

Updated 12/15/2020

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1. Introduction

The purpose of this plan is to define the measures being taken by Carmel Unified School District to help reduce the risk of infection from the COVID-19 virus (a.k.a., SARS-CoV-2, coronavirus). The defined measures are based upon guidance from established public health authorities as of the date of this document, including the U.S. Centers for Disease Control and Prevention (CDC), U.S. Occupational Safety and Health Administration (OSHA), and California Department of Public Health, as well as other published environmental health research and guidance materials. While the provisions of this document are intended to help reduce COVID-19 risk, they cannot guarantee that infection will not occur.

This plan begins by providing an overview of how it is applied and implemented, along with a summary of assigned roles and responsibilities. This is followed by a more specific discussion of various plan elements.

2. Application & Implementation Overview

This plan applies to all work areas and operations and is implemented as follows:

- 1. CDPH Cal/OSHA Reopening Protocols. The County of Monterey Department of Public Health has referenced the CDPH Cal/OSHA COVID-19 General Checklist for Schools and School-Based Programs which details specific employee and student safety, and infection control requirements schools must comply with in addition to conditions imposed on schools by the State Public Health Officer and the California Department of Education. Carmel USD has responded to these CDPH requirements in detail in Section 6 of this plan. The remainder of this safety plan contains the protocols and documents Carmel USD has developed to implement the CDPH reopening requirements.
- 2. <u>COVID-19 Safety Teams</u>. The COVID-19 Safety Coordinator is responsible for managing this plan and facilitating the COVID-19 safety teams, which are described below:
 - a. *Core Team.* This team monitors current public health guidance, along with information regarding plan implementation, and determines how COVID-19 safety will be addressed by updating the provisions of this plan as appropriate.
 - b. Extended Team. This team consists of representatives from primary organizational units and serves as a bridge between the core team and all employees and stakeholders. The team reviews information and plan updates provided by the core team and provides feedback regarding challenges and opportunities related to the implementation of plan provisions.

A listing of the COVID-19 Safety Coordinator and team members, along with associated contact information and current meeting plans, is maintained by the COVID-19 Safety Coordinator using the "Contacts & Resources" form provided in Appendix B.

8. Prevention. Supervisors of specific work areas and operations are responsible for assessing COVID-19 risks, identifying safe practices, training employees in these practices, ensuring these practices are followed, and documenting their implementation through periodic inspections. The COVID-19 Safety Coordinator defines global practices and provides general resources for developing area/operation specific practices, delivering training, and conducting inspections. More specific provisions are addressed in the Prevention section of this plan.

- 9. <u>Case Response</u>. Supervisors of specific work areas and operations are responsible for initiating a case response form, gathering incident information, and implementing immediate response actions. The COVID-19 Safety Coordinator is responsible for completing the case response form, which entails conducting additional incident assessment, response, and follow-up activities. The case response form defines a protocol that addresses the subject case, potentially exposed persons, and the impacted environment. More specific provisions are addressed in the Case Response section of this plan.
- 10. <u>Building Closure</u>. The COVID-19 Safety Coordinator is responsible for coordinating with responsible parties (e.g., building maintenance) to ensure proper consideration is given to minimizing potential environmental health concerns prior to closing and re-opening buildings (including substantially reduced occupancy and partial closures). A checklist of common environmental health issues associated with building closures is included in Appendix C.
- 11. <u>Supply Management</u>. The COVID-19 Safety Coordinator is responsible for coordinating with responsible parties (e.g., purchasing) to address the specification, acquisition, distribution, and inventory of supplies critical to implementation of COVID-19 safe practices. Critical supplies and associated management protocols are identified using the form provided in Appendix D, which is managed by the COVID-19 Safety Coordinator.

3. Roles & Responsibilities

The key roles involved in the implementation of this plan and their associated responsibilities are summarized below. More specific descriptions of requirements are provided in the other sections of this plan.

3.1. COVID-19 Safety Coordinator

The COVID-19 Safety Coordinator maintains this plan and facilitates its implementation. Key responsibilities:

- a. Ensuring this plan and associated practices are updated to reflect current public health quidance.
- b. Facilitating the core and extended safety teams.
- c. Developing global and common environment safe practices, as well as guidance for creating area/operation specific safe practices.
- d. Providing support to supervisors in developing area/operation specific practices
- e. Reviewing, approving, and inventorying all safe practices.
- f. Providing training on global and common environment safe practices, as well as training for supervisors on their responsibilities under this plan, including the creation of specific area/operation safe practices.
- g. Coordinating global communications to visitors/vendors.
- h. Reviewing and archiving inspection records.
- Reviewing and managing the completion of response actions related to known or suspected cases of COVID-19.
- j. Coordinating with responsible parties (e.g., building maintenance) to ensure proper consideration is given to minimizing potential environmental health concerns related to building closures.

k. Coordinating with responsible parties (e.g., purchasing) to address the specification, acquisition, distribution, and inventory of supplies critical to implementation of safe practices.

3.2. Supervisors

Supervisors are responsible for ensuring the provisions of this plan are implemented in the areas/operations and among the employees under their responsibility. Key responsibilities:

- a. Developing safe practices for their specific work areas and operations, inclusive of area/operation color-coded mapping.
- b. Completing supervisor training related to this plan.
- c. Providing area/operation specific training on safe practices and ensuring employees under their responsibility complete training related to this plan.
- d. Inspecting work areas/operations under their responsibility on a regular basis to ensure compliance with safety practices, and for correcting deficiencies identified.
- e. Initiating immediate response actions regarding known or suspected cases of COVID-19 and working with the COVID-19 Safety Coordinator to complete response actions.

3.3. All Employees

All employees are responsible for complying with the provisions of this plan. Key responsibilities:

- a. Following safe practices as communicated to them by their supervisor or through training.
- b. Reporting hazardous conditions related to potential transmission of the COVID-19 virus.
- c. Staying home and reporting to their supervisor if they exhibit symptoms of COVID-19, have a positive COVID-19 test, or have been exposed to a known or suspected case.

3.4. Other Parties

- a. Persons who are the primary contacts for visitors and vendors are responsible for ensuring that visitors/vendors understand that they are expected to follow the COVID-19 safety guidance for visitors, as well as additional any area/operation-specific COVID-19 safety practices. In addition, primary contacts for vendors are responsible for communicating to employees and visitors any additional safety practices that should be followed as a result of the vendor's work.
- b. Human Resources is responsible for communicating process and benefit information to employees restricted from work as a result of having COVID-19 symptoms, a positive COVID-19 test, or potential exposure to a known or suspected COVID-19 case.

4. Prevention

Efforts to help prevent the risk of infection from the COVID-19 virus are enacted through a process of assessing infection hazards, identifying safe practices, training/communicating these practices, and confirming the practices are being implemented properly. These and other prevention elements are discussed below.

4.1. Hazard Assessment & Safe Practice Development

- a. <u>Global Practices</u>. The COVID-19 Safety Coordinator coordinates the development safe practices that apply to all work areas and operations.
- b. <u>Common Environments</u>. The COVID-19 Safety Coordinator coordinates the development of general safe practices for common work areas and operations.
- c. <u>Specific Work Areas/Operations</u>. Supervisors are responsible for the development of safe practices for their specific work areas and operations. The COVID-19 Safety Coordinator provides guidelines and support for creating these specific practices.

4.2. Training & Communications

- a. <u>General Training</u>. The COVID-19 Safety Coordinator is responsible for providing resources to support training for all employees on global and common environment safe practices and for supervisors on their responsibilities under this plan. An inventory of available training resources is maintained by the COVID-19 Safety Coordinator using the form provided in Appendix E. Training is documented.
- Area/Operation Specific Training. Supervisors are responsible for ensuring their employees complete global and common environment training and are responsible for providing area and operation specific training to their employees. Training is documented.
- c. <u>Visitor/Vendor Communications</u>. Persons arranging the work of visitors/vendors are responsible for communicating expectations of visitors/vendors regarding COVID-19 safety (e.g., general practices for visitors document). The COVID-19 Safety Coordinator is responsible for coordinating global communications to visitors/vendors (e.g., postings, email notifications, social media, or other means as deemed appropriate).

4.3. Inspection

- a. Supervisors are responsible for regularly evaluating their work areas and operations for compliance with safety practices, and for correcting deficiencies identified. This occurs on a continuous basis as part of ongoing operations and is formally documented on a weekly rotating basis using the inspection form provided in Appendix G. Completed inspection forms are provided to the COVID-19 Safety Coordinator.
- b. The COVID-19 Safety Coordinator is responsible for reviewing and archiving inspection records to confirm noted deficiencies have been corrected. Inspection records are maintained per the Injury & Illness Prevention Program.

5. Case Response

A case response protocol is enacted to help mitigate potential risk of COVID-19 transmission upon discovery of a COVID-19 case potentially impacting facilities, employees, or other stakeholders (a.k.a., COVID-19 case incident). The case response protocol is detailed in the "Case Response Form" (see Appendix

- G) which guides specific actions to take and information to document related to different types of COVID-19 case incidents. The protocol is summarized below:
 - 1. Upon learning of COVID-19 case incident, area/operation supervisors are responsible for initiating the Case Response Form.
 - 2. Supervisors gather incident information and take immediate response actions per the form. These actions involve addressing the subject case, potentially exposed persons, and the impacted environment.
 - 3. The COVID-19 Safety Coordinator, after being notified by the area/operation supervisor, takes ownership of the form and conducts a more detailed incident assessment and

response per the form. This includes additional follow-up on potentially exposed persons, cleaning/disinfection of the impacted environment, communication with concerned stakeholders, and implementation of the area/operation specific COVID-19 safe practices. The COVID-19 Safety Coordinator conducts these actions working in conjunction with Human Resources, the area/operation Supervisor, outside environmental health consultants and cleaning/disinfection contractors as needed.

- 4. The COVID-19 Safety Coordinator manages the case response protocol until the subject environment has been properly addressed and all identified potentially exposed persons have been cleared to return to the area/operation.
- 5. The COVID-19 Safety Coordinator compiles the completed and signed case response form, along with all associated documentation, and retains these materials for recordkeeping purposes.









6. Cal/OSHA COVID-19 General Checklist

for Schools and School-Based Programs

July 17, 2020

This checklist is intended to help schools and school-based programs implement their plan to prevent the spread of COVID-19 in the workplace and is supplemental to the <u>Guidance for Schools and School-Based Programs</u>. This checklist is a summary and contains shorthand for some parts of the guidance; familiarize yourself with the guidance before using this checklist.



General Measures

- Establish and continue communication with local and State authorities to determine current disease levels and control measures in your community.
- Establish and implement a workplace-specific COVID-19 prevention plan to protect employees that includes:
- The person(s) responsible for implementing the plan.
- A risk assessment and the measures that will be taken to prevent spread of the virus.
- Use of face coverings, in accordance with the CDPH guidance.
- o Training and communication with workers and worker representatives on the plan.
- A process to check for compliance and to document and correct deficiencies.
- A process to investigate COVID-cases, alert the local health department, and identify and isolate close workplace contacts and infected workers.
- Protocols for when the workplace has an outbreak, in accordance with <u>CDPH</u> guidance.
- Ensure that any external community organizations that use the facilities also follow this guidance.
- Develop a plan for the possibility of repeated closures when persons associated with the facility or in the community become ill with COVID-19.
- Develop a plan to further support students with access and functional needs who may be at increased risk of becoming infected or having unrecognized illness due to COVID-19.



Promote Healthy Hygiene Practices

- Teach and reinforce <u>washing hands</u>, avoiding <u>contact with one's eyes, nose, and mouth</u>, and <u>covering coughs and sneezes</u> among students and staff.
- Consider portable handwashing stations throughout a site and near classrooms to minimize movement and congregations in bathrooms to the extent practicable.

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- Develop routines enabling students and staff to regularly wash their hands at staggered intervals.
- Ensure adequate supplies to support healthy hygiene behaviors, including soap, tissues, no-touch trashcans, face coverings, and hand sanitizers with at least 60% ethyl alcohol for staff and children who can safely use hand sanitizer.
- Face coverings must be used in accordance with <u>CDPH guidelines</u> unless a person is exempt as explained in the guidelines.
- Provide and ensure staff use face coverings and all required protective equipment.
- Strongly recommend that all students and staff be immunized each autumn against influenza unless contraindicated by personal medical conditions.



Face Coverings

- Face coverings must be used in accordance with <u>CDPH guidelines</u> unless a person is exempt as explained in the guidelines.
- Teach and reinforce use of face coverings, or in limited instances, face shields.
- Remind students and staff not to touch the face covering and to <u>wash their hands</u> frequently.
- Provide information to all staff and families in the school community on <u>proper use</u>, removal, and washing of cloth face coverings.
- Train on policy on how to address people who are exempted from wearing a face covering.
- When a cloth face covering or face shield is temporarily removed for meals, snacks, naptime, or outdoor recreation, ensure it is placed in a clean paper bag marked with the student's name and date until it needs to be put on again.
- Exclude students from campus if they are not exempt from wearing a face covering under CDPH guidelines and refuse to wear one. Develop a protocol to provide a face covering to students who inadvertently fail to bring a face covering to school to prevent unnecessary exclusions. Offer alternative educational opportunities for students who are excluded from campus.
- All staff must use face coverings in accordance with <u>CDPH guidelines</u> unless Cal/OSHA standards require respiratory protection.
- o In limited situations where face coverings cannot be used, wear a face shield instead while maintaining physical distance from others.
- Workers or other persons handling or serving food must use gloves in addition to face coverings. Consider disposable gloves to supplement frequent handwashing or use of hand sanitizer, for example, for workers who are screening others for symptoms or handling commonly touched items.



Ensure Teacher and Staff Safety

- Ensure staff maintain physical distancing from each other.
- Ensure that all staff use face coverings in accordance with CDPH guidelines and Cal/OSHA standards.
- Support staff who are at higher risk for severe illness or who cannot safely distance from

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- household contacts at higher risk, by providing options such as telework, where appropriate, or teaching in a virtual learning or independent study context.
- Conduct all staff meetings, professional development training and education, and other activities involving staff with physical distancing measures in place, or virtually, where physical distancing is a challenge.
- Minimize the use of and congregation of adults in staff rooms, break rooms, and other settings.
- Implement procedures for daily symptom monitoring for staff.



Intensify Cleaning, Disinfection, and Ventilation

- Consider suspending or modifying use of site resources necessitating sharing or touching items, such as using personal reusable water bottles instead of shared drinking fountains.
- Staff should <u>clean and disinfect</u> frequently touched surfaces at school and on school buses at least daily and, as practicable, frequently throughout the day by trained custodial staff.
- Disinfect buses after transporting any individual who is exhibiting COVID-19 symptoms. Provide drivers with disinfectant wipes and disposable gloves.
- Limit use and sharing of objects and equipment, such as toys, games, art supplies, and playground equipment. When shared use is allowed, clean and disinfect between uses.
- Use products approved for use against COVID-19 on the <u>Environmental Protection</u>
 <u>Agency (EPA)-approved</u> list and train workers on chemical hazards, product instructions,
 ventilation requirements, Cal/OSHA requirements, the CDPH <u>asthma-safer cleaning</u>
 <u>methods</u>, and as required by the Healthy Schools Act, as applicable. Avoid use of
 products containing peroxyacetic (peracetic) acid, sodium hypochlorite (bleach), or
 quaternary ammonium compounds.
- Provide proper PPE to custodial staff and other employees who clean and disinfect.
- Establish a cleaning and disinfecting schedule to avoid both under- and over-use of cleaning products.
- Ensure safe and correct application of disinfectant and keep products away from students.
- Ensure proper ventilation during cleaning and disinfecting. Introduce fresh outdoor air as much as possible. Do thorough cleaning when children are not present. When cleaning, air out the space before children arrive. If using air conditioning, use the setting that brings in outside air. Replace and check air filters and filtration systems to ensure optimal air quality.
- If opening windows poses a safety or health risk, maximize central air filtration for HVAC systems (targeted filter rating of at least MERV 13).
- Consider upgrades to improve air filtration and ventilation.
- Ensure all water systems are safe to use to minimize risk of Legionnaires' disease.



Implementing Distancing Inside and Outside the Classroom

ARRIVAL AND DEPARTURE

- Maximize space between students and between students and the driver onschool buses and open windows to the greatest extent practicable.
- Minimize contact between students, staff, families, and the community at the beginning and end of the school day. Minimize contact between adults at all times.
- Stagger arrival and drop off-times and locations as consistently as practicable asto minimize scheduling challenges for families.
- Designate routes for entry and exit, using as many entrances as feasible.
- Put in place other protocols to limit direct contact with others as much as practicable.
- Implement health screenings of students and staff upon arrival.
- Equip each bus with extra unused face coverings for students who may havefailed to bring one.

CLASSROOM SPACE

- Students must remain in the same space and in cohorts as small and consistent as
 practicable, including for recess and lunch. Keep the same students and teacher or staff
 with each group to the greatest extent practicable.
- Prioritize the use and maximization of outdoor space for activities where practicable.
- Minimize movement of students and teachers or staff as much as practicable. In secondary schools or in situations where students have individualized schedules, plan for ways to reduce mixing among cohorts and to minimize contact.
- Maximize space between seating and desks, arrange seating to minimize face- to-face contact, and use physical partitions where needed. Distance teacher and other staff desks at least six feet away from student desks.
- Consider redesigning activities for smaller groups and rearranging furniture and play spaces to maintain separation.
- Develop instructions for maximizing spacing and ways to minimize movement in both indoor and outdoor spaces that are easy for students to understand and are developmentally appropriate.
- Do not permit activities where there is increased likelihood for transmission from contaminated exhaled droplets, such as band and choir practice and performances.
- Only conduct activities involving singing outdoors.
- o Implement procedures for turning in assignments to minimize contact.
- Consider using privacy boards or clear screens to increase and enforce separation between staff and students.

NON-CLASSROOM SPACES

- Limit nonessential visitors, volunteers, and activities involving other groups at the same time.
- Limit communal activities where practicable. Alternatively, stagger use, properly space occupants, and disinfect in between uses.
- Consider use of non-classroom space for instruction, including outdoor space if weather permits.
- Minimize congregate movement through hallways as much as practicable.
- Serve meals outdoors or in classrooms instead of cafeterias or group dining rooms where practicable. Where cafeterias or group dining rooms must be used, keep students together in their cohort groups, ensure physical distancing, and consider assigned seating. Serve individually plated or bagged meals. Avoid sharing of foods and utensils and buffet or family-style meals.
- Consider holding recess activities in separated areas designated by class.



Limit Sharing

- Keep each child's belongings separated and in individually labeled storage containers, cubbies or areas. Ensure belongings are taken home each day to be cleaned.
- Ensure adequate supplies to minimize sharing of high-touch materials (art supplies, equipment, etc.) to the extent practicable or limit use of supplies and equipment to one group of children at a time and clean and disinfect between uses.
- Avoid sharing electronic devices, clothing, toys, books, and other games dearning aids as much as practicable. If sharing occurs, clean and disinfect between uses.



Train All Staff and Educate Families

- Train all staff and provide educational materials to families in enhanced sanitation practices, physical distancing guidelines and their importance, proper use, removal, and washing of cloth face coverings, screening practices, COVID-19 symptoms and transmission, how to prevent COVID-19 spread, when to seek medical attention, the plan and procedures to follow when someone becomes sick at school, and the plan and procedures to protect workers from COVID-19 illness.
- Consider conducting the training and education virtually, or, if in-person, ensure distancing is maintained.



Check for Signs and Symptoms

- Prevent discrimination against students who (or whose families) were or are diagnosed with COVID-19 or who are perceived to be a COVID-19 risk.
- Actively encourage staff and students who are sick or who have recently had close contact with a person with COVID-19 to stay home.
- Develop policies that encourage sick staff and students to stay home without fear of reprisal and ensure staff, students, and students' families are aware of these policies.
- Symptom screenings and/or temperature checks for all staff and students entering the facility.

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- Conduct visual wellness checks of all students upon arrival or establish procedures for parents to monitor at home.
- Take temperatures with a no-touch thermometer.
- Ask all individuals if they or anyone in their home is exhibiting COVID-19 symptoms.
- o Make available and encourage use of handwashing stations or hand sanitizer.
- Document/track incidents of possible exposure and notify local health officials, staff and families immediately of any positive case of COVID-19 while maintaining confidentiality.
- If a student shows symptom of COVID-19, communicate with the parent/caregiver and refer to the student's health history form and/or emergency card.
- Monitor staff and campers throughout the day for signs of illness; send home campers and staff with a fever of 100.4 degrees or higher, cough or other COVID- 19 symptoms.
- Develop policies not to penalize students and families for missing class.



Plan for When a Staff Member, Child, or Visitor Becomes Sick

- Work with school administration, nurses and other healthcare providers to identify an isolation room or area to separate anyone who exhibits symptoms of COVID- 19.
- Immediately require any students or staff exhibiting symptoms to wear a face covering and wait in an isolation area until they can be transported home or to a healthcare facility, as soon as practicable.
- Establish procedures to arrange for safe transport home or to a healthcare facility, as appropriate, when an individual is exhibiting COVID-19 symptoms.
- For serious injury or illness, call 9-1-1 without delay. Seek medical attention if COVID-19 symptoms become severe, including persistent pain or pressure in the chest, confusion, or bluish lips or face. Updates and further details are available on <u>CDC's</u> <u>webpage</u>.
- Notify local health officials immediately of any positive case of COVID-19, and exposed staff and families as relevant while maintaining <u>confidentiality</u> as required by state and federal laws.
- Close off areas used by any individual suspected of being infected with the virus that causes COVID-19 and do not use before cleaning and disinfection. To reduce risk of exposure, wait 24 hours before you <u>clean and disinfect</u>. If it is not possible to wait 24 hours, wait as long as practicable. Ensure a <u>safe and correct application</u> of disinfectants using personal protective equipment and ventilation recommended for cleaning. Keep cleaning and disinfectant products away from students.
- Advise sick staff members and campers not to return until they have met CDC criteria to discontinue <u>home isolation</u>, including at least 3 days with no fever, symptoms have improved and at least 10 days since symptoms first appeared.
- Ensure that students, including students with disabilities, have access to instruction when out of class.
- Offer distance learning based on the unique circumstances of each student who would be put at risk by an in-person instructional model.
- Implement the necessary processes and protocols when a school has an outbreak, in accordance with <u>CDPH guidelines</u>.

- Investigate the COVID-19 illness and exposures and determine if any work-related factors could have contributed to risk of infection. Update protocols as needed to prevent further cases.
- Update protocols as needed to prevent further cases. See the CDPH guidelines, Responding to COVID-19 in the Workplace.



Maintain Healthy Operations

- Monitor staff absenteeism and have a roster of trained back-up staff where available.
- Monitor the types of illnesses and symptoms among your students and staff to help isolate them promptly.
- Designate a staff liaison or liaisons to be responsible for responding to COVID-19 concerns. Train employees on who they are and how to contact them. Train the liaison to coordinate the documentation and tracking of possible exposure, in order to notify local health officials, staff and families in a prompt and responsible manner.
- Maintain communication systems that allow staff and families to self-report symptoms and receive prompt notifications of exposures and closures, while maintaining confidentiality.
- Consult with local health departments if routine testing is being considered by a local educational agency.
- Support students who are at higher risk for severe illness or who cannot safely distance from household contacts at higher risk, by providing options such as virtual learning or independent study.



Considerations for Reopening and Partial or Total Closures

- Check State and local orders and health department notices daily about transmission in the area or closures and adjust operations accordingly.
- When a student, teacher, or staff member tests positive for COVID-19 and has exposed others at the school, refer to the CDPH Framework for K-12 Schools. Consult with the local health department to determine whether to close the school or to clean and quarantine exposed persons, based on the risk level within the community; close off the classroom or office where the patient was based and do not use the areas until cleaned and disinfected; communicate with students, parents, teachers, staff and the community; inform staff regarding labor laws and leave time (See additional information on government programs supporting sick leave and worker's compensation for COVID-19, including worker's sick leave rights under the Families First Coronavirus Response Act and employee's rights to workers' compensation benefits and presumption of the work-relatedness of COVID-19 pursuant to the Governor's Executive Order N-62-20, while that Order is in effect); remind parents, teachers, and staff to use physical distancing in the community and discourage them from gathering elsewhere; develop a plan for continuity of education, including nutrition; and maintain regular communications with the local public health department.







SAFE WORK PRACTICES





1. Safe Work Practices for All Employees

Note: These practices are current as of the revision date. Since the COVID-19 pandemic is evolving rapidly, extra diligence should be used in watching for updates to these practices.

What is the hazard?

COVID-19 is the respiratory illness caused by the SARS-CoV-2 virus (a.k.a., novel coronavirus). The virus is thought to be spread mainly from person-to-person through respiratory droplets and contact. It may also be spread by touching a surface that has the virus on it and then touching your eyes, nose, or mouth. There is the potential to be exposed to the virus while at work, in the community, and at home. The latest information regarding COVID-19 is available on the U.S. Centers for Disease Control (CDC) website (https://www.cdc.gov/coronavirus/2019-ncov/index.html). This website should be regularly reviewed in order to stay current on the dynamics of the disease, including its risks, symptoms, and current guidance on prevention and what to do if you are sick.

What safe work practices should be followed?

The following general safe work practices should be followed by all Carmel Unified School District employees. Each work area is also evaluated, and additional more specific practices tailored to a specific area or operation may also apply. All employees should be familiar with these additional practices within their work area and should inquire regarding additional practices when visiting other work areas. Questions regarding COVID-19 safety should be directed to your supervisor and you can review additional resources at Client COVID-19 Website.



MEDICAL SCREENING

- 1. Symptoms. Prior to coming to work, employees must screen themselves for symptoms of COVID-19. If symptoms are noted, or a positive COVID-19 test is obtained, employees must notify their supervisor (via phone/email) and stay home. Symptoms include, but are not limited to, fever, chills, cough, shortness of breath, difficulty breathing, fatigue, muscle/body aches, headache, new loss of taste/smell, sore throat, congestion/runny nose, nausea/vomiting, or diarrhea. CDC guidance on symptoms is located at: https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html (see Attachment A for summary posting). The supervisor will inform Human Resources who in turn will provide direction to both the supervisor and the employee.
- Exposure. Employees must notify their supervisor (via phone) and stay home if they
 have been in close contact with or otherwise exposed to a known or suspected case of
 COVID-19. The supervisor will inform Human Resources who in turn will provide
 direction to both the supervisor and the employee.
- 3. At Risk Persons. If an employee is at higher risk of serious complications from COVID-19, they should inform their supervisor. The supervisor will inform Human Resources who will in turn provide direction to both the supervisor and the employee. At risk people include older adults and people of any age who have serious underlying medical conditions. More information is available at: https://www.cdc.gov/coronavirus/2019-ncov/specific-groups/people-at-higher-risk.html.







PHYSICAL DISTANCING

- Maintain Physical Distance. Maintain at least six feet of distance between yourself and others. More distance and more physical barriers between people are better. When at least six feet of distance is not practicable, use additional PPE equipment (such as a face shield with drape, and a mask) with minimal duration of close contact (less than 15 min).
- 2. Reduce Need for Physical Interaction. Coordinate with your supervisor to determine a plan for reducing the need for physical interactions (e.g., working from home, staggered work/break schedules, online interactions).
- 3. Evaluate Work Area Layout. Coordinate with your supervisor and evaluate the need for changing the work area to support physical distancing (e.g., rearranging seating/desks/workstations, installing barriers, directing traffic flow patterns, defining maximum occupancy of conference and break rooms, closing areas).
- 4. Distancing Markings/Notifications. Follow any markings regarding location indicators, traffic flow, or maximum occupancy which may appear on walls, floors, signage, seats or other locations. These notifications are in place to help promote proper physical distancing. Common examples include designations for in use/out of use seating, "wait here" markings on floors, designated entry/exit doors, and "this way" arrows on floors.
- 5. Discontinue Non-Essential In-Person Meetings. If an in-person meeting is determined to be essential, it must be limited to essential attendees, short as possible in duration, and conducted maintaining at least six feet of distancing with masks.
- 6. Discontinue Non-Essential Travel. Due to the challenges inherent in travel (e.g., airplanes, public transit, lodging) it should be avoided when possible. If travel is determined to be essential, develop a trip-specific safety plan incorporating physical distancing as well as other general COVID-19 safety precautions as described below.



PERSONAL HYGIENE

- 1. Hand Hygiene. Clean your hands often and avoid touching your eyes, nose, and mouth with unwashed hands. Avoid handshakes or physical contact with others. Wash hands with soap and water for at least 20 seconds. If soap and water are not readily available, use a proper hand sanitizer (e.g., 60% ethyl alcohol or 70% isopropyl alcohol). Cover all surfaces of your hands and rub them together until they feel dry. Guidance on hand washing technique from the World Health Organization (WHO) is provided in Attachment B. CDC guidance on hand washing is located at: https://www.cdc.gov/handwashing/when-how-handwashing.html.
- 2. Sneezing & Coughing. Cover your mouth and nose when coughing or sneezing with a tissue, then throw the tissue in the trash and wash hands. If no tissue is available, then cough and sneeze into your elbow. Do not come to work if you have COVID-19 symptoms (see medical screening above).
- 3. Personal Items. Be cognizant of the handling of frequently used personal items (e.g., phone, keys, wallet/purse, credit/debit cards, tablets, laptops). As these items are frequently touched, they may be viewed as an extension of your hands. Avoid placing these items on public surfaces which may be contaminated. Clean and disinfect these items frequently.







PROTECTIVE EQUIPMENT

- 1. Masks. Surgical, paper or cloth masks (a.k.a., face coverings) must be worn at all times unless both: a) you are alone in an enclosed workspace or isolated area (e.g., 30 feet of separation), and b) no other persons are anticipated to come within six (6) feet. In addition, the space should not be used by different people for a prolonged period (e.g., ≥ 15 min) until at least 24 hours have passed between users (unless other control measures are in place). Masks should be stored in clean paper bags when not in use. CDC guidance on such masks is located at: https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/diy-cloth-face-coverings.html. Masks, unlike respirators, are not intended to protect the wearer, but to help protect those around the wearer. Any employee using a respirator (e.g., N95), voluntarily or as assigned, must have received approval per the respiratory protection program.
- 2. Additional Protective Equipment. Assignment of any other protective equipment (e.g., gloves, face shields, respirators) must be coordinated through your supervisor and used in accordance with work area/operation specific safety practices.



ENVIRONMENTAL CLEANING

- 1. What to Clean. Frequently touched surfaces (i.e., those touched multiple times or by multiple people) and personal work areas should be cleaned/disinfected regularly. Examples include tables, doorknobs, light switches, countertops, handles, desks, phones, keyboards, toilets, faucets, sinks, and shared work equipment.
- 2. When to Clean. The fewer people that touch the surface between cleaning/disinfection the better. For frequently touched surfaces, daily cleaning/disinfection should be viewed as a minimum, with cleaning/disinfection multiple times a day or between each use being generally preferred.
- 3. How to Clean. Environmental cleaning involves first cleaning a surface to remove dirt and debris, and then using an approved disinfectant to inactivate the virus. Disinfectants must be used per the product label, which typically includes a minimum contact time to ensure proper disinfection, as well as precautions for using the product safely (e.g., using gloves). A list of EPA-approved disinfectants for SARS-CoV-2 can be found at: https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2.
- Coordination. Coordinate with your supervisor regarding an environmental cleaning plan for your work area, including access to hand sanitizer, surface cleaning/disinfection products, and other associated supplies. Additional guidance on cleaning/disinfection from the CDC can be found at: https://www.cdc.gov/coronavirus/2019-ncov/community/clean-disinfect/index.html.



ADDITIONAL PRACTICES

- 1. *Training*. Coordinate with your supervisor to ensure you complete required COVID-19 safety training and watch for ongoing updates.
- 2. *Inspection.* Coordinate with your supervisor to ensure the work area is periodically inspected to ensure COVID-19 hazards are addressed and safety practices are being properly implemented.





- 3. Case Incident Response. If a known or suspected case of COVID-19 is found to have been present in the workplace, or exposed to employees, notify your supervisor and Human Resources immediately. A case incident response assessment will be performed to evaluate who was potentially exposed, and what surfaces were potentially contaminated. Notification to affected parties will be provided as appropriate and a cleaning/disinfection plan will be implemented.
- 4. Visitor/Vendor Communications. Employees who are primary contacts for visitors and vendors must ensure that visitors/vendors understand that they are expected to follow the COVID-19 safety guidance for visitors, as well as additional any area/operation-specific COVID-19 safety practices. In addition, employees who are primary contacts for vendors must coordinate with the vendor to learn of any additional safety practices that should be followed by employees or visitors as a result of the vendor's work. This information must then be communicated to affected parties.
- Non-Work Activities. Employees are encouraged to apply COVID-19 precautions similar
 to these safe work practices to their non-work personal activities. Such diligence in and
 out of the workplace will serve to protect co-workers, customers, families and
 communities during this pandemic.

Attachments:

Attachment A: CDC COVID-19 Symptoms Poster

Attachment B: WHO Hand Wash/Rub Posters





Attachment A: CDC COVID-19 Symptoms Poster

Symptoms of Coronavirus (COVID-19)

Know the symptoms of COVID-19, which can include the following:



Symptoms can range from mild to severe illness, and appear 2-14 days after you are exposed to the virus that causes COVID-19.

Seek medical care immediately if someone has emergency warning signs of COVID-19.

- Trouble breathing
- Persistent pain or pressure in the chest
- New confusion

- Inability to wake or stay awake
- Bluish lips or face

This list is not all possible symptoms. Please call your healthcare provider for any other symptoms that are severe or concerning to you.



cdc.gov/coronavirus





Attachment B: WHO Hand Wash/Rub Posters

How to Handwash?

WASH HANDS WHEN VISIBLY SOILED! OTHERWISE, USE HANDRUB

Duration of the entire procedure: 40-60 seconds



Wet hands with water;



Apply enough soap to cover all hand surfaces;



Rub hands palm to palm;



Right palm over left dorsum with interlaced fingers and vice versa;



Palm to palm with fingers interlaced;



Backs of fingers to opposing palms with fingers interlocked;



Rotational rubbing of left thumb clasped in right palm and vice versa;



Rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa;



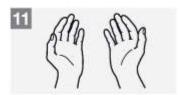
Rinse hands with water;



Dry hands thoroughly with a single use towel;



Use towel to turn off faucet;



Your hands are now safe.



(my room





How to Handrub?

RUB HANDS FOR HAND HYGIENE! WASH HANDS WHEN VISIBLY SOILED

Duration of the entire procedure: 20-30 seconds



Apply a palmful of the product in a cupped hand, covering all surfaces;



Rub hands palm to palm;



Right palm over left dorsum with interlaced fingers and vice versa;



Palm to palm with fingers interlaced;



Backs of fingers to opposing palms with fingers interlocked;



Rotational rubbing of left thumb clasped in right palm and vice versa;



Rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa;



Once dry, your hands are safe.



129/200





2. Classroom Safe Practices

2.1 General Education Classroom

Note: These practices are current as of the revision date. Since the COVID-19 pandemic is evolving rapidly, extra diligence should be used in watching for updates to these practices.

All Carmel Unified School District students and staff must follow the "General Practices for All Employees and Students" COVID-19 safety guidance and all visitors must follow the "General Practices for All Visitors" COVID-19 safety guidance. This document provides additional more specific COVID-19 safety practices tailored to the classroom. Questions regarding COVID-19 safety should be directed to your supervisor.



MEDICAL SCREENING

- 1. As indicated in the general COVID-19 safety practices guidance for employees and students/visitors, stay home if you exhibit COVID-19 symptoms, test positive, have been in close contact with a known or suspected case, or have risk factors for more severe illness.
- 2. All persons present at the facility, including both staff and students, will be monitored throughout the day for any signs of possible illness. Any person who begins exhibiting symptoms will trigger implementation of the case response protocol. If a student exhibits symptoms, they will be isolated from other students and staff and the caregiver will be contacted to pick up the child. The COVID-19 Safety Coordinator will then be informed for further assessment and follow-up as appropriate.



PHYSICAL DISTANCING

- Maintain Physical Distance. Maintain at least six feet of distance between staff, students, and
 others. More distance and more physical barriers between people are better. When at least six
 feet of distance is not practicable, use additional PPE equipment (such as a face shield with a
 mask, and drape) with minimal duration of close contact less than 15 min).
- 2. Reduced Physical Interaction. Follow District guidance about distance learning, working from home, staggering schedules and break/recess times, working online, and other measures aimed at reducing the need for physical interaction.
- 3. *Groupings (Cohorting).* Keep student and staff groupings as static as possible by having the same small group of students stay with the same staff. Limit mixing between groups. Cohorts must be limited to no more than 14 children and youth and no more than two supervising adults, or a configuration of no more than 16 individuals total (children and youth or adults) in the cohort.
- 4. Activities. Plan activities focusing on individual study/play or small groups that allow for physical distancing. Prioritize outdoor activities as much as possible. Activities that involve loud talking or limited singing should be curtailed or incorporate greater physical distancing due to greater risk of expelled respiratory droplets. Singing, such as a choir, should only be conducted outside and with greater than six feet of distancing.
- 5. Classroom Layout. Be aware of and support changes in the classroom layout that support physical distancing (e.g., do not use seats/desks marked as out of use, do not rearrange configurations changed for distancing, follow traffic flow guidance). Keep seating/desks at least 6 feet apart. Ensure seating/desks face in the same direction (rather than facing each other) or have barriers in between if facing each other. Coordinate with site principal on outdoor seating use and opportunities.





- 6. *Maximum Occupancies*. Adhere to the posted classroom occupancy and seating configuration in order to promote proper physical distancing.
- 7. Seating Assignments. Have assigned seating for students when possible. This helps to support consistent physical distancing habits and minimizes the diversity of potential exposures.
- 8. *Teacher.* Conduct instruction from the areas designated for the teacher whenever possible in order to help maximize the distance between the teacher and students.
- 9. *Implementation of Safe Practices*. Staff are responsible for reinforcing safe work practices in the classroom. Teach students the safe practices and enforce their implementation.



PERSONAL HYGIENE

- 1. Hand Hygiene. Teach and reinforce handwashing with soap and water for at least 20 seconds among children, staff, and parents/caregivers. At a minimum, handwashing should occur when entering, before and after eating or preparing food, before and after playing outside, after using the restroom, after coughing/sneezing, after contact with bodily secretions/excretions, and when leaving. Stagger handwashing to prevent congregating at sinks. When handwashing is not feasible, use provided hand sanitizer, which should be rubbed into hands until completely dry.
- 2. Sneezing & Coughing. Teach and reinforce covering coughs and sneezes with a tissue or the inside of their elbow.
- 3. Avoid Touching Face. Teach and reinforce not touching the face (eyes, nose, and mouth) with unwashed hands.
- 4. *Personal Belongings/Clothing*. Keep each student's belongings separated from others' and in individually labeled containers, cubbies, or areas. Non-essential personal items should be kept at home.
- 5. Shared Materials. Avoid sharing materials when possible. Ensure adequate supplies to minimize sharing of high touch materials (e.g., art supplies, toys, books, games, equipment etc.). Assign supplies and equipment to a single student or limit use to one group of students at a time and clean/disinfect between uses. Discourage sharing of items that are difficult to clean (e.g., stuffed animals/dolls) or eliminate their use altogether.
- 6. Mealtime. During mealtime, serve individually plated/packaged meals, or have students bring their own meals. Do not allow sharing of food/drinks and utensils. Use disposable food service items (utensils, dishes). If disposable items are not feasible or desirable, ensure that all non-disposable food service items are handled with gloves and washed with dish soap and hot water or in a dishwasher.
- 7. *Supplies*. Maintain adequate supplies to support healthy hygiene behaviors, including soap, approved hand sanitizer for classrooms, paper towels, tissues, and no-touch trash cans.



PROTECTIVE EQUIPMENT

1. Masks. Surgical, paper or cloth masks (a.k.a face coverings) must be worn at all times unless both: a) you are alone in a substantially enclosed personal workspace (office, cubicle), room, or isolated area, and b) no other persons are anticipated to come within six (6) feet. Likewise, properly fitted and assigned respirators (e.g., N95) may also be used in lieu of face coverings. N-95 masks with an exhalation valve are not allowed. Face coverings are not to be worn by children under the age of 2, nor for those who have trouble breathing or are unable to remove the covering without assistance. Additional precautions should be implemented in such situations as determined on a case-by-case basis.





- 2. Face Shields. Face shields may be used in addition to a mask when additional protective equipment is necessary. Instructional staff may wear a face shield in addition to a mask in situations when necessary for instruction, and when 6 feet of distance is not practicable provided the instruction can be performed for a duration of less than 15 minutes. Face shields must be cleaned/disinfected between uses and at the end of a work shift. Face shields can be obtained by contacting your supervisor.
- 3. Gloves. Employees performing cleaning and disinfection must wear nitrile disposable rubber gloves. Put the gloves on prior to beginning work and remove them (using proper hygienic technique) when done and before taking breaks or performing any other tasks. Wash hands immediately after removing gloves. Gloves can be obtained by contacting your supervisor.
- 4. *Protective Clothing.* When prolonged close contact with students is required, staff can protect themselves by wearing an extra outer layer of clothing that can be easily removed and laundered if it becomes soiled. Disposable gowns will be provided to staff as necessary.



ENVIRONMENTAL CLEANING

- 1. General Surfaces. Frequently touched surfaces in the classroom are cleaned as specified in the cleaning/disinfection log form and in accordance with the "General Practices for All Employees" COVID-19 safety guidance. This includes desks, chairs, blackboards, doorknobs, light switches, telephones (teacher cleans), keyboards (teacher cleans), staplers (teacher cleans), supply cubbies/cabinets (teacher cleans), and storage furniture. Coordinate with your supervisor or site contact about your specific responsibilities in supporting the cleaning plan. Keep cleaning/disinfectant products away from young students.
- 2. Outside Items. Individuals bringing packages, mail, or other items into the area should either: 1) clean/disinfect the item (external surface), 2) clean hands and contacted surfaces after handling of the item, or 3) isolate the items until infectious risk diminishes. Current CDC guidance indicates that coronaviruses on surfaces and objects die within hours to days, and that COVID-19 has not been shown to survive on surfaces longer than seven days.
- 3. Cleaning/Disinfection Supplies. Approved cleaning/disinfection products and materials can be obtained by contacting your supervisor. Per the "General Practices for All Employees" COVID-19 safety guidance, disinfectants must be used per the product label, which typically includes a minimum contact time to ensure proper disinfection, as well as precautions for using the product safely.



ADDITIONAL PRACTICES

- 1. Visitors/Vendors. When hosting a visitor/vendor in the classroom, confirm with them that they are free of COVID-19 symptoms, positive tests, or known exposures. Ensure they are familiar with the general guidance for visitors document, as well as additional classroom-specific practices. For vendors, find out if their work will require any additional safety practices which people in the area will need to follow, and communicate to others as appropriate. Meet visitors at the door and ensure they wash/sanitize their hands and are wearing a face covering.
- 2. *Ventilation.* As often as feasible within the limitations of weather and instructional needs, teachers should open windows and doors to increase ventilation in the classroom.
- 3. Provide additional guidance as determined when completing the classroom K-12 checklist.



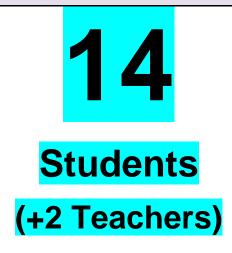


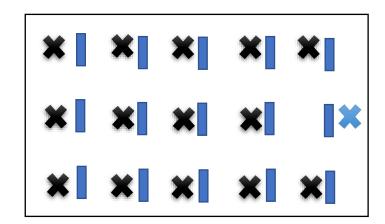
Attachment C (1) Regular Education Classroom Configuration

Name of Classroom

MAXIMUM OCCUPANCY

SEATING CONFIGURATION





(show preferred arrangement)

CLASSROOM INSTRUCTIONS

Follow the general COVID-19 safety practices for all employees and all visitors as well as the following practices specific to this classroom:



Medical Screening. Monitor yourself and all others in the classroom for symptoms related to COVID-19. If anyone displays symptoms, initiate case response protocols immediately.



Physical Distancing. Maintain a distance of at least six feet between yourself and others at all times. The greater the distance the better.



Personal Hygiene. Wash/sanitize your hands upon entry into the classroom, before leaving, and at regular intervals throughout the day. Cover coughs & sneezes and wash/sanitize hands afterwards.



Protective Equipment. Wear a face covering/mask at all times unless medically unable to do so. Teachers may use face shields instead of face coverings when necessary for instruction.



Environmental Cleaning. Clean and disinfect surfaces following the cleaning plan for the

Note: These practices are current as of the revision date. Since the COVID-19 pandemic is evolving rapidly, extra diligence should be used in watching for updates to these practices.





2.2 Special Education Classroom

Note: These practices are current as of the revision date. Since the COVID-19 pandemic is evolving rapidly, extra diligence should be used in watching for updates to these practices.

All Carmel Unified School District students and staff must follow the "General Practices for All Employees and Students" COVID-19 safety guidance and all visitors must follow the "General Practices for All Visitors" COVID-19 safety guidance. This document provides additional more specific COVID-19 safety practices tailored to the classroom listed above. Questions regarding COVID-19 safety should be directed to your supervisor.



MEDICAL SCREENING

- 1. As indicated in the general COVID-19 safety practices guidance for employees and students/visitors, stay home if you exhibit COVID-19 symptoms, test positive, have been in close contact with a known or suspected case, or have risk factors for more severe illness.
- 2. All persons present at the facility, including both staff and students, will be monitored throughout the day for any signs of possible illness. Any person who begins exhibiting symptoms will trigger implementation of the case response protocol. If a student exhibits symptom, they will be isolated from other students and staff and the caregiver will be contacted to pick up the child. The COVID-19 Safety Coordinator will then be informed for further assessment and follow-up as appropriate. Modify to reflect specific protocol as needed.



PHYSICAL DISTANCING

- 1. *Maintain Physical Distance*. Maintain at least six feet of distance between staff, students, and others. More distance and more physical barriers between people are better.
- 2. Reduced Physical Interaction. Follow District guidance about distance learning, working from home, staggering schedules and break/recess times, working online, and other measures aimed at reducing the need for physical interaction. Restrict interaction between students in the special education classroom.
- 3. *Groupings (Cohorting).* Keep student and staff groupings as static as possible by having the same small group of students stay with the same staff. Limit mixing between groups when possible.
- 4. Activities. Consider planning one-on-one activities that allow for physical distancing. Activities that involve loud talking or limited singing should be curtailed or incorporate greater physical distancing due to greater risk of expelled respiratory droplets.
- 5. Classroom Layout. Be aware of and support changes in the classroom layout that support physical distancing (e.g., do not use seats/desks marked as out of use, do not rearrange configurations changed for distancing, follow traffic flow guidance). Keep seating/desks at least 6 feet apart. Ensure seating/desks face in the same direction (rather than facing each other) or have barriers in between if facing each other.
- 6. *Maximum Occupancies*. Adhere to the posted classroom occupancy and seating configuration in order to promote proper physical distancing.
- 7. Seating Assignments. Have assigned seating for students when possible. This helps to support consistent physical distancing habits and minimizes the diversity of potential exposures.





COVID-19 Safe Practices Classroom

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- 8. *Teacher.* Conduct instruction from the areas designated for the teacher whenever possible in order to help maximize the distance between the teacher and students.
- 9. *Implementation of Safe Practices*. Staff are responsible for reinforcing safe work practices in the classroom. Teach students the safe practices and enforce their implementation.



PERSONAL HYGIENE

- 1. Hand Hygiene. Teach and reinforce handwashing with soap and water for at least 20 seconds among children, staff, and parents/caregivers. At a minimum, handwashing should occur when entering, before and after eating or preparing food, before and after playing outside, after using the restroom, after coughing/sneezing, after contact with bodily secretions/excretions, and when leaving. Stagger handwashing to prevent congregating at sinks. When handwashing is not feasible, use provided hand sanitizer, which should be rubbed into hands until completely dry.
- 2. Sneezing & Coughing. Teach and reinforce covering coughs and sneezes with a tissue or the inside of their elbow.
- 3. Avoid Touching Face. Teach and reinforce not touching the face (eyes, nose, and mouth) with unwashed hands.
- 4. Personal Belongings/Clothing. Keep each student's belongings separated from others' and in individually labeled containers, cubbies, or areas. Non-essential personal items should be kept at home.
- 5. Shared Materials. Avoid sharing materials when possible. Ensure adequate supplies to minimize sharing of high touch materials (e.g., art supplies, toys, books, games, equipment etc.). Assign supplies and equipment to a single student or limit use to one group of students at a time and clean/disinfect between uses. Discourage sharing of items that are difficult to clean (e.g., stuffed animals/dolls) or eliminate their use altogether.
- 6. *Supplies*. Maintain adequate supplies to support healthy hygiene behaviors, including soap, approved hand sanitizer for classrooms, paper towels, tissues, and no-touch trash cans.



PROTECTIVE EQUIPMENT

- 1. Masks. As indicated in the general COVID-19 safety practices guidance for employees and visitors (including students), surgical, paper or cloth masks (a.k.a., face coverings) must be worn at all times unless both: a) you are alone in a substantially enclosed personal workspace (office, cubicle), room, or isolated area, and b) no other persons are anticipated to come within six (6) feet. Instructional staff may wear a face shield in lieu of a mask in limited situations when necessary for instruction, provided the instruction can be performed from a distance of at least six feet. Likewise, properly fitted and assigned respirators (e.g., N95) may also be used in lieu of face coverings, provided exhalation valves are covered with cloth. Face coverings must not be worn by students who have trouble breathing or are unable to remove the covering without assistance. Additional precautions should be implemented in such situations as determined on a case-bycase basis.
- 2. Face Shields. Teachers may use face shields with a cloth drape when use of a mask substantially inhibits instruction. Face shields must be cleaned/disinfected between users and at the end of a work shift. Face shields can be obtained by contacting your supervisor.
- 3. Gloves. Instructors of students who refuse to wear a face covering and whose behavior may result in spreading droplets may wear disposable rubber gloves to handle items that could come in contact with respiratory droplets. Put the gloves on prior to beginning work and remove them





COVID-19 Safe Practices Classroom

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(using proper hygienic technique) when done and before taking breaks or performing any other tasks. Wash hands immediately after removing gloves. Gloves can be obtained by contacting your supervisor.

- 4. Respirators and Protective Eyewear. Instructors of students who refuse to wear a face covering and whose behavior may result in spreading droplets must wear goggles or a face shield and a minimum of an N95 respirator and be enrolled in the respiratory protection program. Respirator supplies can be obtained by contacting your supervisor.
- 5. *Protective Clothing.* When close contact with students is required, staff can protect themselves by wearing an extra outer layer of clothing that can be easily removed and laundered if it becomes soiled.



ENVIRONMENTAL CLEANING

- 1. General Surfaces. Frequently touched surfaces in the classroom are cleaned as specified in the cleaning/disinfection log form and in accordance with the "General Practices for All Employees" COVID-19 safety guidance. This includes desks, chairs, blackboards, doorknobs, light switches, telephones, keyboards, staplers, supply cubbies, and storage furniture. Coordinate with your supervisor or site contact about your specific responsibilities in supporting the cleaning plan. Keep cleaning/disinfectant products away from young students.
- 2. Outside Items. Individuals bringing packages, mail, or other items into the area should either: 1) clean/disinfect the item (external surface), 2) clean hands and contacted surfaces after handling of the item, or 3) isolate the items until infectious risk diminishes. Current CDC guidance indicates that coronaviruses on surfaces and objects die within hours to days, and that COVID-19 has not been shown to survive on surfaces longer than seven days.
- 3. Cleaning/Disinfection Supplies. Approved cleaning/disinfection products and materials can be obtained by contacting your supervisor. Per the "General Practices for All Employees" COVID-19 safety guidance, disinfectants must be used per the product label, which typically includes a minimum contact time to ensure proper disinfection, as well as precautions for using the product safely.



ADDITIONAL PRACTICES

- 1. Visitors/Vendors. When hosting a visitor/vendor in the classroom, confirm with them that they are free of COVID-19 symptoms, positive tests, or known exposures. Ensure they are familiar with the general guidance for visitors document, as well as additional classroom-specific practices. For vendors, find out if their work will require any additional safety practices which people in the area will need to follow, and communicate to others as appropriate. Meet visitors at the door and ensure they wash/sanitize their hands and are wearing a face covering.
- 2. *Ventilation.* As often as feasible within the limitations of weather and instructional needs, teachers should open windows and doors to increase ventilation in the classroom.





Attachment C (2) Special Education Classroom Configuration

Special Ed Classroom

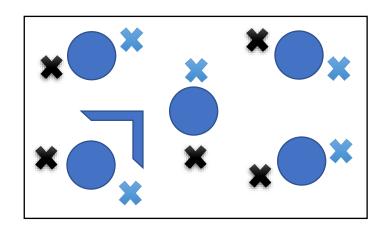
MAXIMUM OCCUPANCY

5

Students

(+5 Teachers)

SEATING CONFIGURATION



(show preferred arrangement

CLASSROOM INSTRUCTIONS

Follow the general COVID-19 safety practices for all employees and all visitors as well as the following practices specific to this classroom:



Medical Screening. Monitor yourself and all others in the classroom for symptoms related to COVID-19. If anyone displays symptoms, initiate case response protocols immediately.



Physical Distancing. Maintain a distance of at least six feet between yourself and others at all times. The greater the distance the better.



Personal Hygiene. Wash/sanitize your hands upon entry into the classroom, before leaving, and at regular intervals throughout the day. Cover coughs & sneezes and wash/sanitize hands afterwards.



Protective Equipment. Wear a face covering/mask at all times unless medically unable to do so. Teachers may use face shields instead of face coverings when necessary for instruction.



Environmental Cleaning. Clean and disinfect surfaces following the cleaning plan for the room.

Note: These practices are current as of the revision date. Since the COVID-19 pandemic is evolving rapidly, extra diligence should be used in watching for updates to these practices.



Location:



COVID-19 Safe Practices Classroom (Rev 12/7/2020)

2.3 Risk Assessment Checklist Classroom (Attachment B)

Note: These practices are current as of the revision date. Since the COVID-19 pandemic is evolving rapidly, extra diligence should be used in watching for updates to these practices.

All Carmel Unified School District staff and students must follow the "General Practices for All Employees" COVID-19 safety guidance and all visitors must follow the "General Practices for All Visitors" COVID-19 safety guidance. The purpose of this document is to provide a tool for developing additional, more specific COVID-19 safe practices tailored to general classroom environments. There may be significant differences in how classrooms for different age groups are managed. In addition, classrooms for students with disabilities that require specific additional supports (e.g., medical procedures, toileting, lifting and mobility assistance) will require specialized risk assessment and consideration of additional safe practices.

The person responsible for the subject area completes the following risk assessment checklist and develops classroom-specific practices and postings based on the general templates provided as attachments. A copy of this completed checklist and the classroom-specific safe practices document is then forwarded to the COVID-19 Safety Coordinator. Comments or notations regarding each item can be added under each item below or included as an attachment as desired. Questions regarding the development of COVID-19 safety practices should be directed to the COVID-19 Safety Coordinator.

	Date:	Completed By:		
#	Item		Done	n/a
i	HAZ	ARD ANALYSIS		
1.	COVIE risk. M addres	y Analysis. Review each activity conducted in the classroom to identify: a) D-19 virus transmission risks, and b) measures to be taken to minimize the lany, but not necessarily all, of the measures that may be taken are seed below. The COVID-19 infection hazard analysis form provided in ment A may assist in this review.		
2.	health	nce Review. Before or after performing the activity analysis, review public guidance on COVID-19 safe practices which pertain to classrooms. This nce may be found at:		
	•	CDC: https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/index.html CA.gov: https://covid19.ca.gov/industry-guidance/#top (see childcare, day camps, schools) Cal/OSHA: https://www.dir.ca.gov/dosh/coronavirus/ (see childcare) CA Dept of Education: https://www.cde.ca.gov/ls/he/hn/coronavirus-asp.		





AIHA: https://www.backtoworksafely.org/ (see childcare) **MEDICAL SCREENING** Symptom Response: Notify identified office and health staff member. Have student wait outside room and direct to isolation room for further evaluation by health services staff. PHYSICAL DISTANCING Grouping (Cohorting). Determine if a student grouping policy is being implemented, and if so, ensure the classroom is setup to support the maximum number of students that may be assigned to it as determined by the square footage of the room. Consider assigning each group to a specific classroom and, when appropriate, rotate teachers into the classroom rather than rotating students between classrooms. Keep student groups as static as possible and limit mixing between groups. Grouping also helps reduce the frequency of cleaning/disinfection needed by eliminating the use of some materials by multiple people. 2. Considerations for Younger Student Classrooms. Younger students may have difficulty maintaining physical distancing (6 feet minimum) based solely on instruction and behavior modification. Evaluate the classroom and determine if there are opportunities to reduce physical interaction through use of barriers (e.g., unused furniture), and directed activities. 3. Evaluate Classroom Layout. Make changes to the classroom layout to support physical distancing of at least 6 feet (e.g., rearranging or eliminating seating/desks/work areas to create 6 feet of air travel, pre-arranging supplies for each class to minimize student travel in the classroom, directing traffic flow to minimize close interactions). Items that are not to be used should be removed or marked accordingly. 4. Traffic Flow. Evaluate the classroom and determine if there are opportunities to reduce physical interaction by directing traffic flow (e.g., designated entry/exit doors, "wait here" lines, "this way" directional arrows). Post signs/markings as appropriate. Consider showing traffic flow on the classroom posting (Attachment C). 5. *Teacher.* Consider marking areas in the classroom to be reserved for the teacher. The areas must be a minimum of 6 feet from the nearest student seating. The teacher should perform as much instruction from within these areas as feasible. The ages and abilities of the students in the classroom should be considered in implementing this safe practice.





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Specialized Classrooms. Some classrooms (e.g., music, theater, fine arts) require additional space for each student to maintain physical distancing as the students are required to handle bulky tools or instruments and move around to perform class activities. Design student and teacher work area arrangements to support six feet of distancing, appropriate maximum occupancies, and additional room-specific practices. Consider alternatives to use of traditional classrooms where additional space is available to support physical distancing (e.g., hold band practice outdoors, move art classes into a gym or cafeteria).
 Outdoor Teaching Opportunities. Site principal will identify opportunities to use outdoor areas for instruction and the means to arrange for their use. When feasible, outdoor areas may be preferred over indoor areas for a variety of school activities.

PERSONAL HYGIENE

- 1. Hand Washing/Sanitizing. Ensure hand washing/sanitizing provisions are available in each classroom, along with provisions for keeping supplies stocked and secured. Post hand washing/sanitizing guidance near fixtures and dispensers (provided as attachment to "General Practices for All Employees"). If hand sanitizer is used, it should be fragrance free to minimize asthma concerns. Ethyl alcohol-based hand sanitizers are preferred and should be used when there is the potential of unsupervised use by children (isopropyl alcohol sanitizers are more toxic). Children under age 9 should only use hand sanitizer under adult supervision.
- 2. Coughing & Sneezing. Provide tissues and waste receptacles (placed in an area not adjacent to a staff or student workspace) to promote proper hand hygiene with regard to coughing and sneezing.
- 3. *Touchless Systems.* Evaluate if other systems can be used to minimize the need to touch surfaces or make person-to-person handoffs.
- 4. Room Communal Items. Consider eliminating or replacing shared high-touch room communal items (e.g., chalk and white-board pens, classroom computer controls, shared desks, group supplies) with alternatives such as personally assigned computers, personal sets of chalk and pens, and pre-packaged, single-use items.
- 5. Student Communal Items. Consider eliminating or replacing shared high-touch student communal items (e.g., water fountains, shared desks, snacks, group supplies) with alternatives such as pre-packaged, single-use items and personally assigned supplies. If possible, assign each student a personal storage space where all their personally assigned supplies may be kept when not in class.
- 6. Student Food and Beverages. Students who bring their own food and beverages to school must be personal, individual containers.





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	PROTECTIVE EQUIPMENT	
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1.	Gloves. Consider providing gloves for staff tasks that require frequent touching of common items or items handled by others (typically disposable gloves). Note, use of gloves for routine teaching activities is not required, instead good personal hygiene practices should be emphasized.	
2.	Face Masks/Shields. Provide all teachers and other staff frequently interacting with student with face shield with a drape when 6 ft distance is not practicable, to be worn in addition to a face mask. Face shields should be individually assigned when feasible, and or cleaned and disinfected between uses. Clear Face Masks are an option for specialized instruction (e.g. phonological instruction).	
3.	Respirators. Use of respirators (e.g., N95, KN95) for teachers and staff who must work within six feet of others, especially those who work with students who may have difficulty complying with physical distancing and personal hygiene guidelines must be reviewed prior to implementation of use. All employees required to wear respirators must be enrolled in the respiratory protection program.	
4.	Student Face Coverings. Students from age 2 will wear a mask at all times except if there is a medical reason, or when eating or drinking. Determine how face coverings will be provided to students who lose, damage, or otherwise end up without one. Determine how to address students with disabilities who refuse or are not able to wear masks.	
5.	Equipment Supplies. Ensure adequate supplies of required or suggested protective equipment are stocked and available to staff and students. Many of these will be provided and restocked into a classroom supply box.	
	ENVIRONMENTAL CLEANING	,
1.	Cleaning Plan. Cleaning/Disinfection Log (Attachment D). The plan should address frequently touched surfaces (e.g., desks, chairs, blackboards, doorknobs, light switches, telephones, keyboards, staplers, supply cubbies, and storage furniture). Consider the ages and abilities of the classroom students when identifying frequently touched surfaces (e.g., floors may be frequently touched in a kindergarten classroom but not in a high school). In general, cleaning/disinfection should be performed between each group of students to use a classroom, but no less than once per day.	
2.	Cleaning Supplies. Cleaning/disinfection supplies must be selected to minimize risk to users and students (e.g., EPA Safer Choice products), including medically sensitive individuals, while still ensuring effectiveness against the COVID-19 virus (i.e., identified for use against the COVID-19 virus by EPA). Products that list	

hydrogen peroxide, citric acid, or lactic acid are preferred. When feasible, products





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that mix these ingredients with peroxyacetic (peracetic) acid, sodium hypochlorite (bleach) or quaternary ammonium compounds are to be avoided. 3. Availability of Cleaning Supplies. Ensure adequate supplies cleaning/disinfection products and materials are stocked and available to support the cleaning plan. Coordinate with custodial staff regarding supply management. 4. Cleaning Safety. Ensure you have proper training on how to use cleaning/disinfection products properly and safety (e.g., eye protection, gloves). 5. Specialized Classroom Items. Consider if any class-specific items may present an elevated risk of contamination (e.g., musical instruments, theater makeup, physical education supplies) due to their use in close contact with students or teachers. In general, these items should be assigned to a single individual or student cohort for the duration of a term or school year and either disposed of or thoroughly cleaned/disinfected before reassignment. 1. Classroom-Specific Practices. (Attachment B) Incorporate classroom-specific information as indicated. Modify the classroom posting provided in Attachment C to reflect key classroom-specific practices as desired. Provide this completed form, the final classroom practices document, and related forms and postings to site principal. Ensure the provisions of the classroom practices are communicated, and a copy of the document made available, to all users of the classroom. 2. HVAC Considerations. Confirm classroom HVAC provisions have been reviewed and modified per the "Buildings—Safe Practices Guide" document. 3. Class Restrooms. If the classroom contains a restroom, confirm it has been addressed per the "Buildings—Safe Practices Guide" document. 4. Employee Training. Ensure you are trained in general COVID-19 safety practices in coordination with the Site Principal. In addition, make sure you are trained in the classroom-specific safe practices developed using this guide. 5. Inspections. In coordination with the Site Principal ensure a system is in pla			
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ncov/communication/print-resources.html?Sort=Date%3A%3Adesc	6.	information to non-English speakers. Postings from the CDC on COVID-19 in multiple languages are available at: https://www.cdc.gov/coronavirus/2019-	





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Attachment A - Hazard Analysis Form

Loca	Location/Operation:			Completed By: Date:			
	Infection Hazard Infection Safety Practices						
ID#	Activity/Task	(potential surface/air transmission)	Risk ¹				
Note		sk presented (High, Med, Low or 1,2,3,4)					





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Attachment D Cleaning Log

Location & F	Location & Purpose			Completed By:	Date:
					-
Completed	ID#	Area/Surface	Infection Risk ¹	Cleaning/Disinfection Protocol (method/product/party)	Frequency

Notes:

1--Infection Risk: Degree of infection risk presented by the surface based on degree of impact and frequency of contact (High, Med, Low or 1,2,3,4...)





3. Therapy Offices/Rooms Safe Practices (Ancillary)

(Speech, OT, RSP, Counseling, Psychologist, Sports Med, ELD, Small Groups)

Note: These practices are current as of the revision date. Since the COVID-19 pandemic is evolving rapidly, extra diligence should be used in watching for updates to these practices.

All Carmel Unified School District students and staff must follow the "General Practices for All Employees and Students" COVID-19 safety guidance and all visitors must follow the "General Practices for All Visitors" COVID-19 safety guidance. This document provides additional more specific COVID-19 safety practices tailored to the classroom listed above. Questions regarding COVID-19 safety should be directed to your supervisor.



MEDICAL SCREENING

- 1. As indicated in the general COVID-19 safety practices guidance for employees and students/visitors, stay home if you exhibit COVID-19 symptoms, test positive, have been in close contact with a known or suspected case, or have risk factors for more severe illness.
- 2. All persons present at the facility, including both staff and students, will be monitored throughout the day for any signs of possible illness. Any person who begins exhibiting symptoms will trigger implementation of the case response protocol. If a student exhibits symptoms, they will be isolated from other students and staff and the caregiver will be contacted to pick up the child. The Safety Coordinator will then be informed for further assessment and follow-up as appropriate.
- 3. All students attending in-person therapy sessions must be screened before joining the session.



PHYSICAL DISTANCING

- 1. Non-essential personnel and vendors should be prohibited from entering the therapy rooms.
- 2. Maintain physical distancing to the maximum extent feasible, but not less than 6 ft. apart. Physical distancing should be maintained during sessions and outside of therapy rooms.
- 3. If physical distancing cannot be maintained during certain tasks, employees must use protective equipment specified below. When at least six feet of distance is not practicable, use additional PPE equipment (such as a face shield with a mask) with minimal duration of close contact (less than 15 min).



PERSONAL HYGIENE

1. Hand Hygiene. Teach and reinforce handwashing with soap and water for at least 20 seconds among children, staff, and parents/caregivers. At a minimum, handwashing should occur when entering, before and after eating or preparing food, before and after playing outside, after using the restroom, after coughing/sneezing, after contact with bodily secretions/excretions, and when leaving. Stagger handwashing to prevent congregating at sinks. When handwashing is not feasible, use provided hand sanitizer, which should be rubbed into hands until completely dry. Therapists and students must practice hand hygiene prior to and after each session.





- 2. Sneezing & Coughing. Teach and reinforce covering coughs and sneezes with a tissue or the inside of their elbow.
- 3. Avoid Touching Face. Teach and reinforce not touching the face (eyes, nose, and mouth) with unwashed hands.
- 4. Personal Belongings/Clothing. Keep each student's belongings separated from others' and in individually labeled containers, cubbies, or areas. Non-essential personal items should be kept at home.
- 5. Shared Materials. Avoid sharing materials when possible. Ensure adequate supplies to minimize sharing of high touch materials (e.g., art supplies, toys, books, games, equipment etc.). Assign supplies and equipment to a single student or limit use to one group of students at a time and clean/disinfect between uses. Discourage sharing of items that are difficult to clean (e.g., stuffed animals/dolls) or eliminate their use altogether.
- 6. *Supplies*. Maintain adequate supplies to support healthy hygiene behaviors, including soap, approved hand sanitizer for classrooms, paper towels, tissues, and no-touch trash cans.



PROTECTIVE EQUIPMENT

- 1. Therapists and students should wear a face shield with drapes. Disinfect face shields with alcohol between sessions and change drapes if possible.
- 2. Employees that handle commonly touched items may wear disposable gloves to supplement frequent hand hygiene. In addition, disposable gloves may be worn during use of disinfectant products.



ENVIRONMENTAL CLEANING

- 1. General Surfaces. Frequently touched surfaces in the classroom are cleaned as specified in the cleaning/disinfection log form and in accordance with the "General Practices for All Employees" COVID-19 safety guidance. This includes desks, chairs, blackboards, doorknobs, light switches, telephones (therapis), keyboards (therapist, staplers (therapist), supply cubbies (therapist), and storage furniture. Coordinate with your supervisor or site contact about your specific responsibilities in supporting the cleaning plan. Keep cleaning/disinfectant products away from young students. Therapists should disinfect surfaces and items impacted during therapy and between sessions. Students legal guardians/parents should be directed to clean and disinfect any items brought into the therapy room.
- 2. Outside Items. Individuals bringing packages, mail, or other items into the area should either: 1) clean/disinfect the item (external surface), 2) clean hands and contacted surfaces after handling of the item, or 3) isolate the items until infectious risk diminishes. Current CDC guidance indicates that coronaviruses on surfaces and objects die within hours to days, and that COVID-19 has not been shown to survive on surfaces longer than seven days.
- 3. Cleaning/Disinfection Supplies. Approved cleaning/disinfection products and materials can be obtained by contacting your supervisor. Per the "General Practices for All Employees" COVID-19





safety guidance, disinfectants must be used per the product label, which typically includes a minimum contact time to ensure proper disinfection, as well as precautions for using the product safely.



ADDITIONAL PRACTICES

- 1. Visitors/Vendors. When hosting a visitor/vendor in the classroom, confirm with them that they are free of COVID-19 symptoms, positive tests, or known exposures. Ensure they are familiar with the general guidance for visitors document, as well as additional classroom-specific practices. For vendors, find out if their work will require any additional safety practices which people in the area will need to follow, and communicate to others as appropriate. Meet visitors at the door and ensure they wash/sanitize their hands and are wearing a face covering.
- 2. Ventilation. As often as feasible within the limitations of weather and instructional needs, ancillary staff and teachers should open windows and doors to increase ventilation in the classroom. Allow enough time to ventilate the room between sessions.
- 3. Consider using technological aids to further support physical distancing during sessions.





4. Health Office Safe Practices

Note: These practices are current as of the revision date. Since the COVID-19 pandemic is evolving rapidly, extra diligence should be used in watching for updates to these practices.

All Carmel Unified School District students and staff must follow the "General Practices for All Employees and Students" COVID-19 safety guidance and all visitors must follow the "General Practices for All Visitors" COVID-19 safety guidance. This document provides additional more specific COVID-19 safety practices tailored to the school's health office. Questions regarding COVID-19 safety should be directed to your supervisor. The school nurse should be familiar with the CDC Interim Infection Prevention and Control Recommendations for Healthcare Personnel During the Coronavirus Disease 2019 (COVID-19) Pandemic.



MEDICAL SCREENING

- 1. As indicated in the general COVID-19 safety practices guidance for employees and students/visitors, stay home if you exhibit COVID-19 symptoms, test positive, have been in close contact with a known or suspected case, or have risk factors for more severe illness.
- 2. All persons present at the facility, including both staff and students, will be monitored throughout the day for any signs of possible illness. Any person who begins exhibiting symptoms will trigger implementation of the case response protocol. If a student exhibits symptoms, they will be isolated from other students and staff and the caregiver will be contacted to pick up the child.
- 3. Before sending a student to the health office, classroom-based treatment should be used if possible. Contact the office if the health aide or nurse is needed.
- 4. Everyone will be screened and triaged prior to entering the nurse's office.
- 5. The nurse should screen students in an outdoor area and based on symptoms and temperature reading may either direct them to the health office or escort them to the isolation room.



PHYSICAL DISTANCING

- 1. Maintain Physical Distance. Maintain at least six feet of distance between staff, students, and others. More distance and more physical barriers between people are better. When at least six feet of distance is not practicable, use additional PPE equipment (such as a face shield with a mask) with minimal duration of close contact (less than 15 min).
- Maximum Occupancies. Adhere to the posted maximum occupancy in order to promote proper
 physical distancing. Limit the number of students attending the nurse's office to one at a time.
 Students are not allowed to wait in the nurse's office and should remain outside the admin
 building until they are called by the nurse.
- 3. Students exhibiting symptoms will be supervised by site designated personnel at a site designated wait room, until a parent arrives at the school to pick up their child.
- 4. *Implementation of Safe Practices*. Staff are responsible for reinforcing safe work practices in the health office. Teach students the safe practices and enforce their implementation.







PERSONAL HYGIENE

- 1. Hand Hygiene. Teach and reinforce handwashing with soap and water for at least 20 seconds among children, staff, and parents/caregivers. At a minimum, handwashing should occur when entering, before and after eating or preparing food, before and after playing outside, after using the restroom, after coughing/sneezing, after contact with bodily secretions/excretions, and when leaving. Stagger handwashing to prevent congregating at sinks. When handwashing is not feasible, use provided hand sanitizer, which should be rubbed into hands until completely dry. The nurse must practice hand hygiene before and after screening students and providing care.
- 2. Sneezing & Coughing. Teach and reinforce covering coughs and sneezes with a tissue or the inside of their elbow.
- 3. Avoid Touching Face. Teach and reinforce not touching the face (eyes, nose, and mouth) with unwashed hands.
- 4. *Supplies*. Maintain adequate supplies to support healthy hygiene behaviors, including soap, approved hand sanitizer for classrooms, paper towels, tissues, and no-touch trash cans.



PROTECTIVE EQUIPMENT

The nurse must wear personal protective equipment in accordance with OSHA PPE standards (29 CFR 1910 Subpart I). Additional precautions should be implemented in such situations as determined on a case-by-case basis.

- 1. Masks. As indicated in the general COVID-19 safety practices guidance for employees and visitors (including students), surgical, paper or cloth masks (a.k.a., face coverings) must be worn at all times unless both: a) you are alone in a substantially enclosed personal workspace (office, cubicle), room, or isolated area, and b) no other persons are anticipated to come within six (6) feet. As per the CDC guidance, surgical facemasks are preferred over other masks for healthcare providers.
- 2. Face Shields and protective eyewear. The nurse must use protective eyewear such as face shields in addition to surgical facemasks when they have to come in close contact with students. Face shields must be cleaned/disinfected between users and at the end of a work shift.
- 3. *Gloves*. The nurse should wear gloves prior to beginning work (screening, triage, examination...etc.) and remove them (using proper hygienic technique) when done and before taking breaks or performing any other tasks. Wash hands immediately after removing gloves.
- 4. Respirators. N95 or equivalent or higher-level respirator should be used instead of surgical facemasks during aerosol-generating procedures. Nurses must be enrolled in the respiratory protection program and fit tested for the use of respirators. Nurse/Health Aide will use N95 mask when in close contact with a person who has possible COVID symptoms.
- 5. *Protective Clothing.* Nurses should wear protective clothing such as gowns and dispose off or launder them immediately after use.



ENVIRONMENTAL CLEANING





- General Surfaces. Frequently touched surfaces in the health office are cleaned as specified in the cleaning/disinfection log form and in accordance with the "General Practices for All Employees" COVID-19 safety guidance. Coordinate with your supervisor or site contact about your specific responsibilities in supporting the cleaning plan. Keep cleaning/disinfectant products away from young students.
- 2. Outside Items. Individuals bringing packages, mail, or other items into the area should either: 1) clean/disinfect the item (external surface), 2) clean hands and contacted surfaces after handling of the item, or 3) isolate the items until infectious risk diminishes. Current CDC guidance indicates that coronaviruses on surfaces and objects die within hours to days, and that COVID-19 has not been shown to survive on surfaces longer than seven days.
- 3. Cleaning/Disinfection Supplies. Approved cleaning/disinfection products and materials can be obtained by the Maintenance Department. Per the "General Practices for All Employees" COVID-19 safety guidance, disinfectants must be used per the product label, which typically includes a minimum contact time to ensure proper disinfection, as well as precautions for using the product safely.



ADDITIONAL PRACTICES

- 1. Visitors in most situations will not be allowed in the health office. If absolutely necessary, follow appropriate protocol.
- 2. Visitors/Vendors. When hosting a visitor/vendor in the health office, confirm with them that they are free of COVID-19 symptoms, positive tests, or known exposures. Ensure they are familiar with the general guidance for visitors document, as well as additional classroom-specific practices. For vendors, find out if their work will require any additional safety practices which people in the area will need to follow, and communicate to others as appropriate. Meet visitors at the door and ensure they wash/sanitize their hands and are wearing a face covering.
- 3. *Ventilation.* Ensure enhanced ventilation in health care delivery spaces in schools or as often as feasible relocate them into workspaces with enhanced ventilation.





Attachment C Health Office Posting

MAXIMUM OCCUPANCY



Person

CLASSROOM INSTRUCTIONS

Follow the general COVID-19 safety practices for all employees and all visitors as well as the following practices specific to this classroom:



Medical Screening. Monitor yourself and all others in the classroom for symptoms related to COVID-19. If anyone displays symptoms, initiate case response protocols immediately.



Physical Distancing. Maintain a distance of at least six feet between yourself and others at all times. The greater the distance the better.



Personal Hygiene. Wash/sanitize your hands upon entry into the classroom, before leaving, and at regular intervals throughout the day. Cover coughs & sneezes and wash/sanitize hands afterwards.



Protective Equipment. Wear a face covering/mask at all times unless medically unable to do so. Teachers may use face shields instead of face coverings when necessary for instruction.



Environmental Cleaning. Clean and disinfect surfaces following the cleaning plan for the room.

Note: These practices are current as of the revision date. Since the COVID-19 pandemic is evolving rapidly, extra diligence should be used in watching for updates to these practices.





Attachment D Health Office Cleaning/Disinfection Log

Location & Purpose:		Completed By:	Date:		
Completed	ID#	Area/Surface	Infection Risk ¹	Cleaning/Disinfection Protocol (method/product/party)	Frequency
Notes:					

1--Infection Risk: Degree of infection risk presented by the surface based on degree of impact and frequency of contact (High, Med, Low or 1,2,3,4...)





5. Office Safe Work Practice

Note: These practices are current as of the revision date. Since the COVID-19 pandemic is evolving rapidly, extra diligence should be used in watching for updates to these practices.

All CUSD employees must follow the "General Practices for All Employees" COVID-19 safety guidance. This document provides additional more specific COVID-19 safety practices tailored to the work area/operation listed above. Questions regarding COVID-19 safety should be directed to your supervisor.



MEDICAL SCREENING

- 1. As indicated in the general COVID-19 safety practices guidance for employees and visitors, stay home if you exhibit COVID-19 symptoms, test positive, have been in close contact with a known or suspected case, or have risk factors for more severe illness.
 - Specify any supplemental screening procedures for the office as needed.



PHYSICAL DISTANCING

- 1. Maintain Physical Distance. Maintain at least six feet of distance between yourself and others. More distance and more physical barriers between people are better. When at least six feet of distance is not practicable, use additional PPE equipment (such as a face shield with a mask and face shield with a drape) with minimal duration of close contact (less than 15 min).
- 2. Reduced Physical Interaction. Follow your supervisor's guidance about working from home, staggering work schedules and break times, conducting business online, and other measures aimed at reducing the need for physical interaction.
- 3. Work Area Layout. Be aware of and support changes in the work area layout that support physical distancing (e.g., do not use seats/desks marked as out of use, do not rearrange configurations changed for distancing, follow traffic flow guidance). Inform your supervisor immediately if any workstations are not configured to support 6 feet of distancing when in use.
 - *Maximum Occupancies.* Maximum office occupancy is determined by site supervisor to promote proper physical distancing:



PERSONAL HYGIENE

- 1. Use proper practices per the "General Practices for All Employees" COVID-19 safety guidance (e.g., hand hygiene, covering sneezes and coughs, managing personal items).
- 2. Clean hands immediately whenever entering the office. Ensure visitors do likewise.

Avoid sharing phones, work supplies, office equipment, and communal amenities, when possible. Do not bring communal food items into the office, unless it is individually packaged and approved by your supervisor in advance.



PROTECTIVE EQUIPMENT





- 1. *Masks*. As indicated in the "General Practices for All Employees" COVID-19 safety guidance, surgical, paper or cloth masks (a.k.a., face coverings) must be worn at all times unless both: a) you are alone in a substantially enclosed personal workspace (office, cubicle), room, or isolated area, and b) no other persons are anticipated to come within six (6) feet.
- 2. Specify what additional protective equipment is to be used in the office, including who, when, and how it is to be used. Address how equipment is obtained and maintained. Common examples are provided below.
- 3. Gloves. Employees performing disinfecting/cleaning must wear disposable rubber gloves. Put the gloves on prior to beginning work and remove them (using proper hygienic technique) when done and before taking breaks or performing any other tasks. Wash hands immediately after removing gloves. Gloves can be obtained in the school or department office.
- 4. Face Shields. The use of face shields will be determined by the site supervisor. Face shields must be cleaned/disinfected between users. Face shields can be obtained from your supervisor.



ENVIRONMENTAL CLEANING

- 1. General Surfaces. Frequently touched surfaces in the common/shared areas of the office are cleaned as specified on the Cleaning/Disinfection Log Form and in accordance with the "General Practices for All Employees" COVID-19 safety guidance. This includes copiers, fax machines, printers, telephones (staff), keyboards (staff), staplers (staff), reception areas, and shared workstations. Coordinate with your supervisor about your specific responsibilities in supporting the office cleaning plan.
- 2. Personal Work Area. Clean/disinfect frequently touched surfaces in your personal area at least once per day (e.g., phone, keyboard/mouse, chair arms, desk surfaces, drawer handles). In addition, clean/disinfect surfaces touched by visitors to your work area following their departure.
- 3. Outside Items. Individuals bringing packages, mail, or other items into the office should either: 1) clean/disinfect the item (external surface), 2) clean hands and contacted surfaces after handling of the item, or 3) isolate the items until infectious risk diminishes. Current CDC guidance indicates that coronaviruses on surfaces and objects die within hours to days, and that COVID-19 has not been shown to survive on surfaces longer than seven days.
- 4. Cleaning/Disinfection Supplies. Cleaning/disinfection products and materials can be obtained by contacting your supervisor. Per the "General Practices for All Employees" COVID-19 safety guidance, disinfectants must be used per the product label, which typically includes a minimum contact time to ensure proper disinfection, as well as precautions for using the product safely.



ADDITIONAL PRACTICES

Visitors/Vendors. Visitors to the office should be avoided when practicable and generally limited to those needed for essential meetings, tasks, or services. When hosting a visitor/vendor, confirm with them that they are free of COVID-19 symptoms and ensure they are familiar with the general guidance for visitors' documents, as well as additional office-specific practices. For vendors, find out if their work will require any additional safety practices people the in the area will need to follow, and communicate to others as appropriate. Meet visitors at the door and ensure they wash/sanitize their hands and are wearing a face covering. Escort visitors (at a distance of six feet), directly to the appropriate meeting room or office.





Attachment B Office Configuration

Insert Office Diagram



Attachment C Work Room Posting

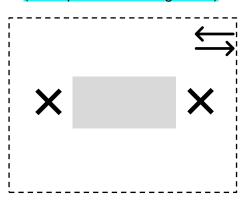
Name of Conference/Break/Work Room

MAXIMUM OCCUPANCY

SEATING CONFIGURATION

(show preferred arrangement)





USE INSTRUCTIONS

Follow the general COVID-19 safety practices for all employees and all visitors in addition to specific practices developed for the subject area. This includes, but is not limited to:



Medical Screening. Do not use this area and remain at home if you are experiencing symptoms related to COVID-19, test positive, or have been exposed to a known or suspected case.



Physical Distancing. Maintain a distance of at least six feet between yourself and others at all times. The greater the distance the better.



Personal Hygiene. Wash hands/use hand sanitizer before and after using the area. Avoid placing personal items on surfaces unless necessary. Cover coughs/sneezes.



Protective Equipment. Wear a face covering/mask which covers the nose and mouth whenever others are present or anticipated to be present in the area.



Environmental Cleaning. Clean and disinfect surfaces you will be frequently touching before and after using the area.

Add additional room-specific instructions to the table above as needed

Note: These practices are current as of the revision date. Since the COVID-19 pandemic is evolving rapidly, extra diligence should be used in watching for updates to these practices.





Attachment D Offices Cleaning/Disinfection Log

Location & Purpose:		Completed By:	Date:		
Completed	ID#	Area/Surface	Infection Risk ¹	Cleaning/Disinfection Protocol (method/product/party)	Frequency
Notes:	nfection	Risk: Degree of infection risk presented by the surface ba	used on dearee	of impact and frequency of contact (High Mad	Low or 1234
111	geenon	Rush. Degree of injection rusk presented by the surjuce bu	sea on acgree	oj impaci ana jreguency oj comaci (High, Mea	, LON OI 1,2,3, 7 <i>j</i>





Attachment E Restroom Posting

RESTROOMS

Follow the general COVID-19 safety practices for all employees and all visitors as well as the following practices specific to restrooms:



Medical Screening. Leave the area and remain at home if you are experiencing symptoms related to COVID-19, test positive, or have been exposed to a known or suspected case.



Physical Distancing. Maintain at least six feet of distance between yourself and others. The greater the distance the better. Minimize the time spent in the area to the shortest time possible. Do not socialize or linger.



Personal Hygiene. Close toilet lids (when present) before flushing. Minimize the surfaces you touch and avoid placing personal items on surfaces. Cover coughs/sneezes and wash your hands before entering and leaving the restroom.



Protective Equipment. Wear a face covering/mask which covers the nose and mouth at all times, unless you are alone and are sure others will not enter (i.e., locked door).



Environmental Cleaning. Restrooms are cleaned/disinfected routinely. Please inform a building/area representative or your supervisor if conditions warrant immediate attention.

Note: These practices are current as of the revision date. Since the COVID-19 pandemic is evolving rapidly, extra diligence should be used in watching for updates to these practices



Location:



COVID-19 Safe Practices Rev 12/7/2020

Attachment B: Offices Risk Assessment Checklist

Note: These practices are current as of the revision date. Since the COVID-19 pandemic is evolving rapidly, extra diligence should be used in watching for updates to these practices.

All CUSD employees must follow the "General Practices for All Employees" COVID-19 safety guidance. The purpose of this document is to provide a tool for developing additional, more specific COVID-19 safe practices tailored to a given office environment.

The person responsible for the subject area completes the following risk assessment checklist and develops office-specific practices and postings based on the general templates provided as attachments. A copy of this completed checklist and the office-specific safe practices document is then forwarded to the COVID-19 Safety Coordinator. Comments or notations regarding each item can be added under each item below or included as an attachment as desired. Questions regarding the development of COVID-19 safety practices should be directed to the COVID-19 Safety Coordinator.

	Date: Completed By:		
#	Item	Done	n/a
(t)	MEDICAL SCREENING		
1.	Symptom Postings. Ensure current CDC information on COVID-19 symptoms are posted at entrances. CDC symptom postings are referenced and provided as attachments to the "General Practices for All Employees" document.		
2.	Supplemental Screening. If operations in your office present a higher COVID-19 risk, contact the COVID-19 Safety Coordinator to evaluate the need for supplemental screening procedures for visitors and employees (e.g., on-site daily temperature checks and questionnaires).		
	PHYSICAL DISTANCING		
1.	Reduce Need for Physical Interaction. Determine a plan for reducing the need for physical interactions (e.g., working from home, staggered work schedules, online meetings/interactions). Incorporate this plan into the office-specific safe practices document (Attachment A) or reference where it is located and how it is communicated to team members and other stakeholders.		
2.	Evaluate Work Area Layout. Make changes to the work area layout to support physical distancing of at least 6 feet (e.g., rearranging or eliminating seating/desks/workstations, installing barriers to create 6 feet of air travel). Items that are not to be used should be removed or marked accordingly. Consider posting a diagram of the modified layouts, traffic flow, and workspace color coding (see Attachment B).		
3.	Traffic Flow. Evaluate the work area and determine if there are opportunities to reduce physical interaction by directing traffic flow (e.g., designated entry/exit doors, "wait here" lines, "this way" directional arrows). Post signs/markings as appropriate. Consider posting a diagram of the modified traffic flow (Attachment B).		





#	Item	Done	n/a
4.	Conference/Break/Work Rooms. Determine seating arrangements to support six feet of distancing, associated maximum occupancies, and additional room-specific practices. Communicate this to users by posting each room (Attachment C).		
5.	Outdoor Seating. Identify opportunities to use of outdoor seating areas (with 6 ft. plus distancing) over indoor areas (e.g., meetings, lunches, breaks).		
	PERSONAL HYGIENE		
1.	Hand Sanitizer. Make hand sanitizer available to all staff, along with provisions for keeping supplies stocked. Hand sanitizer should be made available at entrances and other key locations in the office as practicable (e.g., conference/break rooms).		
2.	Touchless Systems. Evaluate if touchless technologies or other systems can be used to minimize the need to touch surfaces or make person-to-person handoffs (e.g., sanitizer dispensers, waste cans, bulletin boards, transfer shelving/surfaces).		
3.	Communal Items. Consider eliminating or replacing high-touch communal items (e.g., coffee pots, water coolers, bulk snacks) with alternatives such as prepackaged, single-serving items. Eliminate communal ice bins (unless touchless dispensers) and buffet-style communal meals.		
4.	Handwashing Postings. Consider posting handwashing/sanitizing guidance at sinks and sanitizer dispensers in the work area (postings provided in "General Practices for All Employees".)		
E	PROTECTIVE EQUIPMENT		
1.	Gloves. Consider providing gloves for office tasks that require frequent touching of common items or items handled by others (typically disposable gloves).		
2.	Face Shields. Consider providing face shields for people frequently interacting with others (e.g., front desk) or for people leading meetings, making calls, or performing other activities where masks my interfere with communication. Face shields are not a typical replacement option for masks and must be disinfected between each user.		
3.	Equipment Supplies. Ensure adequate supplies of required or suggested protective equipment are stocked and available to employees.		
	ENVIRONMENTAL CLEANING		
1.	Cleaning Plan. Develop a cleaning/disinfection plan for the office by completing the Cleaning/Disinfection Log (Attachment D). Coordinate with building maintenance to determine what will be cleaned by occupants and what will be cleaned by custodial staff. Communicate the plan to employees and document completion of the plan using the provided form. The plan should address frequently touched surfaces (e.g., copiers, fax machines, printers, telephones, keyboards, staplers, surfaces in reception areas, and shared workstations).		
2.	Outside Items. Determine a plan for addressing the cleaning/disinfection or quarantine of incoming packages, mail, or other items. Current CDC guidance indicates that coronaviruses on surfaces and objects die within hours to days, and that COVID-19 has not been shown to survive on surfaces longer than seven days.		





#	Item	Done	n/a
3.	Cleaning Supplies. Ensure adequate supplies cleaning/disinfection products and materials are stocked and available for employees to support the cleaning plan. Coordinate with building maintenance regarding supply management.		
4.	Cleaning Safety. Ensure that employees have proper training on how to use cleaning/disinfection products properly and safely (e.g., eye protection, gloves).		
5.	Higher-Risk Operations. If your office includes, or is in proximity to, operations presenting a higher COVID-19 risk, contact your supervisor for an evaluation of potential supplemental environmental control measures (e.g., airflow management, enhanced filtration, UVGI).		
\bigcirc	ADDITIONAL PRACTICES		
1.	Restrooms. Ensure restrooms located in the office are configured to allow for six feet of distancing (e.g., remove urinals/sinks from service, "wait here" lines). Consider touchless systems for sinks, soap, paper towels, and trash cans. Provision of paper towels is preferred over the use of air dryers. Leave the door propped open if appropriate. Confirm exhaust fans are functional. Ensure the restroom is included on the office cleaning/disinfection plan and is kept stocked with hand cleaning provisions. Place the restrooms posting at entrances (Attachment E) and handwashing guidance at sinks (see "General Practices for All Employees").		
2.	Additional Resources. Additional information on developing plans for COVID-19 safety in offices can be found at: • CDC: https://www.cdc.gov/coronavirus/2019-ncov/community/office-buildings.html • State of CA: https://covid19.ca.gov/pdf/guidance-office-workspaces.pdf • AIHA: https://aiha-assets.sfo2.digitaloceanspaces.com/AIHA/resources/Guidance-Documents/Reopening-Guidance-for-General-Office-Settings_GuidanceDocument.pdf		
3.	Finalize Office-Specific Practices. Modify the office practices document provided in Attachment A to incorporate office-specific information as indicated. Provide this completed form and the final office practices document to your supervisor. Post the office-specific practices document at entrances and take other measures to ensure they are communicated and made available to all employees as appropriate.		
4.	Employee Training. Ensure all employees are trained in general COVID-19 safety practices in coordination with the Safety Coordinator. In addition, make sure employees are trained in the office-specific safe practices developed using this guide.		
5.	Visitor/Vendor Management. Determine a plan for how visitor/vendor entry and movement in the area will be managed to minimize their presence and movement (e.g., calling ahead, staggering visitors, waiting area, escort to meeting rooms). Ensure that all visitors/vendors are aware of the "General Practices for All Visitors" guidance, as well as relevant components of the office-specific practices, before or upon entering. Consider posting visitor instructions at entrances (Attachment F).		
6.	Inspections. In coordination with your supervisor ensure a system is in place for routinely inspecting the work area for compliance with general and specific safe practices.		
7.	Non-English Speakers. Evaluate and address needs for communicating the above information to non-English speakers. Postings from the CDC on COVID-19 in		





#	Item	Done	n/a
	multiple languages are available at: https://www.cdc.gov/coronavirus/2019-		
	ncov/communication/print-resources.html?Sort=Date%3A%3Adesc		

Attachment A: Office Safe Practices

Attachment B: Work Area Diagram

Attachment C: Work Room Posting

Attachment D: Cleaning/Disinfection Log

Attachment E: Restroom Posting

Attachment F: Visitor Posting





Attachment F Visitor Posting

Insert instructions for visitors to the area. Common example: "Please arrange for your visitor to meet you and remain distanced six feet from the door in the designated visitor waiting area until they arrive."

Follow the general COVID-19 safety practices for visitors, as well as additional practices developed for this area as communicated by your contact. This includes, but is not limited to:



Medical Screening. Leave the area and remain at home if you are experiencing symptoms related to COVID-19, test positive, or have been exposed to a known or suspected case.



Physical Distancing. Maintain a distance of at least six feet between yourself and others at all times. The greater the distance the better.



Personal Hygiene. Wash hands/use hand sanitizer before and after using the area. Avoid placing personal items on surfaces unless necessary. Cover coughs/sneezes.



Protective Equipment. Wear a face covering/mask which covers the nose and mouth at all times, unless working alone in room or high cubicle where others will not enter.



Environmental Cleaning. Clean and disinfect surfaces in your personal workspace that you will be frequently touching before and after using the area.

Note: These practices are current as of the revision date. Since the COVID-19 pandemic is evolving rapidly, extra diligence should be used in watching for updates to these practices.





6. Staff Personal Work Areas Safe Practices

Note: These practices are current as of the revision date. Since the COVID-19 pandemic is evolving rapidly, extra diligence should be used in watching for updates to these practices.

All CUSD employees must follow the "General Practices for All Employees" COVID-19 safety guidance. This document provides additional more specific COVID-19 safety practices tailored to the work area/operation listed above. Questions regarding COVID-19 safety should be directed to your supervisor.



MEDICAL SCREENING

1. As indicated in the general COVID-19 safety practices guidance for employees and visitors, stay home if you exhibit COVID-19 symptoms, test positive, have been in close contact with a known or suspected case, or have risk factors for more severe illness.



PHYSICAL DISTANCING

 Defend your space. Other individuals should not come into your personal work area without your acknowledgement. Exceptions include staff members entering briefly for routine tasks while you are not present (e.g., custodial cleaning, drop-off packages). If someone must enter your personal work area while you are present, maintain physical distancing to the maximum extent feasible, but not less than six feet.



PERSONAL HYGIENE

- 1. Use proper practices per the "General Practices for All Employees" COVID-19 safety guidance (e.g., hand hygiene, covering sneezes and coughs, managing personal items).
- 2. Clean hands immediately whenever entering your personal area. Ensure visitors do likewise.
- 3. Accumulation of personal items should be limited to allow for easier surface cleaning and disinfection.



PROTECTIVE EQUIPMENT

1. *Masks*. Per the "General Practices for All Employees" COVID-19 safety guidance, wear a surgical, paper or cloth mask (a.k.a., face coverings) whenever you leave your personal work area. In addition, masks must be worn when others are present in your office within six feet.







ENVIRONMENTAL CLEANING

- 1. Clean/disinfect frequently touched surfaces in your personal area at least once per day (e.g., phone, keyboard/mouse, chair arms, desk surfaces, drawer handles). In addition, clean/disinfect surfaces touched by visitors to your work area following their departure.
- 2. When bringing packages, mail, or other outside items into your personal work area, either: 1) clean/disinfect the item (external surface), 2) clean hands and contacted surfaces after handling of the item, or 3) isolate the items until infectious risk diminishes. Current CDC guidance indicates that coronaviruses on surfaces and objects die within hours to days, and that COVID-19 has not been shown to survive on surfaces longer than seven days.

Location:



COVID-19 Safe Practices Rev 12/7/2020

Staff Special Area Risk Assessment

Note: These practices are current as of the revision date. Since the COVID-19 pandemic is evolving rapidly, extra diligence should be used in watching for updates to these practices.

All CUSD employees must follow the "General Practices for All Employees" COVID-19 safety guidance. The purpose of this document is to provide a tool for developing additional, more specific COVID-19 safe practices tailored to a given area/operation.

The person responsible for the subject area completes the following risk assessment checklist and develops area/operation-specific practices and postings based on the general templates provided as attachments. A given area/operation may require multiple safe practice documents based upon the specific areas, operations, and tasks being performed. A copy of this completed checklist and area/operation-specific safe practices documents is then forwarded to the COVID-19 Safety Coordinator. Comments or notations regarding each item can be added under each item below or included as an attachment as desired. Questions regarding the development of COVID-19 safety practices should be directed to your supervisor.

A	Activity:			
	Date:	Completed By:		
#	Item		Done	n/a
	HAZ	ARD ANALYSIS		
1.	identify minimizare add	Analysis. Review each activity conducted as part of the area/operation to (a) COVID-19 virus transmission risks, and b) measures to be taken to ze the risk. Many, but not necessarily all, of the measures that may be taken dressed below. The COVID-19 infection hazard analysis form provided in ment A may assist in this review.	×	*
2.	health area/op CDC: h https://v	ce Review. Before or after performing the activity analysis, review public guidance on COVID-19 safe practices which pertain to the subject peration. This guidance may be found at: https://www.cdc.gov/coronavirus/2019-ncov/community/index.html, and https://covid19.ca.gov/industry-guidance/#top, and https://covid19.ca.gov/industry-guidance/#top, and https://www.backtoworksafely.org/	×	*



2.0		
(4	MEDICAL SCREENING	
$\overline{}$		
1.	Symptom Postings. Ensure current CDC information on COVID-19 symptoms are posted at entrances. CDC symptom postings are referenced and provided as attachments to the "General Practices for All Employees" document.	
2.	Supplemental Screening. If operations in your area present a higher COVID-19 risk, contact the COVID-19 Safety Coordinator to evaluate the need for supplemental screening procedures for visitors and employees (e.g., on-site daily temperature checks and questionnaires).	
	PHYSICAL DISTANCING	
	I HISICAL DISTANCING	
1.	Reduce Need for Physical Interaction. Determine a plan for reducing the need for physical interactions (e.g., working from home, staggered work schedules, online meetings/interactions). Incorporate this plan into the area-specific safe practices document (Attachment B) or reference where it is located and how it is communicated to team members and other stakeholders.	
2.	Evaluate Work Area Layout. Make changes to the work area layout to support physical distancing of at least 6 feet (e.g., rearranging or eliminating seating/desks/workstations, installing barriers to create 6 feet of air travel). Items that are not to be used should be removed or marked accordingly. Consider posting a diagram of the modified layouts, traffic flow, and workspace color coding (see Attachment C).	
3.	Traffic Flow. Evaluate the work area and determine if there are opportunities to reduce physical interaction by directing traffic flow (e.g., designated entry/exit doors, "wait here" lines, "this way" directional arrows). Post signs/markings as appropriate. Consider posting a diagram of the modified traffic flow (Attachment C).	
4.	Conference/Break/Work Rooms. Determine seating arrangements to support six feet of distancing, associated maximum occupancies, and any room-specific practices. Communicate this to users by posting each room (Attachment D).	
5.	Outdoor Activities. Identify opportunities to move tasks outdoors.	
	PERSONAL HYGIENE	
1.	Hand Sanitizer. Make hand sanitizer available to all staff, along with provisions for keeping supplies stocked. Hand sanitizer should be made available at entrances and other key locations in the office as practicable.	





2.	Touchless Systems. Evaluate if touchless technologies or other systems can be used to minimize the need to touch surfaces or make person-to-person handoffs (e.g., sanitizer dispensers, waste cans, bulletin boards, transfer shelving/surfaces).	
3.	Communal Items. Consider eliminating or replacing high-touch communal items and equipment with alternatives (e.g., single-serving food items, individually assigned equipment). Eliminate communal ice bins (unless touchless dispensers) and buffet-style communal meals.	
4.	Handwashing Postings. Consider posting handwashing/sanitizing guidance at sinks and dispensers (postings provided in "General Practices for All Employees".)	
(PROTECTIVE EQUIPMENT	
1.	<i>Gloves</i> . Consider providing gloves for office tasks that require frequent touching of common items or items handled by others (typically disposable gloves).	
2.	Face Shields. Consider providing face shields for people frequently interacting with others or for people leading meetings/teams or performing other activities where masks my interfere with communication. Face shields are not a typical replacement option for masks and must be disinfected between each user.	
3.	Respirators. Consider the use of assigned respirators (e.g., N95) for persons who must work within six feet of others. All employees required to wear respirators must be enrolled in the respiratory protection program.	
3.	Equipment Supplies. Ensure adequate supplies of required or suggested protective equipment are stocked and available to employees.	
	ENVIRONMENTAL CLEANING	
1.	Cleaning Plan. Develop a cleaning/disinfection plan for the area by completing the Cleaning/Disinfection Log (Attachment E). Coordinate with building maintenance to determine what will be cleaned by custodial staff. Communicate the plan to employees and document completion of the plan using the provided form. The plan should address all frequently touched surfaces.	
2.	Outside Items. Determine a plan for addressing the cleaning/disinfection or quarantine of incoming packages, mail, or other items. Current CDC guidance indicates that coronaviruses on surfaces and objects die within hours to days, and that COVID-19 has not been shown to survive on surfaces longer than seven days.	
3.	Cleaning Supplies. Ensure adequate supplies cleaning/disinfection products and materials are stocked and available for employees to support the cleaning plan. Coordinate with building maintenance regarding supply management.	





4.	Cleaning Safety. Ensure that employees have proper training on how to use cleaning/disinfection products properly and safely (e.g., eye protection, gloves).	
5.	Higher-Risk Operations. If your area includes, or is in proximity to, operations presenting a higher COVID-19 risk, contact your supervisor for an evaluation of potential supplemental environmental control measures (e.g., airflow management, enhanced filtration, UVGI).	
	ADDITIONAL PRACTICES	
1.	Restrooms. Ensure restrooms located in the area are configured to allow for six feet of distancing (e.g., remove urinals/sinks from service, "wait here" lines). Consider touchless systems for sinks, soap, paper towels, and trash cans. Provision of paper towels is preferred over the use of air dryers. Leave the door propped open if appropriate. Confirm exhaust fans are functional. Ensure the restroom is included on the area cleaning/disinfection plan and is kept stocked with hand cleaning provisions. Place the restrooms posting at entrances (Attachment F) and handwashing guidance at sinks (see "General Practices for All Employees").	
3.	Finalize Area-Specific Practices. Modify the practices document provided in Attachment B to incorporate area-specific information as indicated. Provide this completed form and the final safe practices document to your supervisor. Post the area-specific practices document at entrances and take other measures to ensure they are communicated and made available to all employees as appropriate.	
4.	Employee Training. Ensure all employees are trained in general COVID-19 safety practices in coordination with the COVID-19 Training Plan. In addition, make sure employees are trained in the area-specific safe practices developed using this guide.	
5.	Visitor/Vendor Management. Determine a plan for how visitor/vendor entry and movement in the area will be managed to minimize their presence and movement (e.g., calling ahead, staggering visitors, waiting area, escort to meeting rooms). Ensure that all visitors/vendors are aware of the "General Practices for All Visitors" guidance, as well as relevant components of the office-specific practices, before or upon entering. Consider posting visitor instructions at entrances (Attachment G).	
6.	Inspections. In coordination with your supervisor ensure a system is in place for routinely inspecting the work area for compliance with general and specific safe practices.	
7.	Non-English Speakers. Evaluate and address needs for communicating the above information to non-English speakers. Postings from the CDC on COVID-19 in multiple languages are available at: https://www.cdc.gov/coronavirus/2019-ncov/communication/print-resources.html?Sort=Date%3A%3Adesc	





Attachment A: Job Hazard Analysis Form

Attachment B: Safe Practices Template

Attachment C: Work Area Diagram

Attachment D: Work Room Posting

Attachment E: Cleaning/Disinfection Log

Attachment F: Restroom Posting

Attachment G: Visitor Posting

Campus:



COVID-19 Safe Practices Rev 10/7/2020

7. Buildings Risk Assessment

Note: These practices are current as of the revision date. Since the COVID-19 pandemic is evolving rapidly, extra diligence should be used in watching for updates to these practices.

All Carmel Unified School District employees must follow the "General Practices for All Employees" COVID-19 safety guidance and all visitors must follow the "General Practices for All Visitors" COVID-19 safety guidance. The purpose of this document is to provide a tool for developing additional, more specific COVID-19 safe practices tailored to a given building's general common areas and systems (e.g., lobbies, elevators, restrooms, HVAC systems). Each area/operation within the building is responsible for developing their own specific COVID-19 safe practices tailored to their area/operation.

The person responsible for the general common areas and systems of the building completes the following risk assessment checklist and develops building-specific practices and postings based on the general templates provided as attachments. A copy of this completed checklist and the office-specific safe practices document is then forwarded to the Vice President of Administrative Services (campuses) or Risk Services Office (District site). Comments or notations regarding each item can be added under each item below or included as an attachment as desired. Questions regarding the development of COVID-19 safety practices should be directed to the appropriate Vice President's office for the work area.

	Date: Completed By:		
#	Item	Done	n/a
((2)	MEDICAL SCREENING		
1.	Symptom Postings. Ensure current CDC information on COVID-19 symptoms are posted at entrances. CDC symptom postings are referenced and provided as attachments to the "General Practices for All Employees" document.		
2.	Supplemental Screening. Contact Human Resources if there is concern that operations within the building present higher COVID-19 risks which may warrant supplemental screening at building entrances (e.g., on-site daily temperature checks and questionnaires).		
	PHYSICAL DISTANCING		
1.	Traffic Flow. Evaluate the building and identify opportunities to reduce physical interaction by directing traffic flow (e.g., designated entry/exit doors, "wait here"		

Building:

	lines, "this way" directional arrows, one-directional stairwells). Post signs/markings as appropriate. Consider posting a diagram of the modified traffic flow (Attachment A). See rows on restrooms, reception desks, and elevators below.			
2.	2. Common Area Layout. Make changes to the layout of common areas to support physical distancing of at least 6 feet and to discourage congregating and interaction (e.g., restrict access to unneeded areas, rearrange/eliminate seating, mark seating locations). Consider incorporating into diagram postings (Attachment A).			
3.	3. Common Break/Work Rooms. Determine seating arrangements to support six feet of distancing, associated maximum occupancies, and any room-specific practices. Communicate this to users by posting each room (Attachment B).			
4.	Staggered Start Times. Coordinate with occupant group representatives to explore opportunities to stagger activities (e.g., start/stop times, events) in order to minimize the number of people using building common areas at the same time.			
	PERSONAL HYGIENE			
1.	Hand Sanitizer. Make hand sanitizer available in common areas, along with provisions for keeping supplies stocked. Hand sanitizer should be made available at entrances and other key locations in the building as practicable.			
2.	Touchless Systems. Evaluate if touchless technologies or other systems can be used to minimize the need to touch surfaces (e.g., sanitizer dispensers, waste cans, automated doors). Leave doors open to eliminate need to touch where practicable.			
3.	Communal Items. Consider eliminating or replacing high-touch communal items and equipment with alternatives (e.g., single-serving food items, scoop-type ice bins, coffee table books/magazines).			
4.	Handwashing Postings. Consider posting handwashing/sanitizing guidance at sinks and dispensers (postings provided in "General Practices for All Employees".)			
	PROTECTIVE EQUIPMENT			
1.	Masks. Determine if masks (a.k.a., face coverings) will be made available as needed to persons entering the building. If so, ensure procedures for dissemination and stocking of supplies.			
	ENVIRONMENTAL CLEANING			
1.	Cleaning Plan. Develop a cleaning/disinfection plan for the building common areas by completing the Cleaning/Disinfection Log (Attachment C). Document completion on the provided form as well. The plan should address cleaning/disinfection of all frequently touched surfaces at least daily and ideally multiple times a day (e.g., doors, elevator buttons, handrails, vending machines, dispensers). If building maintenance performs cleaning within the work areas of occupants, work with area representatives to develop a cleaning/disinfection plan specific to each area.			

Cleaning Supplies. Ensure adequate supplies cleaning/disinfection products and materials are stocked and available to support the cleaning plan. 3. Cleaning Safety. Ensure that employees have proper training on how to use cleaning/disinfection products properly and safely (e.g., eye protection, gloves). ADDITIONAL PRACTICES Restrooms. Ensure restrooms located in the area are configured to allow for six feet of distancing (e.g., remove urinals/sinks from service, "wait here" lines). Consider touchless systems for sinks, soap, paper towels, and trash cans. Provision of paper towels is preferred over the use of air dryers. Leave the door propped open if appropriate. Confirm exhaust fans are functional. Ensure the restroom is included on the area cleaning/disinfection plan and is kept stocked with hand cleaning provisions. Place the restrooms posting at entrances (Attachment D) and handwashing guidance at sinks (see "General Practices for All Employees"). 2. Reception Desks. Make changes to the layout of reception desks to support physical distancing of at least 6 feet between and among customers and employees (e.g., queuing lines, rearranging or eliminating seating/workstations, installing barriers to create 6 feet of air travel). Ensure safe practices are in place specifically addressing the roles of reception personnel. 3. HVAC—Ventilation. Increase ventilation beyond normal guidance levels for the type of space. This may be done by opening outdoor air dampers, potentially as high as 100%. Increasing outdoor air must be balanced with providing acceptable thermal comfort, with preference toward increasing ventilation during the current pandemic. Consideration should also be given to outdoor pollution levels. Reduced building occupancies also effectively increases ventilation rates per person. Consider opening doors and windows to enhance ventilation as well. Disable demandcontrolled ventilation systems that reduce air supply based on temperature or occupancy. Keep systems running longer hours than usual in order to facilitate ventilation between periods of use. 4. HVAC—Filtration. Increase air filtration to the highest level practicable (e.g., MERV-13) without significantly reducing design airflow. Check the fit/seal of filters to minimize air bypass. 5. HVAC—High Risk Areas. If the building includes areas/operations presenting a higher COVID-19 risk, contact the Risk Services office for an evaluation of potential supplemental HVAC-related control measures (e.g., airflow management, enhanced system or portable filtration to MERV-13 or HEPA, UVGI systems). Further guidance from ASHRAE related to COVID-19 and HVAC-related controls can be found at: https://www.ashrae.org/File%20Library/About/Position%20Documents/Airborne-Infectious-Diseases.pdf and https://www.ashrae.org/file%20library/about/position%20documents/pd_infectiousae

rosols_2020.pdf.

6.	Other Areas. Evaluate other areas associated with the building (e.g., parking garages, outdoor areas) relative to the items on this checklist and apply measures as appropriate.	
7.	Supplemental Guidance Review. In addition to the above checklist items related to buildings in general, review and incorporate public health guidance on COVID-19 safe practices which pertain to specific types of work areas/operations as appropriate. This guidance may be found at:	
	 CDC: https://www.cdc.gov/coronavirus/2019-ncov/community/index.html, and https://www.html State of CA: https://covid19.ca.gov/industry-guidance/#top, and https://www.dir.ca.gov/dosh/coronavirus/ AIHA: https://www.backtoworksafely.org/ 	
8.	Finalize Building Posting. Review the attached building safety posting and modify for the specific building as appropriate (see Attachment F). Provide this completed form and associated documents to the Vice President of Administrative Services (campuses) or Risk Services Office (District site). Post the building posting at entrances and other key high-visibility locations as appropriate.	
9	Vendor Management. Ensure that all building-related vendors are aware of the "General Practices for All Visitors" guidance, as well as relevant area/operation specific practices.	
10.	Occupant Group Communication. Communicate with occupant group representatives to ensure they are aware of building safe practices so that they may incorporate them into the COVID-19 safety training for their employees and stakeholders.	
11.	Inspections. In coordination with the Risk Services office, ensure a system is in place for routinely inspecting the building common areas for compliance with building safe practices.	
12.	Non-English Speakers. Evaluate and address needs for communicating the above information to non-English speakers. Postings from the CDC on COVID-19 in multiple languages are available at: https://www.cdc.gov/coronavirus/2019-ncov/communication/print-resources.html?Sort=Date%3A%3Adesc	

Attachment B Work Room Posting

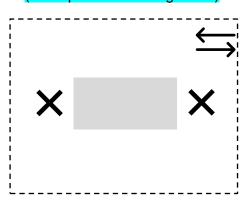
Name of Conference/Break/Work Room

MAXIMUM OCCUPANCY

SEATING CONFIGURATION

(show preferred arrangement)





USE INSTRUCTIONS

Follow the general COVID-19 safety practices for all employees and all visitors in addition to specific practices developed for the subject area. This includes, but is not limited to:



Medical Screening. Do not use this area and remain at home if you are experiencing symptoms related to COVID-19, test positive, or have been exposed to a known or suspected case.



Physical Distancing. Maintain a distance of at least six feet between yourself and others at all times. The greater the distance the better.



Personal Hygiene. Wash hands/use hand sanitizer before and after using the area. Avoid placing personal items on surfaces unless necessary. Cover coughs/sneezes.



Protective Equipment. Wear a face covering/mask which covers the nose and mouth whenever others are present or anticipated to be present in the area.



Environmental Cleaning. Clean and disinfect surfaces you will be frequently touching before and after using the area.

Add additional room-specific instructions to the table above as needed

Note: These practices are current as of the revision date. Since the COVID-19 pandemic is evolving rapidly, extra diligence should be used in watching for updates to these practices.

Attachment C Cleaning Log

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Location & Purpose:			Completed By:	Date:					
	· · · · · · · · · · · · · · · · · · ·								
Completed	ID#	Area/Surface	Infection Risk ¹	Cleaning/Disinfection Protocol (method/product/party)	Frequency				

Notes:

1--Infection Risk: Degree of infection risk presented by the surface based on degree of impact and frequency of contact (High, Med, Low or 1,2,3,4...)

Attachment D Restroom Posting Buildings

RESTROOMS

Follow the general COVID-19 safety practices for all employees and all visitors as well as the following practices specific to restrooms:



Medical Screening. Leave the area and remain at home if you are experiencing symptoms related to COVID-19, test positive, or have been exposed to a known or suspected case.



Physical Distancing. Maintain at least six feet of distance between yourself and others. The greater the distance the better. Minimize the time spent in the area to the shortest time possible. Do not socialize or linger.



Personal Hygiene. Close toilet lids (when present) before flushing. Minimize the surfaces you touch and avoid placing personal items on surfaces. Cover coughs/sneezes and wash your hands before entering and leaving the restroom.



Protective Equipment. Wear a face covering/mask which covers the nose and mouth at all times, unless you are alone and are sure others will not enter (i.e., locked door).



Environmental Cleaning. Restrooms are cleaned/disinfected routinely. Please inform a building/area representative or your supervisor if conditions warrant immediate attention.

Note: These practices are current as of the revision date. Since the COVID-19 pandemic is evolving rapidly, extra diligence should be used in watching for updates to these practices.

Attachment F Buildings Safe Practices Posting

XXXX Building

Follow the general COVID-19 safety practices for employees and visitors, as well as additional practices developed for this building as follows:



Medical Screening. Leave the building and remain at home if you are experiencing symptoms related to COVID-19, test positive or have been exposed to a known or suspected case.



Physical Distancing. Maintain at least six feet between yourself and others at all times. The greater the distance the better. Respect distancing markings and notifications. Avoid congregating or loitering in common areas. Utilize outdoor areas when feasible.



Personal Hygiene. Wash hands/use hand sanitizer when entering and exiting the building. Avoid placing personal items on surfaces unless necessary. Cover coughs/sneezes.



Protective Equipment. Wear a face covering/mask which covers the nose and mouth at all times when moving through the building or using common areas.



Environmental Cleaning. High touch surfaces in the building are cleaned and disinfected on a routine basis. In addition, ventilation systems have been adjusted to help enhance COVID-19 safety where practicable.



Additional Practices. Coordinate with representatives from the specific areas/operations you are visiting in the building regarding additional COVID-19 safe practices that may apply.

Note: These practices are current as of the revision date. Since the COVID-19 pandemic is evolving rapidly, extra diligence should be used in watching for updates to these practices.



Location:



COVID-19 Safe Practices Rev 12/7/2020

8. Special Area - Safe Practices Risk Assessment

Note: These practices are current as of the revision date. Since the COVID-19 pandemic is evolving rapidly, extra diligence should be used in watching for updates to these practices.

All CUSD employees must follow the "General Practices for All Employees" COVID-19 safety guidance and all visitors must follow the "General Practices for All Visitors" COVID-19 safety guidance. The purpose of this document is to provide a tool for developing additional, more specific COVID-19 safe practices tailored to a given area/operation.

The person responsible for the subject area completes the following risk assessment checklist and develops area/operation-specific practices and postings based on the general templates provided as attachments. A given area/operation may require multiple safe practice documents based upon the specific areas, operations, and tasks being performed. A copy of this completed checklist and area/operation-specific safe practices documents is then forwarded to your supervisor. Comments or notations regarding each item can be added under each item below or included as an attachment as desired. Questions regarding the development of COVID-19 safety practices should be directed to your supervisor.

Eddulon.			
Activity:			
	Date: Completed By:		
#	Item	Done	n/a
	HAZARD ANALYSIS		
1.	Activity Analysis. Review each activity conducted as part of the area/operation to identify: a) COVID-19 virus transmission risks, and b) measures to be taken to minimize the risk. Many, but not necessarily all, of the measures that may be taken are addressed below. The COVID-19 infection hazard analysis form provided in Attachment A may assist in this review.		
2.	Guidance Review. Before or after performing the activity analysis, review public health guidance on COVID-19 safe practices which pertain to the subject area/operation. This guidance may be found at: • CDC: https://www.cdc.gov/coronavirus/2019-ncov/community/index.html , and https://www.cdc.gov/coronavirus/2019-ncov/community/worker-safety-support/index.html • State of CA: https://covid19.ca.gov/industry-guidance/#top , and https://www.dir.ca.gov/dosh/coronavirus/ • AIHA: https://www.backtoworksafely.org/		
(1	MEDICAL SCREENING		
1.	Symptom Postings. Ensure current CDC information on COVID-19 symptoms are posted at entrances. CDC symptom postings are referenced and provided as attachments to the "General Practices for All Employees" document.		





#	Item	Done	n/a
2.	Supplemental Screening. If operations in your area present a higher COVID-19 risk, contact your supervisor to evaluate the need for supplemental screening procedures for visitors and employees (e.g., on-site daily temperature checks and questionnaires).		
	PHYSICAL DISTANCING		
1.	Reduce Need for Physical Interaction. Determine a plan for reducing the need for physical interactions (e.g., working from home, staggered work schedules, online meetings/interactions). Incorporate this plan into the area-specific safe practices document (Attachment B) or reference where it is located and how it is communicated to team members and other stakeholders.		
2.	Evaluate Work Area Layout. Make changes to the work area layout to support physical distancing of at least 6 feet (e.g., rearranging or eliminating seating/desks/workstations, installing barriers to create 6 feet of air travel). Items that are not to be used should be removed or marked accordingly. Consider posting a diagram of the modified layouts, traffic flow, and workspace color coding (see Attachment C).		
3.	Traffic Flow. Evaluate the work area and determine if there are opportunities to reduce physical interaction by directing traffic flow (e.g., designated entry/exit doors, "wait here" lines, "this way" directional arrows). Post signs/markings as appropriate. Consider posting a diagram of the modified traffic flow (Attachment C).		
4.	Conference/Break/Work Rooms. Determine seating arrangements to support six feet of distancing, associated maximum occupancies, and any room-specific practices. Communicate this to users by posting each room (Attachment D).		
5.	Outdoor Activities. Identify opportunities to move tasks outdoors.		
	PERSONAL HYGIENE		
1.	Hand Sanitizer. Make hand sanitizer available to all staff, along with provisions for keeping supplies stocked. Hand sanitizer should be made available at entrances and other key locations in the office as practicable.		
2.	Touchless Systems. Evaluate if touchless technologies or other systems can be used to minimize the need to touch surfaces or make person-to-person handoffs (e.g., sanitizer dispensers, waste cans, bulletin boards, transfer shelving/surfaces).		
3.	Communal Items. Consider eliminating or replacing high-touch communal items and equipment with alternatives (e.g., single-serving food items, individually assigned equipment). Eliminate communal ice bins (unless touchless dispensers) and buffet-style communal meals.		
4.	Handwashing Postings. Consider posting handwashing/sanitizing guidance at sinks and dispensers (postings provided in "General Practices for All Employees".)		
(PROTECTIVE EQUIPMENT		
1.	Gloves. Consider providing gloves for office tasks that require frequent touching of common items or items handled by others (typically disposable gloves).		





#	Item	Done	n/a
2.	Face Shields. Consider providing face shields for people frequently interacting with others or for people leading meetings/teams or performing other activities where masks my interfere with communication. Face shields are not a typical replacement option for masks and must be disinfected between each user.		
3.	Respirators. Consider the use of assigned respirators (e.g., N95) for persons who must work within six feet of others. All employees required to wear respirators must be enrolled in the respiratory protection program.		
3.	. <i>Equipment Supplies</i> . Ensure adequate supplies of required or suggested protective equipment are stocked and available to employees.		
	ENVIRONMENTAL CLEANING		
1.	. Cleaning Plan. Develop a cleaning/disinfection plan for the area by completing the Cleaning/Disinfection Log (Attachment E). Coordinate with building maintenance to determine what will be cleaned by custodial staff. Communicate the plan to employees and document completion of the plan using the provided form. The plan should address all frequently touched surfaces.		
2.	2. Outside Items. Determine a plan for addressing the cleaning/disinfection or quarantine of incoming packages, mail, or other items. Current CDC guidance indicates that coronaviruses on surfaces and objects die within hours to days, and that COVID-19 has not been shown to survive on surfaces longer than seven days.		
3.	3. Cleaning Supplies. Ensure adequate supplies cleaning/disinfection products and materials are stocked and available for employees to support the cleaning plan. Coordinate with your supervisor for supplies.		
4.	1. Cleaning Safety. Ensure that employees have proper training on how to use cleaning/disinfection products properly and safely (e.g., eye protection, gloves).		
5.	. Higher-Risk Operations. If your area includes, or is in proximity to, operations presenting a higher COVID-19 risk, contact your supervisor for an evaluation of potential supplemental environmental control measures (e.g., airflow management, enhanced filtration, UVGI).		
(i)	ADDITIONAL PRACTICES		
1.	Restrooms. Ensure restrooms located in the area are configured to allow for six feet of distancing (e.g., remove urinals/sinks from service, "wait here" lines). Consider touchless systems for sinks, soap, paper towels, and trash cans. Provision of paper towels is preferred over the use of air dryers. Leave the door propped open if appropriate. Confirm exhaust fans are functional. Ensure the restroom is included on the area cleaning/disinfection plan and is kept stocked with hand cleaning provisions. Place the restrooms posting at entrances (Attachment F) and handwashing guidance at sinks (see "General Practices for All Employees").		
3.			





#	Item	Done	n/a
4.	<i>Employee Training.</i> Ensure all employees are trained in general COVID-19 safety practices in coordination with the CUSD COVID-19 Training Plan. In addition, make sure employees are trained in the area-specific safe practices developed using this guide.		
5.	Visitor/Vendor Management. Determine a plan for how visitor/vendor entry and movement in the area will be managed to minimize their presence and movement (e.g., calling ahead, staggering visitors, waiting area, escort to meeting rooms). Ensure that all visitors/vendors are aware of the "General Practices for All Visitors" guidance, as well as relevant components of the office-specific practices, before or upon entering. Consider posting visitor instructions at entrances (Attachment G).		
6.	Inspections. In coordination with your supervisor ensure a system is in place for routinely inspecting the work area for compliance with general and specific safe practices.		
7.	Non-English Speakers. Evaluate and address needs for communicating the above information to non-English speakers. Postings from the CDC on COVID-19 in multiple languages are available at: https://www.cdc.gov/coronavirus/2019-ncov/communication/print-resources.html?Sort=Date%3A%3Adesc		

Attachment A: Job Hazard Analysis Form

Attachment B: Safe Practices Template

Attachment C: Work Area Diagram

Attachment D: Work Room Posting

Attachment E: Cleaning/Disinfection Log

Attachment F: Restroom Posting

Attachment G: Visitor Posting





Add:

Attachment A: Job Hazard Analysis Form





9. Special Area Safe Practices Guide

Note: These practices are current as of the revision date. Since the COVID-19 pandemic is evolving rapidly, extra diligence should be used in watching for updates to these practices.

All CUSD employees must follow the "General Practices for All Employees" COVID-19 safety guidance and all visitors must follow the "General Practices for All Visitors" COVID-19 safety guidance. This document provides additional more specific COVID-19 safety practices tailored to the work area/operation listed above. Questions regarding COVID-19 safety should be directed to your supervisor or site contact.



MEDICAL SCREENING

- 1. As indicated in the general COVID-19 safety practices guidance for employees and visitors, stay home if you exhibit COVID-19 symptoms, test positive, have been in close contact with a known or suspected case, or have risk factors for more severe illness.
- 2. Specify any supplemental screening procedures for the area as needed.



PHYSICAL DISTANCING

- 1. Maintain Physical Distance. Maintain at least six feet of distance between yourself and others. More distance and more physical barriers between people are better. When at least six feet of distance is not practicable, use additional PPE equipment (such as a face shield with a mask and drape) with minimal duration of close contact (less than 15 min).
- 2. Reduced Physical Interaction. Follow your guidance from your supervisor or site contact about working from home, staggering work schedules and break times, conducting business online, and other measures aimed at reducing the need for physical interaction
- 3. Work Area Layout. Be aware of and support changes in the work area layout that support physical distancing (e.g., do not use seats/desks marked as out of use, do not rearrange configurations changed for distancing, follow traffic flow guidance). Inform your supervisor or site contact immediately if any workstations are not configured to support 6 feet of distancing when in use.
- 4. Maximum Occupancies. Occupancy will be determined in consultation with Safety Coordinator.



PERSONAL HYGIENE

- 1. Use proper practices per the general COVID-19 safety practices guidance for employees and visitors (e.g., hand hygiene, covering sneezes and coughs, managing personal items).
- 2. Clean hands immediately whenever entering the work area.
- 3. Avoid sharing phones, work supplies, equipment, and communal amenities, when possible. Do not bring communal food items into the area, unless it is individually packaged and approved by your supervisor or site contact in advance.



PROTECTIVE EQUIPMENT

1. *Masks*. As indicated in the general COVID-19 safety practices guidance for employees and visitors, surgical, paper or cloth masks (a.k.a., face coverings) must be worn at all times unless





both: a) you are alone in a substantially enclosed personal workspace (office, cubicle), room, or isolated area, and b) no other persons are anticipated to come within six (6) feet.

- 2. Specify what additional protective equipment is to be used in the area, including who, when, and how it is to be used. Address how equipment is obtained and maintained
- 3. Gloves. Coordinate with your supervisor when the use of gloves is required. Employees wearing gloves must put the gloves on prior to beginning work and remove them (using proper hygienic technique) when done and before taking breaks or performing any other tasks. Wash hands immediately after removing gloves. Gloves can be obtained by contacting your site supervisor.
- 4. Face Shields. Coordinate with your supervisor to determine when face shields should be worn. . Face shields must be cleaned/disinfected between users. Face shields can be obtained by contacting your supervisor.
- 5. Respirators. Coordinate with your supervisor to determine if the use of a Respirator (N-95 mask). Employees using an N-95 mask Respirator supplies can be obtained by contacting your supervisor.



ENVIRONMENTAL CLEANING

- General Surfaces. Frequently touched surfaces in the common/shared areas of the office are cleaned as specified on the Cleaning/Disinfection Log Form and in accordance with general COVID-19 safety practices guidance for employees and visitors. This includes doorknobs, light switches, common work surfaces, telephones, common equipment, and shared workstations. Coordinate with your supervisor or site contact about your specific responsibilities in supporting the cleaning plan.
- 2. Personal Work Area. Clean/disinfect frequently touched surfaces in your personal area at least once per day (e.g., phone, keyboard/mouse, chair arms, handles, work surfaces). In addition, clean/disinfect surfaces touched by visitors to your work area following their departure.
- 3. Outside Items. Individuals bringing packages, mail, or other items into the area should either: 1) clean/disinfect the item (external surface), 2) clean hands and contacted surfaces after handling of the item, or 3) isolate the items until infectious risk diminishes. Current CDC guidance indicates that coronaviruses on surfaces and objects die within hours to days, and that COVID-19 has not been shown to survive on surfaces longer than seven days.
- 4. Cleaning/Disinfection Supplies. Cleaning/disinfection products and materials can be obtained by contacting your supervisor. Per the general COVID-19 safety practices guidance for employees and visitors, disinfectants must be used per the product label, which typically includes a minimum contact time to ensure proper disinfection, as well as precautions for using the product safely.



ADDITIONAL PRACTICES

Visitors/Vendors. Visitors to the area should be avoided when practicable and generally limited to those needed for essential meetings, tasks, or services. When hosting a visitor/vendor, confirm with them that they are free of COVID-19 symptoms and ensure they are familiar with the general guidance for visitors' documents, as well as additional area-specific practices. For vendors, find out if their work will require any additional safety practices people the in the area will need to follow, and communicate to others as appropriate. Meet visitors at the door and ensure they wash/sanitize their hands and are wearing a face covering. Escort visitors (at a distance of six feet), directly to the appropriate meeting room or office.



Conference/Break/Work Room Configuration

Name of Conference/Break/Work Room

MAXIMUM OCCUPANCY



SEATING CONFIGURATION

USE INSTRUCTIONS

Follow the general COVID-19 safety practices for all employees and all visitors in addition to specific practices developed for the subject area. This includes, but is not limited to:



Medical Screening. Do not use this area and remain at home symptoms related to COVID-19, test positive or have been ex suspected case.

riencing n or



Physical Distancing. Maintain a distance of at least six feet between yourself and others at all times. The greater the distance the better.



Personal Hygiene. Wash hands/use hand sanitizer before and after using the area. Avoid placing personal items on surfaces unless necessary. Cover coughs/sneezes.



Protective Equipment. Wear a face covering/mask which covers the nose and mouth whenever others are present or anticipated to be present in the area.



Environmental Cleaning. Clean and disinfect surfaces you will be frequently touching before and after using the area.

Add additional room-specific instructions to the table above as needed





Attachment E: Cleaning/Disinfection Log

Attachment F: Restroom Posting





10. General Practices for Visitors

Note: These practices are current as of the revision date. Since the COVID-19 pandemic is evolving rapidly, extra diligence should be used in watching for updates to these practices.

What is the hazard?

COVID-19 is the respiratory illness caused by the SARS-CoV-2 virus (a.k.a., novel coronavirus). The virus is thought to be spread mainly from person-to-person through respiratory droplets and contact. It may also be spread by touching a surface that has the virus on it and then touching your eyes, nose, or mouth. There is the potential to be exposed to the virus while at work, in the community, and at home. The latest information regarding COVID-19 is available on the U.S. Centers for Disease Control (CDC) website (https://www.cdc.gov/coronavirus/2019-ncov/index.html). This website should be regularly reviewed in order to stay current on the dynamics of the disease, including its risks, symptoms, and current guidance on prevention and what to do if you are sick.

What safe work practices should be followed?

The following general guidance should be followed by all Carmel Unified School District visitors. Additional more specific practices tailored to specific areas and operations may also apply. All visitors should be familiar with these additional practices within the areas they are entering. Questions regarding COVID-19 safety should be directed to your supervisor.



MEDICAL SCREENING

- 1. Symptoms. Visitors must screen themselves for symptoms of COVID-19 and not come on site if symptoms are noted or if a positive COVID-19 test is obtained. Symptoms include, but are not limited to, cough, fever, chills, muscle pain, shortness of breath, difficulty breathing, sore throat, and new loss of taste or smell. Visitors should not come on campus until they have been cleared to do so by a medical professional following CDC guidance. CDC guidance on symptoms is located at: https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html.
- 2. *Exposure*. Visitors should not come on site if they have been in close contact with or otherwise exposed to a known or suspected case of COVID-19. Visitors should not come on site until they have been cleared to do so by a medical professional following guidance from the CDC, or until it has been 14 days from the subject exposure.
- 3. At Risk Persons. Some individuals are at higher risk of serious complications from COVID-19, including older adults and people of any age who have serious underlying medical conditions. More information is available at: https://www.cdc.gov/coronavirus/2019-ncov/specific-groups/people-at-higher-risk.html. If a visitor feels they are at greater risk, they should consult with a medical professional prior to engaging in campus-based activities.



PHYSICAL DISTANCING

- 1. *Maintain Physical Distance*. Maintain at least six feet of distance between yourself and others. More distance and more physical barriers between people are better.
- 2. *Limit Time on Site.* Reduce the need to be on site to the extent possible. Coordinate with others remotely whenever possible.
- 3. *Distancing Markings/Notifications*. Follow any markings regarding location indicators, traffic flow, or maximum occupancy which may appear on walls, floors, signage, seats or other locations. These notifications are in place to help promote proper physical distancing. Common examples





- include designations for in use/out of use seating, "wait here" markings on floors, designated entry/exit doors, and "this way" arrows on floors.
- 4. Discontinue Non-Essential In-Person Meetings/Gatherings. If an in-person meeting/gathering is determined to be essential, it must be limited to essential attendees, short as possible in duration, and conducted maintaining at least six feet of distancing with masks.



PERSONAL HYGIENE

- 1. Hand Hygiene. Clean your hands often and avoid touching your eyes, nose, and mouth with unwashed hands. Avoid handshakes or physical contact with others. Wash hands with soap and water for at least 20 seconds. If soap and water are not readily available, use a proper hand sanitizer (e.g., 60% ethyl alcohol). Cover all surfaces of your hands and rub them together until they feel dry. CDC guidance is located at: https://www.cdc.gov/handwashing/when-how-handwashing.html, and WHO guidance at: https://www.who.int/gpsc/5may/resources/posters/en/.
- 2. Sneezing & Coughing. Cover your mouth and nose when coughing or sneezing with a tissue, then throw the tissue in the trash and wash hands. If no tissue is available, then cough and sneeze into your elbow. Do not come to campus if you have COVID-19 symptoms (see below).
- 3. Personal Items. Be cognizant of the handling of frequently used personal items (e.g., phone, keys, wallet/purse, credit/debit cards, tablets, laptops). As these items are frequently touched, they may be viewed as an extension of your hands. Avoid placing these items on public surfaces which may be contaminated. Clean and disinfect these items frequently.



PROTECTIVE EQUIPMENT

- 1. Masks. Surgical, paper or cloth masks (a.k.a., face coverings) must be worn at all times unless both: a) you are alone in a substantially enclosed personal workspace (office, cubicle), room, or isolated area, and b) no other persons are anticipated to come within six (6) feet. CDC guidance on such masks is located at: https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/diy-cloth-face-coverings.html. Masks, unlike respirators (e.g., N95), are not intended to protect the wearer, but to help protect those around the wearer.
- 2. Additional Protective Equipment. Requirements for any other protective equipment (e.g., gloves, face shields, respirators) will be coordinated through your contact and must be used in accordance with area/operation specific safety practices.



ENVIRONMENTAL CLEANING

- 1. What to Clean. Contact surfaces in personal work areas and shared equipment should be cleaned/disinfected before and after use (e.g., desks, computer keyboard/mouse).
- 2. How to Clean. Environmental cleaning involves first cleaning a surface to remove dirt and debris, and then using an approved disinfectant to inactivate the virus. Disinfectants must be used per the product label, which typically includes a minimum contact time to ensure proper disinfection, as well as precautions for using the product safely (e.g., using gloves). A list of EPA-approved disinfectants for SARS-CoV-2 can be found at: https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2.
- 3. Additional guidance on cleaning/disinfection from the CDC can be found at: https://www.cdc.gov/coronavirus/2019-ncov/community/clean-disinfect/index.html.





Attachment G Visitor Posting

VISITORS

Insert instructions for visitors to the area. Common example: "Please arrange for your contact to meet you and remain distanced six feet from the door in the designated visitor waiting area until they arrive."

Follow the general COVID-19 safety practices for visitors, as well as additional practices developed for this area as communicated by your contact. This includes, but is not limited to:



Medical Screening. Leave the area and remain at home if you are experiencing symptoms related to COVID-19, test positive, or have been exposed to a known or suspected case.



Physical Distancing. Maintain a distance of at least six feet between yourself and others at all times. The greater the distance the better.



Personal Hygiene. Wash hands/use hand sanitizer before and after using the area. Avoid placing personal items on surfaces unless necessary. Cover coughs/sneezes.



Protective Equipment. Wear a face covering/mask which covers the nose and mouth at all times, unless working alone in room or high cubicle where others will not enter.



Environmental Cleaning. Clean and disinfect surfaces in your personal workspace that you will be frequently touching before and after using the area.

Add additional room-specific instructions to the table above as needed





11. Custodial Cleaning Plan

The table below lists typical surfaces identified for routine cleaning/disinfection by custodial staff in response to the COVID-19 pandemic. Post this plan in the front office along with the current custodial cleaning checklist (customized to each site) used to document completion.

Location/Surface	Detail	Frequency
Cleaning/Disinfection Process (unless otherwise specified)	1) Wipe away visible dust. 2) Spray approved disinfectant (H2Orange2 or Critical Care). 3) Keep wet for contact time per label. 4) Clean per label.	As indicated below
Targeted Frequently Touched	Surfaces (specific list developed for each site b	ased on resources)
Doors	Most frequently used at the site. Touch points.	
Handrails (inside & outside)	Most frequently used at the site.	
Shared Office Equipment	Most frequently used at the site. Touch points. (e.g., copiers, printers, computers, phones)	2x @ day* (mid-morning, after lunch)
Staff Lounge	Touch points: doors, switches, faucets, dispensers, tabletops, countertops, appliances	*At sites with assigned
Restrooms	Touch points: doors, light switches, faucets, dispensers, toilets, stalls.	day custodians only
Outdoor Surfaces	Most frequently used touch points.	
Additional Surfaces	Specified as needed per site.	
Office Areas/Suites		
Doors	Touch points (handles, surfaces)	
Light Switches		
Hand Sanitizer Dispensers	Refill as well.	All Surfaces
HVAC Controller		1x @ day
Floors	Vacuum, sweep/mop as time allows.	(evening)
Trash Cans	Empty, replace liner. Disinfect lid if present.	Tanasta d Fasancanth
Shared Equipment	Community, not personal offices. Touch points (e.g., copiers/printers, computers, phones)	<u>Targeted Frequently</u> <u>Touched Surfaces</u>
Tabletops & Countertops	Community, not personal offices.	(see above)
Chairs/Sofas	Community, not personal offices. Disinfect non- porous surfaces.	
Staff Lounge/Work Rooms/Co	nference Rooms	
Doors	Touch points (handles, surfaces)	
Light Switches		
Sink Area	Faucet, sink, counter.	
Dispensers	Soap, towel, other. Refill as well.	
HVAC Controller		All Surfaces
Phones		1x @ day
Tabletops & Countertops		(evening)
Cabinet Handles		Targeted Frequently
Equipment	Touch points: copiers, printers, slicers, etc.	Touched Surfaces
Chairs/Sofas	Disinfect non-porous surfaces.	(see above)
Appliances	Touch points: refrigerator, stove, dishwasher, microwave, vending, etc.	
Floors	Clean only. Vacuum/sweep/mop as time allows.	
Trash Cans	Empty, replace liner. Disinfect lid if present.	





Location/Surface	Detail	Frequency
Restrooms		
Doors	Touch points (handles, surfaces)	
Light Switches		All Curfosso
Sink Area	Faucet, sink, counter.	All Surfaces 1x @ day
Dispensers	Soap, towel, toilet paper, other. Refill as well.	(evening)
Toilets & Urinals		(eveg)
Walls/Partitions	Handles/touch points and soiled spot cleaning.	Targeted Frequently
Handrails	, , , ,	Touched Surfaces
Floors	Sweep, mop with disinfectant.	(see above)
Trash Cans	Empty, replace liner. Disinfect lid if present.	
Hallways/Common Areas		
Doors	Touch points (handles, surfaces)	
Light Switches		All Surfaces
Hand Sanitizer Dispensers	Refill as well.	1x @ day
Handrails		(evening)
Floors	Clean only. Vacuum/sweep/mop as time allows.	Towards of Franciscostly
Trash Cans	Empty, replace liner. Disinfect lid if present.	Targeted Frequently Touched Surfaces
Tabletops & Countertops		(see above)
Chairs/Sofas	Disinfect non-porous surfaces.	(000 000 000)
Large Meeting Rooms (e.g., b	poard room, training rooms)	
Doors	Touch points (handles, surfaces)	
Light Switches]
HVAC Controller		Following each use
Hand Sanitizer Dispensers	Refill as well.	event. *
Handrails		*At aitee with againsed
Floors	Clean only. Vacuum/sweep/mop as time allows.	*At sites with assigned day custodians only,
Trash Cans	Empty, replace liner. Disinfect lid if present.	otherwise in evening.
Tabletops & Countertops		
Chairs/Sofas	Disinfect non-porous surface.]
Outdoor Areas		
Break Area Seating/Tables		All Surfaces 1x @ day (evening)
2.5a.(7.115a 55a.111g) 1 ab105		Targeted Frequently Touched Surfaces (see above)





Custodial Weekly Cleaning Checklist

Use this checklist to document completion of the cleaning plan in the locations listed. Post this checklist in the front office along with the current custodial cleaning plan. On Monday mornings, the site day custodian collects and files the completed checklist for the prior week and posts a new checklist for the current week. Contact the safety representative for questions related to this checklist.

Site:				Week Starting Monday:				
List site name:								
Location/Surface Detail				Completion				
		M	Tu		Th	F	Sa	Su
	Surfaces (clean/disinfect 2x @ mid-n orm only if a day custodian is assigne				nch).			
Doors & Handrails	Specify which ones here (e.g., front office, wing A corridor, etc.).							
Doors & Haridians	Alternatively mark on a site map.							
Shared Office Equipment	Specify per site: (e.g., printers, copy							
Chared Office Equipment	machines, paper cutters, etc.)							
Staff Lounge	Doors, switches, faucets, dispensers,							
3.	tabletops, countertops, appliances.	Ш	Ц	<u> </u>	<u> Ц</u>	<u>Ш</u>		
Restrooms	List each restroom here (e.g., south							
	restroom, entry restroom, etc.)	Ш	Ш		<u> </u>	<u>Ц</u>		
Outdoor Surfaces	Specify surfaces here (e.g., drinking fountains, tables, bench seats, etc.)							
Other? List each as a row	Specify surfaces here.							
Specific Areas (clean/disinfect	1x @ day in evening)							
List each area as a row								
Restrooms (list)								
Hallways/Common Areas (list)								
Office Areas/Suites (list)								
Staff Lounges (list)								
Work Rooms (list)								
Conference Rooms (list)								
Large Meeting Rooms (list)	Following each use event.							
Outdoor Break Areas (list)								
Other? (list)								





12. Transportation and Arrival Procedures

The Carmel Unified School District will provide student transportation between the student's home and school via buses and vans for the outlying areas of the District to include Big Sur, Palo Colorado and Cachagua.

The following general safe work practices will be followed by all Carmel Unified School District Staff, Faculty, Students and Parents during the course of all school transportation activities. All staff, faulty, students and parents should be familiar with these practices prior to the start of the school year. Questions regarding COVID-19 safety should be directed to the Transportation department (transportation@carmelunified.org).

The following procedures apply to transportation by bus, van or personal vehicles, including:

- Morning pick up and afternoon drop off
- Buses or vans used for Athletic activities

I. Physical Distancing

- Student Drop-Off and Pick-Up:
 - Parent/guardian vehicles will arrive at the main entrance and drive to the designated drop off areas. Parents/guardians will not leave the vehicles.
 - School personnel will provide supervision during drop off and pick up to ensure pickup and drop-off is a as brief as possible.
 - Students will maintain physical distancing when exiting their cars.
- o Reduce Need for Physical Interaction:
 - Students will be instructed not to linger or socialize in the drop-off and pick-up areas.
 Physical distancing and assigned seating will be maintained in the buses and vans, to the extent feasible. When feasible, windows will remain open to provide ventilation for the duration of the trips.
 - If parents/guardians are required to sign their children in and out they should bring their own pens, otherwise, shared pens should be collected immediately after single use and replaced with sanitized pens.
 - Arrival and drop-offs should be staggered. A staff member from each class may be designated to escort children in or out and signing them in and out if parents/guardians approve.
 - If possible, individuals at high risk should not be designated to drop off and pick-up students.
- Transportation Area Layout:
 - Bus and van loading/unloading and drop off/pick up areas will be designed to
 maintain physical distancing when possible. (e.g., directing traffic flow patterns,
 maintaining physical distancing in waiting areas and restricting access). This will be
 communicated via signage and supervision by school personnel.





II. Personal Hygiene

- Hand Hygiene:
 - Students and staff should clean their hands often and avoid touching their eyes, nose, and mouth with unwashed hands. Wash hands with soap and water for at least 20 seconds. If soap and water are not readily available, use a hand sanitizer with at least 60% ethyl alcohol. Cover all surfaces of your hands and rub them together until they feel dry. CDC guidance on hand washing is located at: https://www.cdc.gov/handwashing/when-how-handwashing.html.
 - Hand sanitizer will be available in all school transportation vehicles. Students will
 use the hand sanitizer as they enter and exit the buses and vans. Hand sanitizers
 should also be installed near all entry doors and other high traffic areas.
- Sneezing & Coughing: Students and staff should cover the mouth and nose when coughing or sneezing with a tissue, then throw the tissue in the trash and wash hands. If no tissue is available, then cough and sneeze into the elbow. Be aware of COVID-19 symptoms and act appropriately (see Medical Screening section below).
- Personal Items. Students and staff personal items such as water bottles, backpacks/purses, cell phones, etc. should be viewed as an extension of the hands and disinfected frequently.
 Be cognizant of the handling of frequently used personal items as these items are frequently touched. Avoid placing these items on public surfaces that may be contaminated.
- Food and Beverage Consumption. Food and beverage consumption are prohibited in school transportation vehicles.

III. Protective Equipment

- Face Coverings. Pursuant to the California Department of Public Health guidance, face coverings are required for all school transportation drivers and passengers at all times. Students will wear masks as they exit their vehicles.
- Disposable Gloves and other protective equipment. Will be made available to the bus drivers for use during cleaning.

IV. Environmental Cleaning

- Cleaning and Disinfection Protocol. Transportation staff will conduct cleaning and disinfection serval times daily. Disinfection will occur at the end of each day. Additionally, the transportation staff will clean and disinfect the high touch surfaces with EPA certified products between all other bus and/or van runs (including drop off, pick up and the late run). Vans will be disinfected between used by transportation staff.
- Communication. Consideration should also be given to communication with students and parents/guardians regarding cleaning/disinfection expectations prior to and during school transportation.
- What to Clean. Frequently touched surfaces in transportation vehicles (i.e., those touched multiple times or by multiple people) will be cleaned/disinfected regularly. Examples include door handles, seats, window latches and railings. Students should be encouraged to clean/disinfect personal items prior to arriving and departing the school campus each day.





Cleaning Verification. A schedule log for disinfecting the high-traffic areas and commonly
used surfaces will be developed that details the frequency of cleaning/disinfection for each
area. The Transportation Foreman will validate the completion of the schedule log as part of
his weekly departmental inspections.

V. Medical Screening

 Reference the Carmel Unified School District COVID-19 Safety Plan and Appendices for additional specific guidance regarding:

Notification Procedures.

Temperature Screening Self-Checks.

Symptoms Self-Screening

Exposure & Case Response

Attachment A – Transportation Cleaning Protocols





Attachment A Transportation/Vehicle Cleaning Protocol

The following protocol will be followed by all CUSD Bus Drivers during the course of all school transportation activities. All Bus Drivers should be familiar with this protocol prior to the start of the school year. Questions should be directed to the Transportation Foreman (Phone: 831-624-6311 x 2062.

Cleaning/Disinfection Protocol for the Bus Usage

The cleaning/disinfecting supplies and hand sanitizer will be provided in each Bus.

- 1. At the end of each day, the driver must clean and disinfect touched surfaces (for example, the steering wheel, gear shift, door frame/handles, windows, radio/temperature dials, and seat belt buckles).
 - a. The driver must complete the Cleaning Log in each bus.
- 2. Load from the back to the front, and capacity will be limited to the number indicated on Attachment B Bus Seating Capacity.
- 3. All students/adults must use hand sanitizer before and after getting in the bus.
- 4. When returning to the transportation facility, the bus must be parked, and the trashcan must be emptied.
 - a. The driver must put the pre- printed sign on the seat, stating that this bus was used, so the bus drivers or the next person who is using the bus can clean/disinfect the vehicle before using it.
- 5. Report any issue/problem with the bus to the Transportation Foreman.





Attachment B Bus Capacity

Attachment B Bus Capacity

Bus #	Max Cap.	2 Per Seat	Distanced Seating
B-1	80	56	14
B-2	12+2	N/A	2
B-3	10	Out of	Service
B-4	78	54	14
B-5	84	56	14
B-6	84	56	14
B-7	78	52	13
B-8	78	52	13
B-9	84	56	14
B-10	87	58	14
B-11	84	56	14
B-12	80	56	14
B-13	16	N/A	4
B-14	84	56	14
B-15	84	56	14
B-16	84	52	13
B-17	16	N/A	4
B-18	59	35	12
B-19	10	Out of	Service
B-20	22	N/A	4
B-21	16	N/A	4
B-22	12+2	N/A	2





POSTERS





Restroom Posting

RESTROOMS

Follow the general COVID-19 safety practices for all employees and all visitors as well as the following practices specific to restrooms:



Medical Screening. Leave the area and remain at home if you are experiencing symptoms related to COVID-19, test positive, or have been exposed to a known or suspected case.



Physical Distancing. Maintain at least six feet of distance between yourself and others. The greater the distance the better. Minimize the time spent in the area to the shortest time possible. Do not socialize or linger.



Personal Hygiene. Close toilet lids (when present) before flushing. Minimize the surfaces you touch and avoid placing personal items on surfaces. Cover coughs/sneezes and wash your hands before entering and leaving the restroom.



Protective Equipment. Wear a face covering/mask which covers the nose and mouth at all times, unless you are alone and are sure others will not enter (i.e., locked door).



Environmental Cleaning. Restrooms are cleaned/disinfected routinely. Please inform a building/area representative or your supervisor if conditions warrant immediate attention.



Work Room Posting

Name of Conference/Break/Work Room

Conference Break Room Configuration

MAXIMUM OCCUPANCY

SEATING CONFIGURATION



USE INSTRUCTIONS

Follow the general COVID-19 safety practices for all employees and all visitors in addition to specific practices developed for the subject area. This includes, but is not limited to:



Medical Screening. Do not use this area and remain at home if you are experiencing symptoms related to COVID-19, test positive, or have been exposed to a known or suspected case.



Physical Distancing. Maintain a distance of at least six feet between yourself and others at all times. The greater the distance the better.



Personal Hygiene. Wash hands/use hand sanitizer before and after using the area. Avoid placing personal items on surfaces unless necessary. Cover coughs/sneezes.



Protective Equipment. Wear a face covering/mask which covers the nose and mouth whenever others are present or anticipated to be present in the area.



Environmental Cleaning. Clean and disinfect surfaces you will be frequently touching before and after using the area.

Add additional room-specific instructions to the table above as needed



Conference/Break/Work Room Occupancy

Name of Conference/Break/Work Room

MAXIMUM OCCUPANCY



SEATING CONFIGURATION

USE INSTRUCTIONS

Follow the general COVID-19 safety practices for all employees and all visitors in addition to specific practices developed for the subject area. This includes, but is not limited to:



Medical Screening. Do not use this area and remain at home if you are experiencing symptoms related to COVID-19, test positive, or have been exposed to a known or suspected case.



Physical Distancing. Maintain a distance of at least six feet between yourself and others at all times. The greater the distance the better.



Personal Hygiene. Wash hands/use hand sanitizer before and after using the area. Avoid placing personal items on surfaces unless necessary. Cover coughs/sneezes.



Protective Equipment. Wear a face covering/mask which covers the nose and mouth whenever others are present or anticipated to be present in the area.



Environmental Cleaning. Clean and disinfect surfaces you will be frequently touching before and after using the area.

Add additional room-specific instructions to the table above as needed



QUICK REFERENCE GUIDES





Athletic Conditioning - Phase One - Carmel High School

CHS is excited to bring our students back onto campus to begin non sport specific workouts. These workouts will be designed in accordance with all Federal, State and Local County Health Guidance for Youth Sports and will be overseen by The CHS Athletic Department, as well as members of the coaching and training staff, with the following goals:

- Provide our student athletes with an opportunity to begin safely getting in game ready shape for the return of sports. Students have been removed from school-based sports since March, and we want to allow a gradual return to athletic activity.
- 2) Give students a chance to spend time with their friends with appropriate COVID-19 guidelines in place
- 3) Be able to get students familiar with the safety protocols for the return of students to campus

Program Outline

- 1) Very important to make this clear from the start: (per Monterey County Health Dept.) ""Children's Extracurricular Activity Unit" means a Stable Group of 12 (typically 10 children and 1-2 adults) that is formed for the purpose of organized recreation. Each person (adult or child) may be part of only one Children's Extracurricular Activity Unit, but children in the same household may be part of separate, age-appropriate Extracurricular Activity Units. If more than one Children's Extracurricular Activity Unit of children or youth is at one facility, each unit must maintain physical distance from other units and units shall not mix with each other."
- 2) Phase one will launch on November 2nd with groups being formed over the prior week through sign ups
- 3) Phase one will run the first 3 weeks of November, and is open to prospective student athletes of any sport
- 4) As new guidance based on updated State and County data becomes available for school-based sports, we will be prepared to adjust the program as needed following the Thanksgiving Break
- 5) Students interested in signing up can fill out this google form. The deadline for signups is October 28th.
 - a) All activities will be conducted outdoors, with no use or sharing of any equipment
 - b) Students will be placed in cohorts of no more than 10 students.
 - c) Students will be assigned a 45-50-minute workout session 2 times per week
 - d) Students will only be allowed to attend their assigned session with their cohort (no mixing)
 - e) Students will choose either: a field only cohort, or an aquatics only cohort
 - f) All students will check in at the main entrance to the stadium (this includes all field and aquatic cohorts)
 - g) Cohorts will meet on either Monday/Wednesday, or Tuesday/ Thursday after school
 - h) Start times will be staggered to limit the number of students at check in.
 - i) Physical distancing of 6ft or more will be practiced during the entire workout.
 - j) All adults / coaches/volunteers will wear a mask/face covering at all times
 - k) Students must arrive at school no later than 15 minutes prior to their assigned time in order to allow for sufficient time to check in. Check in will begin 30 min before your scheduled workout time
 - I) Sanitation stations will be available for student-athletes to use when entering and exiting the campus.
 - m) Students and Staff will be health screened and temperature checked to be allowed access to the campus.





- Any student who does not pass the health screening or exceeds CDE recommendations for temperature will be asked to return home. (Students will not lose their spot in their cohort, but will be required to meet all clearance protocols to return for workouts)
- o) Develop an internal procedure for contact tracing: names, dates, locations and times for each student/coach.
- 6) Students will be responsible for wearing:
 - a) Masks are required on campus anytime when not conditioning. A mask/face covering can be worn during conditioning if you choose, but is not required
 - b) Proper athletic attire- please arrive dressed and ready to participate.
 - i) Field Cohorts: Athletic Shoes and Clothing no cleats (sweatshirt/jacket recommended)
 - ii) Aquatics Cohorts: There are no indoor or outdoor facilities for changing, please wear your swimsuit to and from the pool and bring warm clothes and a towel to dry off
- 7) Students will be responsible for bringing:
 - a) Personal Water Bottle
 - b) Personal Towel (any size full size recommended for aquatics)
 - c) Personal Bag (if needed)
 - d) Personal Hand Sanitizer(encouraged)
- 8) The Athletic Trainer will be on site for additional health supervision. While no training facilities will be used, basic first aid (ice, wraps) will be available if an injury occurs
- 9) CHS has developed a waiver for parent signatures to recognize that this is voluntary and that the school is not held liable if a student becomes ill.
- 10) CHS will take all appropriate precautions as outlined by the CUSD Safety Guidelines presented in consultation with Forensic Analytical Consulting Services (FACS).
- 11) Parents are not allowed to leave their cars if they are staying on site during the workout period.
- 12) Students must leave the campus when their workout is completed no congregating is allowed
- 13) CHS will make efforts to accommodate family members working out in the same cohort if requested.

Questions or Concerns

- 1) For questions regarding the assignment of cohorts and the program being developed contact Golden Anderson, CHS Athletic Director
- 2) For questions regarding injury management please contact Matt Borek, CHS Athletic Trainer
- 3) For questions regarding safety procedures please contact Jonathan Lyons, Principal





in accordance with California Dept. of Public Health Guidelines FACE COVERINGS ARE MANDATORY ON ALL CUSD CAMPUSES

<u>HAND WASHING</u> - Staff and students should wash/sanitize their hands upon entering and leaving the classroom, before leaving the restroom, before and after eating or preparing food, and any other time you feel is necessary.

The CDC states that washing your hands frequently can prevent the spread of infection.

CLEANING - How to Properly Use Disinfectant Sprays

Frequently touched surfaces in classrooms with children present need to be cleaned and disinfected several times a day by the teacher or staff using the room, especially between cohorts and in between students if more than one student is using a surface, such as a desk, chair or table.

- Put on gloves.
- 2. Remove any existing debris from the surfaces such as crumbs, food, etc. by wiping with a damp paper towel.
- 3. Spray disinfectant Instructions:
 - a. **H2Orange2** disinfectant Spray on surface, let sit for **10 minutes**
 - b. Critical Care disinfectant Spray on surface, let sit for 3 minutes
- 4. Wipe with a clean paper towel and dispose of the paper towel in the garbage.
- 5. Remove your gloves by following the CDC guidelines below.
 - ➤ <u>H2Orange2</u> disinfectant should be your "go-to" disinfectant and be used the majority of the time. Can be used on other surfaces such as play equipment following steps above and with the 10 min dwell time.
 - > Critical Care disinfectant should only be used when cleaning tables and chairs mid-day for <u>cohort rotation</u> due to the shorter dwell time (3 minutes).

Custodians clean and disinfect all CUSD classrooms every evening that have had students in them.

GLOVES - Removing and Disposing of Gloves Properly

- Do not touch your eyes, nose, and mouth when removing your gloves, wash hands immediately after.
 - 1. Grasp the outside of one glove at the wrist. Do not touch your bare skin.
 - 2. Peel the glove away from your body, pulling it inside out.
 - 3. Hold the glove you just removed in the palm of your gloved hand.
 - 4. Peel off the second glove by putting your fingers inside the glove at the top of your wrist.
 - 5. Turn the second glove inside out while pulling it away from your body, leaving the first glove inside the second.
 - 6. Dispose of the gloves in the garbage can.
 - 7. Wash hands thoroughly.

MASKS - Putting on and Removing Masks Properly

- Do not touch your eyes, nose, and mouth when removing your mask, wash hands immediately after.
 - 1. Handle mask by only touching the ear loops or ties.
 - 2. Stretch the ear loops and remove from ears or untie the ties.
 - 3. Fold the outside corners of the mask together (inside out) so the side that was touching your face is on the outside
 - 4. Place the mask in a plastic container or paper bag until it can be laundered, or if it is disposable, place it in the garbage can, and obtain a new disposable mask. Additional masks are available from the school office
 - 5. Wash hands thoroughly.

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COVID-19 Safe Practices Rev 10/7/2020

COVID-19 Classroom Setting Scenarios

Scenario 1	Actions	Communications
A student/staff member responds "yes" to one of the health screening questions has a temperature of 100.4 or above, and/or exhibits symptoms of COVID-19.	 Student/staff sent home May not return until symptom free without the aid of medication for 72 hours Staff: report to Immediate Supervisor/Principal & site health aide or LVN. (District Nurse if no health aid or LVN at your site) The cohort remains OPEN. 	No action needed.
Scenario 2	Actions	Communications
A family member or someone in close contact with a student or staff member tested positive for COVID-19. Close contact defined as being within 6 feet for 15 minutes or more.	 Student/staff sent home Staff: report to Immediate Supervisor/Principal & site health aide or LVN. (District Nurse if no health aid or LVN at your site) Self-quarantine for 14 calendar days since the date of last exposure. Exposed staff/parents of student should contact their healthcare provider for additional guidance. The cohort remains OPEN. 	No action needed.
Scenario 3	Actions	Communications
Student/staff tests positive for COVID-19.	Staff report information to: Immediate Supervisor/Principal Supervisor/Principal reports information to: Site health aide or LVN COVID Safety Coordinator-Tom Parry COVID Safety Coordinator reports information to: District Nurse Human Resources Director Director of MOT Human Resources Director reports information to: Superintendent Monterey County Health Department. Positive individual self-isolates for at least 10 days from onset of symptoms or date of specimen collection.	To: Student families and staff Phone call and Template letter: Confirmed COVID-19 in classroom Template Letter: Follow-up Confirmed COVID-19 in Classroom





Scenario 3 Continued	 Families of student/staff member quarantine for 14 calendar days from last contact with an infectious person. The cohort is CLOSED for 14 days from last exposure or as determined by Monterey County Health Department. Schools must close if 5% of staff and/or students have tested positive within a 14-day period, and districts must close if one-quarter of the schools in the district have closed within 14 days due to Covid-19 cases 	
Scenario 4	Actions	Communications
Student/staff tests negative for COVID-19 after any of the reasons in scenarios 1, 2, or 3.	 Student/staff may return to the classroom 72 hours after symptoms resolve or per their medical provider's direction. Must continue self-quarantine for 14 days if in close contact with a person diagnosed with COVID-19. The cohort remains OPEN. 	No action needed.
Scenario 5	Actions	Communications
	710dollo	Sommanications
Student/staff travel (International)	 Follow current CDC guidance for returning international travelers (currently <u>14 day</u> self-quarantine). The cohort remains OPEN. 	No action needed.
	Follow current CDC guidance for returning international travelers (currently 14 day self-quarantine).	

Reference: Monterey County Health Department and Centers for Disease Control and Prevention



Frequently Asked COVID-19 Questions

What constitutes a suspicious case? ANSWER

COVID-19 affects different people in different ways. Infected people have had a wide range of symptoms reported – from mild symptoms to severe illness. Symptoms may appear 2-14 days after exposure to the virus. People who answer YES to one of these symptoms may have COVID-19:

- Fever 100.4 or higher or chills
- Cough
- Shortness of breath or difficulty breathing
- Fatigue
- Muscle or body aches
- Headache
- New loss of taste or smell
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea

2. When can the student/staff return to school/work after having answered YES to one of the symptoms above?

ANSWER

→ COVID-19 Suspicious - No known exposure to COVID-19
Student/staff must stay home and cannot return to school/work until they have been symptom free without medication for 72 hours.

Encourage them to contact their healthcare provider.

→ COVID-19 Confirmed - Confirmed exposure to COVID-19

Student/staff must be quarantined for 14 days.

- Student/staff must be isolated immediately after symptoms are known until they are picked up or are able to leave the site.
- Complete COVID-19 Inspection Form (CUSD COVID-19 Safety Plan)
- Custodians clean affected rooms/areas using CDC recommended cleaning and disinfections protocols

3. When are people informed of an exposure? <u>ANSWER</u>

- If the school/district is informed that a student/staff was exposed to COVID-19 outside of school/work, we do not inform others. They must quarantine for 14 days.
- If student/staff are <u>confirmed</u> to have COVID-19 and have been at school/work student families and staff will be informed of the possible exposure.





4. Who has to wear a mask? ANSWER

- Everyone over the age of 2 is required to wear a mask that covers the mouth and nose.
- Face shields alone are not adequate protection but can be worn in addition to a mask as an extra layer of protection.

5. What happens if a student refuses to wear a mask?

ANSWER

School staff should work with the student and his/her parent to find a mask and way for the student to wear that mask while at school. If, however, a student continues to be defiant in not wearing a mask, they will be required to be picked up by their parent and not allowed onto campus until they agree to wear a mask.

6. What will the Classroom configurations be like for COVID-19 safety? ANSWER

- Students and teachers will remain with the same small cohort they are assigned to throughout the school day; in the classroom, on the playground and while eating lunch.
- Students will be seated 6 feet apart in the classroom, with assigned seating.
- Students will be assigned their own seat where no one else sits until the area has been sanitized. If switching cohorts, all student chairs and tables will be sanitized thoroughly between cohorts.

7. According to the CDC, fresh air can help reduce aerosol transmission of COVID-19, what is the plan for improving air flow in the classrooms? ANSWER

To maximize air flow, as many doors and windows will need to stay open as possible to create cross ventilation even if the heater or AC is on. If the outside weather prevents this from happening, the teacher should try to find a way to keep at least some windows open. Reference: Monterey County Health Department and Centers for Disease Control and Prevention Updated 11-6-20





School Office Staff - COVID-19 Protocol - STUDENTS

1. HAS SYMPTOM - NO EXPOSURE TO COVID-19

IF A STUDENT:

✓ HAS A SYMPTOM ON THE LIST BELOW

✓ NO KNOWN OR SUSPECTED EXPOSURE TO COVID

If a student has any of the symptoms on the COVID checklist below but has no known or suspected exposure to COVID-19. Follow steps a, b and c below

<u> </u>
☐ Fever 100.4 or higher or chills
☐ Cough
☐ Shortness of breath or difficulty breathing
☐ Fatigue
☐ Muscle or body aches
☐ Headache
□ New loss of taste or smell
□ Sore throat
□ Congestion or runny nose
□ Nausea or vomiting
□ Diarrhea

- a. Inform the parent that the student will need to be off campus until symptom-free for 72 hours, without medication, unless cleared by a physician in writing.
- b. Report the student's name and symptoms to the site administrator and the Health Aide/LVN. The Health aide, LVN will follow up with the family as needed.
 - *If your site does not have a Health Aide or an LVN please report these students to the district nurse.
- c. If the student is on campus, they need to go home as soon as possible, and the student needs to be isolated until he/she is picked up.

2. KNOWN OR SUSPECTED EXPOSURE TO COVID-19

IF A STUDENT:

YES HAS HAD A KNOWN OR SUSPECTED EXPOSURE TO COVID

If a student reports to have had a known or suspected exposure to COVID-19 Follow steps a and b below

- a. Report to your site administrator, to Tom Parry (COVID Safety Coordinator) and to Debbie Taylor (District Nurse). They will follow up with the family and determine when the student may return.
- b. The student must go home and quarantine for 14 days. If they are on campus, they must be isolated until they are picked up.

If a student or parent reports to you that the student has tested <u>POSITIVE</u> for COVID-19, Inform the site administrator, Tom Parry and Debbie Taylor immediately.

Updated 11-23-20





School Office Staff - COVID-19 PROTOCOL

1. HAS SYMPTOM - NO EXPOSURE TO COVID-19

IF A STAFF MEMBER:

- **✓** HAS A SYMPTOM ON THE LIST BELOW
- **✓ NO KNOWN OR SUSPECTED EXPOSURE TO COVID**

If a staff member has any of the symptoms on the COVID checklist below but has no known or suspected exposure to COVID-19. Follow steps a and b below

Fever 100.4 or higher or chills
Cough
Shortness of breath or difficulty breathing
Fatigue
Muscle or body aches
Headache
New loss of taste or smell
Sore throat
Congestion or runny nose
Nausea or vomiting
Diarrhea

- a. Report the staff member's first and last name to the Supervisor/Principal and to the appropriate HR staff member, Kristin Quilty for Certificated and unrepresented personnel, and Geri Simmons for Classified personnel. They will follow up with the employee and determine when they may return.
- b. If the staff member is on campus, they need to go home as soon as possible. They must isolate until they leave or are picked-up.

2. KNOWN OR SUSPECTED EXPOSURE TO COVID-19

IF A STAFF MEMBER

✓ YES HAS HAD A KNOWN OR SUSPECTED EXPOSURE TO COVID

If a staff member reports to have had a known or suspected exposure to COVID-19 Follow steps a, b, c and d below

- a. Report to your site administrator, to Tom Parry (COVID Safety Coordinator) and to Human Resources as follows:
 - Kristin Quilty for Certificated and unrepresented personnel Geri Simmons for Classified personnel
- b. They will follow up with the employee and determine when they may return.
- c. The staff member must go home and quarantine for 14 days since the date of last exposure. If they are on campus, they must isolate until they leave or are picked up.
- d. Exposed staff should contact their healthcare provider for additional guidance.

If a staff member reports to you that they have tested <u>POSITIVE</u> for COVID-19, Inform the site administrator, Tom Parry, and Craig Chavez, immediately.

Revised 11-23-20





APPENDICES





Appendix B: Contacts & Resources

COVID-19 Safety Coordinator

Name	Department/Title	Phone	Email
Tom Parry	CV High School/Principal	831-624-4462	tparry@carmelunified.org

Core COVID-19 Safety Team

Name	Department/Title	Phone	Email
Craig Chavez	Human Resc./Chief HR Officer	624-1546 ext. 2015	chavez@carmelunified.org
Dan Paul	Facilities &Transpt/Director	624-1546 ext. 2060	dpaul@carmelunified.org
Yvonne Perez	Business/Chief Bus. Official	624-1546 ext. 2051	yperez@carmelunified.org
Deborah Taylor	Health/Registered Nurse	624-1546 ext. 2014	dtaylor@carmelunified.org

Notes: Team Meetings—Weekly: Fridays 1:00 pm – 2:00 pm (Initially), then once a month

COVID-19 Safety Team

Name	Department/Title	Phone	Email
Trisha Dellis	Superintendent	624-1546 ext. 2021	tdellis@carmelunified.org
Steve Gonzalez	Special Ed/Director	624-1546 ext. 2010	sgonzalez@carmelunified.org
Bob Gruber	Maintenance/Supervisor	624-1546 ext. 2063	bgruber@carmelunified.org
Mary Jennings	Nutrition Services/Director	624-4515 ext. 2070	mjennings@carmelunified.org
Jon Lyons	High School/Principal	624-1921 ext. 2793	jlyons@carmelunified.org
Jay Marden	River Elementary/Principal	624-4609 ext. 2291	jmarden@carmelunified.org
Dan Morgan	Middle School/Principal	624-2785 ext. 2691	dmorgan@carmelunified.org
Ryan Peterson	Tular Elementary/Principal	620-8195 ext. 2391	rpeterson@carmelunified.org
William Banes	Act Rep (Cooper)	624-2452 ext. 22	wbanes@carmelunified.org
Matt Borek	ACT Rep (CHS)	624-1821 ext. 3766	mborek@caremelunified.org
Liz Chilton	ACT Rep (CMS)	624-2785 ext. 3687	lchilton@carmelunified.org
Yessenia Ruggiero	ACT Rep (River)	624-4609 ext. 3203	yruggiero@carmelunified.org
Cathy Truesdell (SPED)	Speech Path/Spec Ed. Rep	624-4609 ext. 3220	ctruesdell@carmelunified.org
Lisa Brazil	CSEA Rep (CHS)	624-1821 ext. 2792	lbrazil@carmelunified.org
Tina Gerow	CSEA Rep (CVHS)	635-4462 ext. 2891	tgerow@carmelunified.org

Notes: Team Meetings—Weekly: Tuesday 3:00 pm – 4:00 pm (Initially), then once a month





Internal Team Resources				
Safety Practices Location	CUSD COVID-19 Safety Plan			
	Forensic Analytical Consulting Services (<u>www.forensicanalytical.com</u>)			
Environmental Health Consultant	Malek Alaouie			
Consultant	o. 510-266-4661 🚨 d. 510-566-3189 🖨 malek.alaouie@forensicanalytical.com			

Local Public Health Department Contacts		
Monterey County	Website: https://www.co.monterey.ca.us/government/departments-a-h/health	

Key Guidance & References			
CDC (Centers for Disease Control)	Main: https://www.cdc.gov/coronavirus/2019-ncov/index.html Industry Guidance: <a "="" covid19.ca.gov="" href="https://www.cdc.gov/coronavirus/2019-ncov/community/guidance-business-response.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fspecific-groups%2Fguidance-business-response.html</th></tr><tr><th>California</th><th>Main: https://covid19.ca.gov/ Industry Guidance: https://covid19.ca.gov/industry-guidance/ Cal/OSHA: https://www.dir.ca.gov/dosh/coronavirus/Health-Care-General-Industry.html		
Back to Work Safely	https://www.backtoworksafely.org/		





Appendix C: Building Closure Checklist

Building:		
Completed by:	Date:	

Bef	ore Closure	Done
1.	Remove garbage, food, and other perishable materials prior to closure.	
2.	Develop a plan for maintaining water systems during closure.	
3.	Develop a plan for managing HVAC systems during closure.	
Dur	ing Closure	Done
1.	Routinely inspect for water intrusion events, which can result in water damage or mold growth if left unaddressed (e.g., roof leaks, plumbing leaks, surface flooding).	
2.	Continue pest control measures on a modified schedule. Reduced maintenance activities can allow for infestation of pests or accumulation of pest allergens, dander, and droppings.	
3.	Consider ways to prevent water stagnation, including flushing fixtures routinely, to avoid issues with water quality including microbial growth of organisms, leaching of metals, and buildup of sediment. Address potable water system components as well as specialized water systems (e.g., fountains, cooling towers, misters, etc.).	
4.	Ensure drain traps remain filled.	
5.	Periodically run HVAC system to ventilate the building and reduce buildup of indoor air and surface contaminants such as dust, particulates,	
Bef	ore Reopening	Done
1.	Ensure that water damage or standing water is not present. Address any mold/moisture issues before re-occupancy.	
2.	Ensure that garbage, food, and other perishable materials are removed as appropriate.	
3.	Inspect for pests and rodents. Reduced maintenance activities can allow for infestation of pests or accumulation of pest allergens, dander, and droppings.	
4.	Ensure no objectionable odors are present. Investigate and address as needed (e.g., dry drain-traps, garbage, pests, water intrusion, unattended plants, spoiled food).	
5.	Evaluate spaces for COVID-19 safety concerns and implementing related modifications (e.g., postings, traffic routing, barriers, etc.). Consider the need for cleaning/disinfection,	





	either based on actual risk or as a precaution to address occupant concerns about contamination.	
6.	Flush water fixtures prior to re-occupancy to remove stagnant water, using respiratory protection if stagnant for an extended period. Address potential issues associated with specialized water systems (e.g., fountains, cooling towers, misters, etc.). Consider further assessment if conditions of concern present.	
7.	Ensure HVAC systems are in good condition. Inspect air handling units (filters, coils, pans, outdoor air intakes, etc.).	
8.	Ensure adequate ventilation to occupied areas. Lack of ventilation and circulation of fresh air during low occupancy can result in the buildup of indoor air and surface contaminants such as dust, particulates, and volatile organic compounds.	





Appendix D: Critical Supply List

Item	Quantity
Isolation Gowns	300
Face Shields – No drape	1,000
Face Shields w/drape	50
White cloth masks	7,160
Adult Disposable masks	25,600
Youth disposable masks	2,000
Gloves – small (boxes of 100)	200
Gloves – medium (boxes of 100)	200
Gloves – Large (boxes of 100)	145
Gloves – extra-large (boxes of 100)	120
8 oz hand sanitizer	176
16.9 oz hand sanitizer	1,520
Floor decals	100
Infrared Thermometers	100
Custom cloth masks	4,000
Spray bottles	100
Towels	100
KN95 masks	600
Portables handwashing stations	15
Disinfectant wipes	180





Appendix E: Inventory of Safe Practices

Safe practices files are located at www.carmelunified.org

Global & Common Environment Safe Practices

Category	Safe Practice Title	Revised
Global	General Practices for All Employees	10/08/20
Global	General Practices for Visitors	10/08/20
Global (Form)	Case Response Form	10/08/20
Global (Form)	Cleaning/Disinfection Log	10/08/20
Global (Form)	Hazard Analysis Form	10/08/20
Global (Form)	Inspection Form	10/08/20
Global (Form)	Work Area Diagram	10/08/20
Public General	Buildings—Safe Practices Guide	10/08/20
Public General	Classrooms—Safe Practices Guide	10/08/20
Public General	Restrooms Posting	10/08/20
Public General	Work Room Posting	10/08/20
Public Special	Public Special Area—Safe Practices Guide	10/08/20
Staff General	Offices—Safe Practices Guide	10/08/20
Staff General	Restrooms Posting	10/08/20
Staff General	Work Room Posting	10/08/20
Staff Personal	Personal Work Areas	10/08/20
Staff Special	Staff Special Area—Safe Practices Guide	

Specific Work Area/Operation Safe Practices

Category	Area/Operation	Safe Practice Title	Revised
Public Special	Special Education Classroom	Special Ed Classroom- Safe Practices Guide	10/8/20
Staff Special	Custodial Cleaning		
Staff Special	Itinerant Staff		
Public Special	Drop-off/Pick-up		





Appendix F Training Resources

COVID-19 Safety Training Resources

ID#	Session Title & Audience	Duration	How to Access & Other Notes	Updated
1.	COVID-19 Basic Safety Practices (All Employees)	Practices (All Employees) As fielded Screening, physical distancing, personal hygiene, protective equipment, environmental cleaning). Focus on client specific safety plan & procedures. Email to all staff with information on procedures.		12/7/2020
2.	COVID-19 Safety Plan (All Employees)			12/7/2020
3.	COVID-19 Safety for Supervisors	As needed	Responsibilities, including developing area specific practices with guide documents and case response.	127/2020
	Coronavirus Awareness	9 min	HR sends email invite	
	Coronavirus: Cleaning and Disinfecting the Workplace	10 min	HR sends email invite	





Appendix G: Site Walk-Through Inspection Form

	Date: Inspector:		Page of _		f
Loc	ation:		•		
Q#	Question		Yes	No	n/a
1.	Are COVID-19 sa	afety practices applicable to the area posted or otherwise available?			
2.	Are each of the li	isted safety practices being followed?			
3.	Have employees	completed required COVID-19 safety training?			
4.		ns been made to eliminate person-to-person contact and support ng (e.g., virtual technology, traffic flow indicators, seating removal)?			
5.	Are people maint	taining at least six feet of physical distance, or using a physical barrier?			
6.	Are people pract	icing proper personal hygiene (e.g., frequent hand washing)?			
7.	Are people using	a cloth face covering or equivalent outside of personal workspaces?			
8.	Are high-touch s	urfaces being routinely disinfected? Note frequency below.			
9.		ce instructing visitors on safe practices to follow, including not entering eriencing symptoms?			
10	Is an adequate s	supply of disinfectant and hand sanitizer available to support cleaning of			

Q#	Notes (Comment on deficiencies/improvements. Reference question number above.)	Action Needed?	Action Done?

work surfaces and proper personal hygiene?

10.





Q#	Notes (Comment on deficiencies/improvements. Reference question number above.)	Action Needed	Action Done



Appendix H: Case Response Form

Note: These practices are current as of the revision date. Since the COVID-19 pandemic is evolving rapidly, extra diligence should be used in watching for updates to these practices.

Instructions:

The purpose of this form is to provide direction and documentation regarding the response actions to take to help mitigate potential risk of COVID-19 transmission upon learning of a known or suspected COVID-19 case potentially impacting facilities, employees, or other stakeholders. Supervisors are responsible for completing the "Incident Information" and "Immediate Response" section of this form and working with the COVID-19 Safety Coordinator who is responsible for completing the additional sections of this form.

Key Definitions:

- Known or suspected case. For purposes of this plan, a known or suspected case is someone who has COVID-19 symptoms or who has tested positive for COVID-19, unless otherwise determined by a medical professional. A negative test does not necessarily mean that a person does not have COVID-19. Further information on case identification can be found at: https://wwwn.cdc.gov/nndss/conditions/coronavirus-disease-2019-covid-19/case-definition/2020/.
- Exposure. An exposure is generally considered to occur when someone is within six feet of a known or suspected case for ≥ 15 minutes, starting 48 hours prior to when the case first had symptoms or took a positive test (whichever is earlier) without the benefit of proper personal protective equipment. Exposure may also occur within a shorter duration depending on the nature of interaction (e.g., being coughed/sneezed upon, physical contact, long periods in a small space). Cloth face coverings (a.k.a., "masks") are not considered to prevent exposure within six feet, however respirators (e.g., N95) may be. CDC guidance on evaluating exposure can be found at: https://www.cdc.gov/coronavirus/2019-ncov/php/contact-tracing/contact-tracing-plan/appendix.html#contact.

• Clinical Criteria

 At least two of the following symptoms: fever (measured or subjective), chills, rigors, myalgia, headache, sore throat, new olfactory and taste disorder(s)

OR

 At least one of the following symptoms: cough, shortness of breath, or difficulty breathing

OR

- Severe respiratory illness with at least one of the following:
 - Clinical or radiographic evidence of pneumonia, OR
 - Acute respiratory distress syndrome (ARDS).

AND

No alternative more likely diagnosis



• Laboratory Criteria

 Laboratory evidence using a method approved or authorized by the U.S. Food and Drug Administration (FDA) or designated authority:

Confirmatory laboratory evidence:

 Detection of severe acute respiratory syndrome coronavirus 2 ribonucleic acid (SARS-CoV-2 RNA) in a clinical specimen using a molecular amplification detection test

Presumptive laboratory evidence:

- o Detection of specific antigen in a clinical specimen
- Detection of specific antibody in serum, plasma, or whole blood indicative of a new or recent infection*
- *Serologic methods for diagnosis are currently being defined.

Supervisors: Complete the Incident Information section below and use the form in Attachment A to record any additional information or detail.

Incident Infor	mation				
Area/Operation:					
Supervisor:				Report	
Сироппост				Date:	
Subject Person:					Employee? □
oubject i erson.					Visitor? □
Phone/Email:					
Is the person repo	orting	☐ Yes	If "yes", list date of ex		
exposure to a cas	se?	□ No	ii yes , list date of ex		
Are the person re	reporting		If yes, list symptom onset date		
symptoms or a positive test?		□ No	test collected (whichever is		
		Date	the person was last in the subj	ect area:	
		(If >	-14 days ago, no further action is r	equired).	



Supervisors: Complete the Immediate Response section below and use the form in Attachment A to record any additional information or detail.

lmı	mediate Response	Done
	e: Immediate response actions are interim until a more detailed assessment is performed. If ertainties arise, actions should err on the side of being more protective of people's health.	
1.	Notify. Inform the COVID-19 Safety Coordinator of the incident. Do not share the identity of the person involved with any other parties except Human Resources.	
2.	Address the subject person. Have the subject person go home or stay home. Tell them to follow guidance from the CDC on what to do (https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/quarantine-isolation.html). If they are an employee, tell them that they will be contacted by https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/quarantine-isolation.html). If they are an employee, tell them that they will be contacted by https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/quarantine-isolation.html). If they are an employee, tell them that they will be contacted by https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/quarantine-isolation.html). If they are an employee, tell them that they will be contacted by https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/quarantine-isolation.html). If they are an employee, tell them that they will be contacted by https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/quarantine-isolation.html). If they are an employee, tell them that they will be contacted by are still in the area, isolate them from others until they leave. Be aware that the case may need assistance in arranging transport home or to a healthcare provider.	
3.	Address other potentially exposed people.	
	 a. If the subject person is only reporting an exposure, then no action is needed. b. If the subject person is a known or suspected case, send home people with potential exposure to the person. Tell them to follow guidance from the CDC on what to do (https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/quarantine-isolation.html). If they are an employee, tell them that they will be contacted by Human Resources with further information. Record the names of persons sent home in Attachment B. 	
4.	Address areas with prolonged exposure (closure).	
	 a. If the subject person is only reporting an exposure, then no action is needed. b. If the subject person has not been in the area for >7 days, then no action is needed. c. If the subject person is a known or suspected case and they have been in the area within the last 7 days, then shut-down areas where they spent a prolonged period (e.g., ≥15 minutes) or had substantial interactions with the area. The time period in question begins starting from two days before the case first showed symptoms, or two days from date a positive test was collected, whichever is earlier. If it has been less than 24 hours since they were in an indoor area, then open exterior doors/windows as feasible and stay out until at least 24 hours have passed. Inventory the closed areas using the cleaning/disinfection log in Attachment C. 	
5.	Address areas without prolonged exposure (cleaning).	
	 a. If the subject person is only reporting an exposure, then no action is needed. b. If the subject person has not been in the area for >7 days, then no action is needed. c. If the subject person is a known or suspected case and they have been in the area within the last 7 days, ensure frequently contacted surfaces throughout remaining open areas have been cleaned/disinfected since the person was last there, along with any additional surfaces the case is believed to have touched outside of closed areas. Inventory the surfaces cleaned using the cleaning/disinfection log in Attachment C. 	
6.	Additional assessment. Work with the COVID-19 Safety Coordinator to complete a more detailed assessment of the incident.	



COVID-19 Safety Coordinator: Complete the incident assessment section below corresponding to the type of incident and use Attachment A to record any additional information or detail.

Inc	eident Assessment: Exposed Person	Done
1.	Review the "Incident Information" and "Immediate Response" sections of this form and confirm that have been properly addressed.	
2.	Confirm that Human Resources has followed up with the subject person if an employee.	
3.	Inspect the work area/operation to ensure that proper COVID-19 safe practices are being followed using the COVID-19 Safety Plan "Inspection Form".	
4.	Evaluate the level of concern among employees regarding the incident and consider further communications as appropriate (e.g., update letters, town hall call).	
5.	Follow-up with subject person to see if they develop symptoms or a positive test. If so, initiate a new case response form. If not, they can return 14 days after their last exposure. Document return using the form in Attachment B.	
6.	Update general notes in Attachment A as appropriate, attach additional documents, sign below, and retain this form and attachments for recordkeeping purposes.	

Inc	ident Assessment: Known/Suspected Case (>7 days since in the are	ea)
1.	Review the "Incident Information" section of this form and confirm accuracy.	
2.	Confirm that Human Resources has followed up with the subject person if an employee.	
3.	Contact the local county health department to report the incident and response plan. Modify the response plan based on direction from the county.	
4.	Review "Immediate Response" item #3 (exposed persons) and conduct an assessment (inhouse or by third party consultant) to ensure proper identification of potentially exposed people. Update the list in Attachment B.	
5.	Take further actions as needed regarding potentially exposed people. This may involve sending more employees home or telling some they can come back, as well as communicating exposure to non-employees as appropriate (e.g., direct notification, contacting employers, postings).	
6.	Confirm that Human Resources has followed up with potentially exposed employees.	
7.	Inspect the work area/operation to ensure that proper COVID-19 safe practices are being followed using the COVID-19 Safety Plan "Inspection Form".	



8.	Evaluate the level of concern among employees regarding the incident and consider further communications as appropriate (e.g., update letters, town hall call).	
9.	Follow-up with the subject person to determine when they can return according to CDC guidance (https://www.cdc.gov/coronavirus/2019-ncov/hcp/disposition-in-home-patients.html). In general, known or suspect cases with a positive test but no symptoms can return after at least 10 days have passed since their first positive test. In general, known or suspect cases with symptoms can return after all of the following are met a) at least 10 days since symptom onset, b) at least 1 day without fever, and c) improvement of respiratory symptoms. Test-based strategies may also be used, and some exceptions may apply depending on circumstances (see guidance). Additional guidance may be given by medical professionals. Document their return using the form in Attachment B.	
10.	Follow-up with employees sent home due to potential exposure to see if they develop symptoms or a positive test. If so, initiate a new case response form. If not, they can return 14 days after their last exposure. Document return using the form in Attachment B.	
11.	Update general notes in Attachment A as appropriate, attach additional documents, sign below, and retain this form and attachments for recordkeeping purposes.	
	·	
Inc	ident Assessment: Known/Suspected Case (≤7 days since in the a	area)
	Review the "Incident Information" section of this form and confirm accuracy.	area)
1.		Γ
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house or by third party consultant) to ensure that the appropriate surfaces have been



	cleaned/disinfected. Ensure immediate cleaning/disinfection of additional surfaces and update Attachment C as appropriate.	
9.	Develop a cleaning/disinfection scope for impacted/closed areas using Attachment C and arrange for the cleaning/disinfection by appropriate in-house or outside resources.	
10.	Monitor cleaning/disinfection (in-house or by third party consultant) to document that the proper scope is completed following proper methods (e.g., registered products, application method, contact time).	
11.	Inspect the work area/operation to ensure that proper COVID-19 safe practices are being followed using the COVID-19 Safety Plan "Inspection Form".	
12.	Evaluate the level of concern among employees regarding the incident and consider further communications as appropriate (e.g., update letters, town hall call).	
13.	Follow-up with the subject person to determine when they can return according to CDC guidance (https://www.cdc.gov/coronavirus/2019-ncov/hcp/disposition-in-home-patients.html). In general, known or suspect cases with a positive test but no symptoms can return after at least 10 days have passed since their first positive test. In general, known or suspect cases with symptoms can return after all of the following are met: a) at least 10 days since symptom onset, b) at least 1 day without fever, and c) improvement of respiratory symptoms. Test-based strategies may also be used, and some exceptions may apply depending on circumstances (see guidance). Additional guidance may be given by medical professionals. Document their return using the form in Attachment B.	
14.	Follow-up with employees sent home due to potential exposure to see if they develop symptoms or a positive test. If so, initiate a new case response form. If not, they can return 14 days after their last exposure. Document return using the form in Attachment B.	
15.	Update general notes in Attachment A as appropriate, attach additional documents, sign below, and retain this form and attachments for recordkeeping purposes.	
COV	TID-19 Safety Coordinator: Sign below to confirm completion of the protocol in this form. The Signature Date	
	Editor	



Attachment A: Case ResponseGeneral Notes										
Area/Opera	ation:							Report	Date:	
Date	Note	s/Event								



Attachment B: Case ResponsePersons Potentially Exposed								
Area	/Operation:		Report Da	te:				
ID#	Last Date of Exposure	Person (last/first). List role/entity if not an employee.	EE?	Date Cleared for Return				



Attachment C: Case Response—Cleaning/Disinfection Log									
Area/	Oper	Operation:							
Done	ID#	Area/Surface Infection Risk ¹ Cleaning/Disinfection Protoco					duct/party)		
Notes	s <i>:</i>	<u>I</u>			1				
1Info	1Infection Risk: Degree of infection risk presented by the surface based on degree of impact and frequency of contact (High, Med, Low or 1,2,3,4)								

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COVID-19 Appendices

Appendix I Respirator Program