

# COVID-19 Prevention Program (CPP) for Central California Faculty Medical Group (CCFMG)

This CPP is designed to control exposures to the SARS-CoV-2 virus that may occur in our workplace.

**Date: December 10, 2020**

## Authority and Responsibility

**COVID-19 Taskforce Team** has overall authority and responsibility for implementing the provisions of this CPP in our workplace. In addition, all managers and supervisors are responsible for implementing and maintaining the CPP in their assigned work areas and for ensuring employees receive answers to questions about the program in a language they understand.

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

## Identification and Evaluation of COVID-19 Hazards

We will implement the following in our workplace:

- Conduct workplace-specific evaluations using the **Appendix A: Identification of COVID-19 Hazards** form.
- Evaluate employees' potential workplace exposures to all persons at, or who may enter, our workplace.
- Review applicable orders and general and industry-specific guidance from the State of California, Cal/OSHA, and the local health department related to COVID-19 hazards and prevention.
- Evaluate existing COVID-19 prevention controls in our workplace and the need for different or additional controls.
- Conduct periodic inspections using the **Appendix B: COVID-19 Inspections** form as needed to identify unhealthy conditions, work practices, and work procedures related to COVID-19 and to ensure compliance with our COVID-19 policies and procedures.

## Employee participation

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

- **Employees are given the COVID-19 Hotline number of (559) 478-2463 and the COVID-19 email address of [covid-19@ccfmq.org](mailto:covid-19@ccfmq.org) for questions or concerns**
- **Employees are given the email address for the COVID-19 website**
- **Employees are reminded daily to report their symptoms**
- **Employees are trained and encouraged to report all concerns to their direct supervisor**

## Employee screening

We screen our employees by asking each employee to complete a daily electronic screening questionnaire in accordance with the Fresno County Department of Public Health and California Public Health Department,

This questionnaire is advised to be taken prior to entering a CCFMG location.

## Correction of COVID-19 Hazards

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

follows:

Supervisors will be trained and required to evaluate their worksite/location utilizing Appendix B.

The severity of the hazard will be assessed and correction time frames assigned accordingly.

Administrators and/or directors of the sites will review and confirm Appendix B was completed and measure(s) taken to correct hazards.

## **Control of COVID-19 Hazards**

### **Physical Distancing**

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

- Eliminating the need for workers to be in the workplace – e.g., telework or other remote work arrangements
- Reducing the number of persons in an area at one time, including visitors
- Staggered arrival, departure, work, and break times
- Redesigned workstations to allow for greater distance between employees

Individuals will be kept as far apart as possible when there are situations where six feet of physical distancing cannot be achieved.

### **Face Coverings**

We provide clean, undamaged face coverings and ensure they are properly worn by employees over the nose and mouth when indoors, and when outdoors and less than six feet away from another person, including non-employees, and where required by orders from the California Department of Public Health (CDPH) or the local health department. Every employee is provided with a reusable face mask, and additional reusable masks are provided as needed. Disposable masks are also available for employees, patients, or visitors as needed. Face shields and/or goggles are provided upon request and are required during patient encounters.

The following are exceptions to the use of face coverings in our workplace:

- When an employee is alone in a room unless when required by emergency order
- While eating and drinking at the workplace, provided employees are at least six feet apart and if indoors, outside air supply to the area has been maximized to the extent possible
- Employees wearing respiratory protection in accordance with CCR Title 8 section 5144 or other safety orders
- Employees needing accommodations due to a disability will contact the Human Resources department

### **Engineering controls**

We implement the following measures for situations where we cannot maintain at least six feet between individuals:

We maximize, to the extent feasible, the quantity of outside air for our buildings with mechanical or natural ventilation systems by:

- Working with each property management on increasing air filtration efficiency
- Evaluate the need for physical barriers when social distancing in the office is unavailable

### **Cleaning and disinfecting**

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

- Ensuring adequate supplies and adequate time for it to be done properly
- Informing the employees of the frequency and scope of cleaning and disinfection
- Instructing cleaning vendor to disinfect high touch areas

Should we have a COVID-19 case in our workplace, we will implement the following procedures:

- Utilizing janitorial service to conduct a deep cleaning.

### **Shared tools, equipment, and personal protective equipment (PPE)**

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

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

### **Hand sanitizing**

In order to implement effective hand sanitizing procedures, we:

- Evaluate handwashing facilities
- Encourage and allowing time for employee handwashing
- Provide employees with an effective hand sanitizer, and prohibit hand sanitizers that contain methanol (i.e. methyl alcohol)
- Encourage employees to wash their hands with warm water for at least 20 seconds each time

### **Personal protective equipment (PPE) used to control employees' exposure to COVID-19**

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

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

We provide and ensure use of eye protection and respiratory protection in accordance with section 5144 when employees are exposed to procedures that may aerosolize potentially infectious material such as saliva or respiratory tract fluids.

## **Investigating and Responding to COVID-19 Cases**

This will be accomplished by using the **Appendix C: Investigating COVID-19 Cases** form.

Employees who had potential COVID-19 exposure in our workplace will be:

- Offered COVID-19 testing during their working hours. If out of pocket expenses are incurred, employee will be reimbursed
- Clinical Quality Manager will provide employees with testing sites in the area. Testing sites are listed on the COVID-19 website for all employees to access
- Human Resource will contact employees to review benefits available including paid time off and Workers' Compensation benefits

## **System for Communicating**

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

- Employees failing the daily screen must contact their supervisor and the COVID-19 hotline. In addition, providers will report symptoms to Employee Health Services through Community Medical Centers (CMC).
- That employees can report symptoms and hazards without fear of reprisal
- We have procedures or policies for accommodating employees with medical or other conditions that put them at increased risk of severe COVID-19 illness. Employees should contact Human Resources for accommodations.

- Clinical Quality Manager will provide employees with testing sites in the area. Testing sites are listed on the COVID-19 website for all employees to access
- In the event we need to provide testing to an employee due to a workplace exposure or outbreak, we will communicate the plan for providing testing and inform affected employees of the reason for the testing and the possible consequences of a positive test.
- Information about COVID-19 hazards that employees (including other employers and individuals in contact with our workplace) may be exposed to, what is being done to control those hazards, and our COVID-19 policies and procedures
- Updated information is made available on an ongoing basis for both employees and visitors/patients on the COVID-19 webpages located on the CCFMG website.
- Signage made available in high traffic areas to employees regarding COVID-19 exposure prevention.

## Training and Instruction

We will provide effective training and instruction that includes:

- Our COVID-19 policies and procedures to protect employees from COVID-19 hazards
- Information regarding COVID-19-related benefits to which the employee may be entitled under applicable federal, state, or local laws
- The fact that:
  - COVID-19 is an infectious disease that can be spread through the air
  - COVID-19 may be transmitted when a person touches a contaminated object and then touches their eyes, nose, or mouth
  - An infectious person may have no symptoms
- Methods of physical distancing of at least six feet and the importance of combining physical distancing with the wearing of face coverings
- The fact that particles containing the virus can travel more than six feet, especially indoors, so physical distancing must be combined with other controls, including face coverings and hand hygiene, to be effective
- The importance of frequent hand washing with soap and warm water for at least 20 seconds and using hand sanitizer when employees do not have immediate access to a sink or hand washing facility, and that hand sanitizer does not work if the hands are soiled
- Proper use of face coverings and the fact that face coverings are not respiratory protective equipment—face coverings are intended to primarily protect other individuals from the wearer of the face covering
- COVID-19 symptoms, and the importance of obtaining a COVID-19 test and not coming to work if the employee has COVID-19 symptoms or has had a high risk exposure to COVID-19

**Appendix D: COVID-19 Training Roster** will be used to document this training.

## Exclusion of COVID-19 Cases

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

- Ensuring that COVID-19 cases are excluded from the workplace until our return-to-work requirements are met
- Excluding employees with COVID-19 exposure from the workplace for 14 days after the last known COVID-19 exposure to a COVID-19 case
- Continuing and maintaining an employee's earnings, seniority, and all other employee rights and benefits whenever we've demonstrated that the COVID-19 exposure is work related. This will be accomplished by providing employees with information on employer-provided employee sick leave benefits, payments from public sources, or other means of maintaining earnings, rights and benefits, where permitted by law and when not covered by workers' compensation.

## Reporting, Recordkeeping, and Access

It is our policy to:

- Report information about COVID-19 cases at our workplace to the local health department whenever required by law, and provide any related information requested by the local health department.
- Report immediately to Cal/OSHA any COVID-19-related serious illnesses or death, as defined under CCR Title 8 section 330(h), of an employee occurring in our place of employment or in connection with any employment.
- Maintain records of the steps taken to implement our written COVID-19 Prevention Program in accordance with CCR Title 8 section 3203(b).
- Make our written COVID-19 Prevention Program available at the workplace to employees, authorized employee representatives, and to representatives of Cal/OSHA immediately upon request.
- Use the **Appendix C: Investigating COVID-19 Cases** form to keep a record of and track all COVID-19 cases. The information will be made available to employees, authorized employee representatives, or as otherwise required by law, with personal identifying information removed.
- Coordinate with Employee Health Services through CMC and UCSF Fresno.
- Report total COVID-19 numbers weekly on the COVID-19 employee and provider website.

## Return-to-Work Criteria

- COVID-19 cases with COVID-19 symptoms will not return to work until all the following have occurred:
    - At least 24 hours have passed since a fever of 100.4 or higher has resolved without the use of fever-reducing medications
    - COVID-19 symptoms have improved
    - At least 10 days have passed since COVID-19 symptoms first appeared
  - COVID-19 cases who tested positive but never developed COVID-19 symptoms will not return to work until a minimum of 10 days have passed since the date of specimen collection of their first positive COVID-19 test.
  - A negative COVID-19 test will not be required for an employee to return to work.
  - If an order to isolate or quarantine an employee is issued by a local or state health official, the employee will not return to work until the period of isolation or quarantine is completed or the order is lifted. If no period was specified, then the period will be 10 days from the time the order to isolate was effective, or 14 days from the time the order to quarantine was effective.
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**Joyce Fields-Keene, MPA, CMPE**  
Chief Executive Officer

**12/18/20**

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**Date**



## Appendix B: COVID-19 Inspections

Date:

Name of person conducting the inspection:

Work location evaluated:

Exposure Controls	Status	Person to Correct	Date Corrected
<b>Engineering</b>			
Barriers/partitions			
Ventilation (amount of fresh air and filtration maximized)			
Additional room air filtration			
Review of employee breakroom and maximum employees allowed			
Locking front door to limit entry of non-employees			
Location of timeclock and employees congregating			
<b>Administrative</b>			
Physical distancing			
Frequent cleaning of high touch areas including timeclock			
Frequent cleaning of office equipment used by multiple persons, i.e. pens, phones, copiers, keyboards, clipboards			
Surface cleaning and disinfection (frequently enough and adequate supplies)			
Hand washing facilities (adequate numbers and supplies)			
Disinfecting and hand sanitizing solutions being used according to manufacturer instructions			
Offer remote work for qualified employees			
Evaluate need for plastic barriers			
<b>PPE</b> (not shared, available and being worn)			
Face coverings provided to employees and patients			
Gloves			
Face shields/goggles			
Respiratory protection			
Gowns			

## Appendix C: Investigating COVID-19 Cases

All personal identifying information of COVID-19 cases or symptoms will be kept confidential. All COVID-19 testing or related medical services provided by us will be provided in a manner that ensures the confidentiality of employees, with the exception of unredacted information on COVID-19 cases that will be provided immediately upon request to the local health department, CDPH, Cal/OSHA, the National Institute for Occupational Safety and Health (NIOSH), or as otherwise required by law.

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

**Clinical Quality Manager conducts investigation, and maintains and communicates information as indicated. Questions covered are:**

<b>Employee (or non-employee*) name:</b>		<b>Occupation (if non-employee, why they were in the workplace):</b>	
<b>Location where employee worked (or non-employee was present in the workplace):</b>		<b>Date investigation was initiated:</b>	
<b>Was COVID-19 test offered?</b>		<b>Name(s) of staff involved in the investigation:</b>	
<b>Date and time the COVID-19 case was last present in the workplace:</b>		<b>Date of the positive or negative test and/or diagnosis:</b>	
<b>Date the case first had one or more COVID-19 symptoms:</b>		<b>Information received regarding COVID-19 test results and onset of symptoms (attach documentation):</b>	



**Results of the evaluation of the COVID-19 case and all locations at the workplace that may have been visited by the COVID-19 case during the high-risk exposure period, and who may have been exposed (attach additional information):**

<b>Notice given (within one business day, in a way that does not reveal any personal identifying information of the COVID-19 case) of the potential COVID-19 exposure to:</b>			
<b>All employees who may have had COVID-19 exposure</b>	<b>Date:</b>		
	<b>Names of employees that were notified:</b>		
<b>Independent contractors and other employers present at the workplace during the high-risk exposure period.</b>	<b>Date:</b>		
	<b>Names of individuals that were notified:</b>		
<b>What were the workplace conditions that could have contributed to the risk of COVID-19 exposure?</b>		<b>What could be done to reduce exposure to COVID-19?</b>	
<b>Was local health department notified?</b>		<b>Date:</b>	

\*Should an employer be made aware of a non-employee infection source COVID-19 status.

## Appendix D: Sample COVID-19 Training Roster

Date:

Person that conducted the training:

Employee Name	Signature

## **Multiple COVID-19 Infections and COVID-19 Outbreaks**

**Outbreaks are defined as: workplace is identified by a local health department as the location of a COVID-19 outbreak, or there are three or more COVID-19 cases in your workplace within a 14-day period. Reference section 3205.1 for details.**

This section of CPP will stay in effect until there are no new COVID-19 cases detected in our workplace for a 14-day period.

### **COVID-19 testing**

- We will provide COVID-19 testing to all employees in our exposed workplace except for employees who were not present during the period of an outbreak identified by a local health department or the relevant 14-day period. COVID-19 testing will be provided at no cost to employees during employees' working hours.
- COVID-19 testing consists of the following:
  - All employees in our exposed workplace will be immediately tested and then tested again one week later. Negative COVID-19 test results of employees with COVID-19 exposure will not impact the duration of any quarantine period required by, or orders issued by, the local health department.
  - After the first two COVID-19 tests, we will continue to provide COVID-19 testing of employees who remain at the workplace at least once per week, or more frequently if recommended by the local health department, until there are no new COVID-19 cases detected in our workplace for a 14-day period.
  - We will provide additional testing when deemed necessary by Cal/OSHA.

### **Exclusion of COVID-19 cases**

We will ensure COVID-19 cases and employees who had COVID-19 exposure are excluded from the workplace in accordance with our CPP Exclusion of COVID-19 Cases and Return to Work Criteria requirements, and local health officer orders if applicable.

### **Investigation of workplace COVID-19 illness**

We will immediately investigate and determine possible workplace-related factors that contributed to the COVID-19 outbreak in accordance with our CPP Investigating and Responding to COVID-19 Cases.

### **COVID-19 investigation, review, and hazard correction**

In addition to our CPP, Identification and Evaluation of COVID-19 Hazards, and Correction of COVID-19 Hazards, we will immediately perform a review of potentially relevant COVID-19 policies, procedures, and controls, and implement changes as needed to prevent further spread of COVID-19.

The investigation and review will be documented and include:

- Investigation of new or unabated COVID-19 hazards including:
  - Our leave policies and practices and whether employees are discouraged from remaining home when sick
  - Our COVID-19 testing policies
  - Insufficient outdoor air
  - Insufficient air filtration
  - Lack of physical distancing
- Updating the review:
  - Every thirty days that the outbreak continues
  - In response to new information or to new or previously unrecognized COVID-19 hazards
  - When otherwise necessary
- Implementing changes to reduce the transmission of COVID-19 based on the investigation and

review. We will consider:

- Moving indoor tasks outdoors or having them performed remotely
- Increasing outdoor air supply when work is done indoors
- Improving air filtration
- Increasing physical distancing as much as possible
- Respiratory protection

### **Notifications to the local health department**

Immediately, but no longer than 48 hours after learning of three or more COVID-19 cases in our workplace, we will contact the local health department for guidance on preventing the further spread of COVID-19 within the workplace.

We will provide to the local health department the total number of COVID-19 cases and for each COVID-19 case, the name, contact information, occupation, workplace location, business address, the hospitalization and/or fatality status, and North American Industry Classification System code of the workplace of the COVID-19 case, and any other information requested by the local health department. We will continue to give notice to the local health department of any subsequent COVID-19 cases at our workplace.

## **Major COVID-19 Outbreaks**

**Major Outbreak is defined as: your workplace experienced 20 or more COVID-19 cases within a 30-day period. Reference section 3205.2 for details.**

This section of CPP will stay in effect until there are no new COVID-19 cases detected in our workplace for a 14-day period.

### **COVID-19 testing**

We will provide twice a week COVID-19 testing, or more frequently if recommended by the local health department, to all employees present at our exposed workplace during the relevant 30-day period(s) and who remain at the workplace. COVID-19 testing will be provided at no cost to employees during employees' working hours.

### **Exclusion of COVID-19 cases**

We will ensure COVID-19 cases and employees with COVID-19 exposure are excluded from the workplace in accordance with our CPP Exclusion of COVID-19 Cases and Return to Work Criteria, and any relevant local health department orders.

### **Investigation of workplace COVID-19 illnesses**

We will comply with the requirements of our CPP Investigating and Responding to COVID-19 Cases.

### **COVID-19 hazard correction**

In addition to the requirements of our CPP Correction of COVID-19 Hazards, we will take the following actions:

- In buildings or structures with mechanical ventilation, we will filter recirculated air with Minimum Efficiency Reporting Value (MERV) 13 or higher efficiency filters if compatible with the ventilation system. If MERV-13 or higher filters are not compatible with the ventilation system, we will use filters with the highest compatible filtering efficiency. We will also evaluate whether portable or mounted High Efficiency Particulate Air (HEPA) filtration units, or other air cleaning systems would reduce the risk of transmission and implement their use to the degree feasible.
- We will determine the need for a respiratory protection program or changes to an existing respiratory protection program under CCR Title 8 section 5144 to address COVID-19 hazards.
- We will evaluate whether to halt some or all operations at our workplace until COVID-19 hazards have been corrected
- Implement any other control measures deemed necessary by Cal/OSHA.

### **Notifications to the local health department**

We will comply with the requirements of our **Multiple COVID-19 Infections and COVID-19 Outbreaks-Notifications to the Local Health Department.**