVID-19 exposure, but never developed COVID-19 symptoms may return to **SFFS** worksites or facilities 10 days following the last known close contact COVID-19 exposure.

b. Symptomatic Employees

An employee who had a close contact COVID-19 exposure and developed one or more COVID-19 symptom may not return to **SFFS** worksites or facilities until they satisfy each of the following conditions: (1) At least 24 hours have passed since a fever of 100.4 degrees Fahrenheit or higher has resolved without the use of fever-reducing medications; (2) COVID-19 symptoms have improved; and (3) At least 10 days have passed since COVID-19 symptoms first appeared.

An employees who had a close contact COVID-19 exposure and developed one or more COVID-19 symptom may return earlier if they each of the following conditions: (1) The employee tested negative for COVID-19 using a polymerase chain reaction (“PCR”) COVID-19 test with specimen taken after the onset of symptoms; (2) At least 10 days have passed since the last known close contact COVID-19 exposure; and (3) The employee has been symptom-free for at least 24 hours, without using fever reducing medications.

5. Minimum Criteria to Return to Work for Employees Directed to Self-Quarantine or Isolate by a State or Local Health Official

If employees are subject to an isolation or quarantine order issued by a state or local health official, the **SFFS** requires that the employees not report to any **SFFS** worksite or facility until the period of isolation or quarantine is completed or the order is lifted.

If the relevant order did not specify a definite isolation or quarantine period, then **SFFS** will require that employees isolate or quarantine according to the applicable periods and criteria provided for in this Section or as otherwise instructed by **SFFS**

Employee Authorization for the San Francisco Friends School Use and Disclosure of Confidential Medical Information

Confidentiality of Medical Information Act (“CMIA”), Civil Code §§ 56.20, 56.21.

Pursuant to California’s Confidentiality of Medical Information Act, I, _____ **[Name of Employee]**, authorize the **San Francisco Friends School** to use and disclose information regarding my COVID-19 vaccination status for legitimate, non-discriminatory business purposes where my vaccination status is necessary for San Francisco Friends School to make work-related decisions authorized by or in order to comply with federal, state, or local law or regulation that takes a person’s vaccination status into account.

Specifically, I authorize the **San Francisco Friends School** to use and disclose this information for the purposes provided under the Cal/OSHA COVID-19 Regulations (8 C.C.R. §§ 3205-3205.4), including, but not limited to, decisions regarding the use of face coverings.

This Authorization Is Limited to The Following Types of Information:

Information regarding my COVID-19 vaccination status.

The San Francisco Friends School Is Authorized to Use This Information for The Following Purposes:

For legitimate, non-discriminatory business purposes where information regarding my vaccination status is necessary for the **SFFS** to (1) to maintain a safe and healthy workplace as required under Labor Code section 6400, et seq.; (2) to permit compliance with federal, state, and local laws and regulations related to COVID-19, including the Emergency Temporary Standards (Cal/OSHA COVID-19 Regulations) (See 8 C.C.R. §§ 3205-3205.4); and (3) to promote safe and healthy **SFFS** operations for employees, students, families, and other members of the School community.

The Following Parties Are Authorized to Disclose This Information for The Above Purposes:

The **San Francisco Friends School** and the **SFFS**’s authorized representatives where:

1. The disclosure of my vaccination status is or may be impliedly or constructively disclosed by my action(s) (e.g., not wearing a face covering in the workplace); and/or
2. The disclosure of my vaccination status is or may be impliedly or constructively disclosed by action(s) of the **San Francisco Friends School** or the **SFFS** authorized representatives (e.g., allowing me to not wear a face covering in the workplace).

The Following Parties Are Authorized to Receive Disclosure of This Information for the Above Purposes:

Any agent, representative, or employee of **SFFS** visitor, invitee or other member of the public accessing **SFFS** premises or facilities, etc., who may become aware of my vaccination status, by my action(s) and/or those of **SFFS** (e.g., become aware that I am fully vaccinated by my choice to remove a face covering in the workplace with **SFFS**'s consent).

Authorization Period:

The parties specified above are authorized to disclose information regarding my COVID-19 vaccination status in the manner specified above through August 15, 2023.

Right to Receive a Copy of This Authorization:

I understand that if I sign this authorization, I have the right to receive a copy of this authorization. Upon request, the **SFFS** will provide me with a copy of this authorization.

I authorize the limited uses and disclosures of my medical information as described above for the purposes listed above. I understand that this authorization is voluntary and that I am signing this authorization voluntarily.

Employee's Name	Signature	Date

San Francisco Friends School

Employee Self-Attestation of COVID-19 Vaccination Status

The **[Name of School]** is requesting information about your vaccination status for the following legitimate and non-discriminatory business purposes:

- (1) To maintain a safe and healthy workplace as required under Labor Code section 6400, et seq.;
- (2) To permit compliance with federal, state, and local laws and regulations related to COVID-19, including the Emergency Temporary Standards (Cal/OSHA COVID-19 Regulations) (See 8 C.C.R. §§ 3205-3205.4); and
- (3) To promote safe and healthy **San Francisco Friends School** operations for employees, students, families, and other members of the School community.

Please do NOT provide information related to any health or medical conditions or any other confidential medical information while completing this form. If you provide any such information, the **San Francisco Friends School** will return the form or information to you and require that you complete another attestation without such information.

Employee Attestation as to Vaccination Status

I, _____ [Name of Employee], attest to the following (CHECK ONE):

I have been fully vaccinated against COVID-19. “Fully vaccinated” means at least fourteen (14) days have passed since you received either (1) the second dose of a two-dose COVID-19 vaccine series, or (2) a single-dose COVID-19 vaccine.

OR

I have NOT been fully vaccinated against COVID-19. See definition of “fully vaccinated,” provided above.

If you selected the first checkbox indicating that you ARE fully vaccinated, then please list the name of the manufacturer of the COVID-19 vaccine that you received and the date you received the most recent dose:

Name of Vaccine and Manufacturer Date

I attest that the above information is true and correct.

Employee’s Name (PLEASE PRINT) Signature Date