

COVID-19 Prevention Program (CPP) for Newport-Mesa Unified School District (NMUSD)

This CPP is designed to control exposures to the SARS-CoV-2 virus (COVID-19) that may occur in our workplace.

Date: July 13, 2021

Authority and Responsibility

Jonathan Wilby, Director of Risk Management, has overall authority and responsibility for implementing the provisions of this CPP in our workplace. In addition, all principals, directors, 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.

System for Communicating

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

- Who employees should report COVID-19 symptoms and possible hazards to, and how.
- That employees can report symptoms, possible close contacts, and hazards without fear of reprisal.
- How employees with medical or other conditions that put them at increased risk of severe COVID-19 illness can request accommodations.
- Access to COVID-19 testing when testing is required.
- The COVID-19 hazards 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.

Identification and Evaluation of COVID-19 Hazards

We implement the following in our workplace:

- Conduct a comprehensive risk assessment to identify workplace specific COVID-19 hazards.
- Document the vaccination status of our employees using our COVID-19 Attestation System, which is maintained as a confidential medical record.
- Evaluate employees' potential workplace exposures to all persons at, or who may enter, our workplace.
- Develop COVID-19 policies and procedures to respond effectively and immediately to individuals at the workplace who are a COVID-19 case to prevent or reduce the risk of transmission in the workplace.
- Review applicable orders and general and industry-specific guidance from the State of California, Cal/OSHA, California Department of Public Health (CDPH), Centers for Disease Control and Prevention (CDC), and other public health authorities.
- Evaluate existing COVID-19 prevention controls in our workplace and the need for different or additional controls.
- Conduct periodic inspections using the COVID-19 Inspection Form (See Appendix B) as needed to identify and evaluate unhealthy conditions, work practices, and work procedures related to COVID-19

and to ensure compliance with our COVID-19 policies and procedures.

Employee Participation

Employees and their authorized employees' representatives are encouraged to participate in the identification and evaluation of COVID-19 hazards by:

- Notifying their supervisor or the Director of Risk Management of any potential COVID-19 hazards.
- Immediately reporting Heating, Ventilation, and Air Conditioning (HVAC) system issues to Maintenance & Operations.
- Participating in the Occupational Health & Safety (OHS) Committee where the on-going identification, evaluation and control of COVID-19 hazards will be addressed.

Employees are encouraged to report their COVID-19 symptoms, possible COVID-19 exposures, and possible COVID-19 hazards at the workplace without fear of reprisal.

Employee Wellness Screening

To promote a safe environment for students and staff, passive COVID-19 wellness screenings will occur. All employees are expected to conduct a passive screening at home prior to coming to work. Employees with any new symptoms or a fever of 100.4 F or higher are to stay home. New symptoms include:

- Cough
- Shortness of breath; difficulty breathing
- Sore throat
- Muscle pain
- Headache
- Nausea/vomiting
- Diarrhea
- Fatigue
- Congestion/runny nose
- Chills/shaking with chills
- New loss of taste or smell

Correction of COVID-19 Hazards

The Director of Risk Management conducts regular random inspections of all NMUSD work locations/ activities to identify unsafe or unhealthy work conditions, practices or procedures. The Appendix B: COVID-19 Inspection Form is used to document inspections, and that identified deficiencies are corrected in a timely manner based on the severity of the hazards, as follows:

- Low – corrective and preventive actions taken within two (2) weeks.
- Medium – corrective and preventive actions taken within one (1) week.
- High – corrective or preventive actions taken immediately if possible or within three (3) working days. Consideration must be given to discontinuing the activity or implementing other temporary safety precautions until the corrective and preventive action is implemented.

Individuals responsible for the implementation of the corrective and preventive actions are identified and

correction timeframes are assigned accordingly. Completion of corrective and preventive actions are monitored by the Director of Risk Management.

Control of COVID-19 Hazards

Face Coverings

We provide clean, undamaged face coverings and ensure they are properly worn by employees that are not fully vaccinated when they are indoors or in vehicles, and where required by orders from the CDPH.

An industry-specific CDPH order applicable to NMUSD is that face coverings are required by all persons, including but not limited to staff, visitors and students, when indoors in K-12 schools.

Employees required to wear face coverings in our workplace may remove them under the following conditions:

- When an employee is alone in a room or vehicle.
- While eating and drinking at the workplace, provided employees are at least six feet apart and outside air supply to the area, if indoors, has been maximized to the extent feasible.
- Employees wearing respiratory protection in accordance with section 5144 or other safety orders.
- Employees who cannot wear face coverings due to a medical or mental health condition or disability, or who are hearing-impaired or communicating with a hearing-impaired person. Such employees will wear an effective, non-restrictive alternative, such as a face shield with a drape on the bottom, if their condition permits it.
- Specific tasks that cannot feasibly be performed with a face covering. This exception is limited to the time in which such tasks are being performed.

Any employee not wearing a required face covering or allowed non-restrictive alternative, will be at least six feet apart from all other persons unless the unmasked employee is fully vaccinated or tested at least weekly for COVID-19.

We will not prevent any employee from wearing a face covering when it is not required unless it would create a safety hazard, such as interfering with the safe operation of equipment.

Face coverings will also be provided to any employee that requests one, regardless of their vaccination status.

See the following risk bulletins for additional information:

- Guidance for the Use of Face Coverings (Appendix C)
- Proper Washing of Reusable Face Coverings (Appendix D)
- Extended Use and Reuse of N95 and KN95 Respirators (Appendix E)
- Face Shield Use and Cleaning (Appendix F)
- Disposable Masks and Gowns (Appendix G)

Engineering Controls

We implement the following measures to decrease the risk of COVID-19 spread in our facilities:

- Plexiglas partitions installed in areas where frequent interaction between employees and the public take place (front counters and lobbies).

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

- Running ventilation systems two hours before and after occupancy and continuously during occupied periods to increase air exchanges.
- Actively monitoring CO₂ levels to verify ventilation levels remain sufficient for occupancy.
- Making the necessary adjustments to maintain the optimum level of CO₂ through dilution ventilation.
- Increasing the minimum filter standard from MERV 8 to MERV 11 which is the highest possible filtration rating that is safe for the majority of HVAC systems at school sites without reducing airflow, ventilation or decreasing equipment reliability.

High-Efficiency Particulate Air (HEPA) purifiers are provided in each classroom and available for other areas within NMUSD facilities as an additional layer of protection.

See Appendix J: Alen BreatheSmart 75i High-Efficiency Particulate Air (HEPA) Purifier Risk Bulletin and the [Maintenance and Operations Safety Protocols for the Reopening of Schools during the COVID-19 Pandemic](#) for more information.

Cleaning and Disinfecting

We implement the following cleaning and disinfection measures for frequently touched surfaces and objects such as doorknobs, elevator buttons, equipment, tools, handrails, handles, controls, phones, headsets, bathroom surfaces, and steering wheels:

- Follow CDC and CDPH guidance for daily routine cleaning of classrooms.
- Follow CDC and CDPH guidance for disinfecting areas following a COVID-19 case or outbreak.
- Hire and support additional custodial staff to properly clean and disinfect school facilities.
- Provide training and equipment for proper cleaning and disinfection.
- Increase frequency of restroom cleaning throughout the day.
- Maintain daily cleaning log in each classroom and restroom.
- Flush all HVAC and plumbing systems prior to occupancy after prolonged shutdowns.

In the event of a confirmed case where a person in a NMUSD facility tests positive for COVID-19, it is necessary to have a cleaning and disinfecting protocol before the room can be re-occupied:

- Follow CDC guidance for cleaning and disinfecting rooms with a suspected COVID-19 positive person.
- Lock the room down for 24 hours if possible upon notification from NMUSD Health Services Department.
- Maintenance & Operations will develop a site-specific cleaning and disinfecting plan for each occurrence.
- NMUSD has contracted with a third party consultant to train and certify certain custodians to respond to emergencies.
- Trained, certified staff or contractors will clean and disinfect the room(s).
- Visual inspection during and after cleaning by trained staff.
- If the room has been closed for 7 days or longer, additional disinfection is not required and the room will be cleaned and disinfected as part of routine activities.

Hand Sanitizing

In order to implement effective hand sanitizing procedures, we:

- Evaluated handwashing facilities in each facility and provided additional hand washing stations where necessary.
- Encourage good hygiene, including washing hands for at least 20 seconds each time, and provide employees the time necessary to frequently wash their hands.
- Encourage coughing and sneezing etiquette.
- Provide employees with an effective hand sanitizer, and prohibit the use of hand sanitizers that contain methanol.

See Appendix H: Stop Germs! Wash Your Hands Risk Bulletin and Appendix I: Coughing and Sneezing Etiquette Risk Bulletin for more information.

Personal Protective Equipment (PPE) used to Control Employees' Exposure to COVID-19

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

Upon request, we provide respirators for voluntary use to all employees who are not fully vaccinated and who are working indoors or in vehicles with more than one person. Requests should be made through your administrative assistant who will maintain a supply of N95s by using the [COVID PPE Ordering Link](#) on the Purchasing Department website.

We provide and ensure use of respirators in compliance with section 5144 when deemed necessary by Cal/OSHA.

We also provide and ensure use of eye protection and respiratory protection when employees are exposed to procedures that may aerosolize potentially infectious material such as saliva or respiratory tract fluids. This includes aerosol generating procedures conducted by our nurses and health assistants.

See the following risk bulletins for more information:

- Guidance for the Use of Face Coverings (Appendix C)
- Proper Washing of Reusable Face Coverings (Appendix D)
- Extended Use and Reuse of N95 and KN95 Respirators (Appendix E)
- Face Shield Use and Cleaning (Appendix F)
- Disposable Masks and Gowns (Appendix G)

Testing of Symptomatic Employees

We make COVID-19 testing available at no cost to employees with COVID-19 symptoms who are not fully vaccinated, during employees' paid time. Contact NMUSD COVID-19 Intake by telephone at 714-424-3695 or by email at intake@nmusd.us.

Investigating and Responding to COVID-19 Cases

The employee COVID-19 reporting protocol for positive cases, close contacts or symptoms was developed to promote a healthy and safe school community and provide support and guidance for employees of NMUSD. It's important for our employees to understand the critical nature of informing the District should they test positive for COVID-19, have a close contact with a COVID-19 positive case, or have COVID-19 symptoms. It's equally, if not more important, that the employee stays out of the workplace and makes this notification from home. All employee information gathered in the process described below will be confidential:

1. Employee is to contact the COVID-19 Intake by telephone at 714-424-3695 or by email at intake@nmusd.us when they are:

- a. COVID-19 positive
- b. Close contact to a COVID-19 positive person
- c. Symptomatic with COVID-19 symptoms

The employee name, telephone number, position, site, last day at work and a brief description of their situation should be provided.

2. Intake Team will contact the employee if additional information is needed and will communicate the gathered information to the Health Services COVID-19 Liaison.
3. Health Services COVID-19 Liaison will conduct contact tracing to identify and notify employees and/or students who may have had close contact with the employee and give guidance on current recommendations for quarantine and options for leaves. Leave information can also be found at the [COVID-19 Related Leave Information Website](#).
 - a. Close contacts are defined as being within six feet of a COVID-19 case for a cumulative total of 15 minutes or greater in any 24-hour period within or overlapping with the “high-risk exposure period” of the employee.

The Health Services COVID-19 Liaison will collaborate/consult with the Orange County Health Care Agency (OCHCA) during this process and will notify Maintenance and Operations of any cleaning/disinfecting needs.

Review Appendix A: Employee COVID-19 Reporting Protocol for Positive Cases or Close Contacts Risk Bulletin for more information.

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 and how to participate in the identification and evaluation of COVID-19 hazards.
- Information regarding COVID-19-related benefits (including mandated sick and vaccination leave) 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.
- The fact that particles containing the virus can travel more than six feet, especially indoors, so physical distancing, face coverings, increased ventilation indoors, and respiratory protection decrease the spread of COVID-19 and are most effective when used in combination.
- The right of employees who are not fully vaccinated to request a respirator for voluntary use, without fear of retaliation, and our policies for providing the respirators. Employees voluntarily using respirators will be trained according to section 5144(c)(2) requirements:
 - How to properly wear them.
 - How to perform a seal check according to the manufacturer’s instructions each time a respirator is worn, and the fact that facial hair can interfere with a seal.
- The importance of frequent hand washing with soap and 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.

Since COVID-19 is an airborne disease, N95s and more protective respirators protect the users from airborne disease, while face coverings primarily protect people around the user.

- COVID-19 symptoms, and the importance of obtaining a COVID-19 test and not coming to work if the employee has COVID-19 symptoms.
- Information on our COVID-19 policies and how to access COVID-19 testing and vaccination, and the fact that vaccination is effective at preventing COVID-19, protecting against both transmission and serious illness or death.

Training methods include utilization of the Keenan SafeSchools COVID-19 safety modules, site-specific safety plan (SSSP) training, memos on various topics, and risk bulletins.

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, with the following exceptions:
 - Employees who were fully vaccinated before the close contact and who do not develop COVID-19 symptoms.
 - COVID-19 cases who returned to work per our return-to-work criteria and have remained free of COVID-19 symptoms, for 90 days after the initial onset of COVID-19 symptoms, or for COVID-19 cases who never developed COVID-19 symptoms, for 90 days after the first positive test.
- For employees excluded from work, continuing, and maintaining employees' earnings, wages, seniority, and all other employees' rights and benefits.
- Providing employees at the time of exclusion with information on available benefits including information found on our [COVID-19 Related Leave Information Website](#)

Reporting, Recordkeeping, and Access

It is our policy to:

- Report information about COVID-19 cases and outbreaks at our workplace to the OCHCA whenever required by law, and provide them with any related information they request.
- Maintain records of the steps taken to implement our written CPP in accordance with section 3203(b).
- Make our written CPP available at the workplace to employees, authorized employee representatives, and to representatives of Cal/OSHA immediately upon request.

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; and
 - 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 once the

requirements for “cases with symptoms” or “cases who tested positive but never developed symptoms” (above) have been met.

- Persons who had a close contact may return to work as follows:
 - Close contact but never developed symptoms: when 10 days have passed since the last known close contact.
 - Close contact with symptoms: when the “cases with symptoms” criteria (above) have been met, unless the following are true:
 - The person tested negative for COVID-19 using a polymerase chain reaction (PCR) COVID-19 test with specimen taken after the onset of symptoms; and
 - At least 10 days have passed since the last known close contact; and
 - The person has been symptoms-free for at least 24 hours, without using fever-reducing medications.
- 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.

See the Appendix A: Employee COVID-19 Reporting Protocol for Positive Cases or Close Contacts Risk Bulletin for additional information.

Multiple COVID-19 Infections and COVID-19 Outbreaks

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

COVID-19 testing

We provide COVID-19 testing at no cost to all employees, during paid time, in our exposed group except for:

- Employees who were not present during the relevant 14-day period.
- Employees who were fully vaccinated before the multiple infections or outbreak and who do not have symptoms.
- COVID-19 cases who did not develop symptoms after returning to work pursuant to our return-to-work criteria, no testing is required for 90 days after the initial onset of symptoms or, for COVID-19 cases who never developed symptoms, 90 days after the first positive test.

COVID-19 testing consists of the following:

- All employees in our exposed group are immediately tested and then again one week later. Negative COVID-19 test results of employees with COVID-19 exposure will not impact the duration of any quarantine, isolation, or exclusion period required by, or orders issued by, the local health department.
- After the first two COVID-19 tests, we continue to provide COVID-19 testing once a week of employees in the exposed group who remain at the workplace, or more frequently if recommended by the CDPH, until there are no new COVID-19 cases detected in our workplace for a 14-day period.
- We provide additional testing when deemed necessary by Cal/OSHA.

We continue to comply with the applicable elements of our CPP, as well as the following:

- Employees in the exposed group wear face covering when indoors, or when outdoors and less than six feet apart (unless one of the face-covering exceptions indicated in our CPP apply).

- We give notice to employees in the exposed group of their right to request a respirator for voluntary use if they are not fully vaccinated.
- We evaluate whether to implement physical distancing of at least six feet between persons, or where six feet of physical distancing is not feasible, the need for use of cleanable solid partitions of sufficient size to reduce COVID-19 transmission.

Investigation of Workplace COVID-19 Illness

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 is documented and includes:

- 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 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 feasible.
 - Requiring respiratory protection in compliance with section 5144.

Major COVID-19 Outbreaks

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.

We continue to comply with the multiple COVID-19 infections and COVID-19 outbreaks section of the CPP, except that the COVID-19 testing, regardless of vaccination status, is made available to all employees in the exposed group twice a week, or more frequently if recommended by the CDPH.

In addition to complying with our CPP and multiple COVID-19 infections and COVID-19 outbreaks section, we also:

- Provide employees in the exposed group with respirators for voluntary use in compliance with section 5144(c)(2) and determine the need for a respiratory protection program or changes to an existing respiratory protection program under section 5144 to address COVID-19 hazards.
- Separate by six feet (except where we can demonstrate that six feet of separation is not feasible and there is momentary exposure while persons are in movement) any employees in the exposed group who are not wearing respirators required by us and used in compliance with section 5144. When it is

not feasible to maintain a distance of at least six feet, individuals are as far apart as feasible.

- Install cleanable solid partitions that effectively reduce transmission between the employee and other persons at workstations where an employee in the exposed group is assigned to work for an extended period and where the physical distancing requirement (described above) is not always maintained.
- Evaluate whether to halt some or all operations at the workplace until COVID-19 hazards have been corrected.
- Implement any other control measures deemed necessary by Cal/OSHA.



Russell Lee-Sung, Superintendent

July 13, 2021



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Employee COVID-19 Reporting Protocol: Positive Case, Close Contact, or Symptoms

Background

This protocol was developed to promote a healthy and safe school community and provide support and guidance for employees of NMUSD. It's important for employees to understand the critical nature of informing the District should an they test positive for COVID-19, have a close contact with a COVID-19 positive case, or have COVID-19 symptoms. ***It's equally, if not more important, that the employee stay out of the workplace and make this notification from home.***

The intent of this protocol is to have a shared understanding of the process, respect the confidential nature of the process, and provide guidance for any necessary action. Employees are expected to follow the protocol outlined below. The District will continue to update this protocol and follow guidance provided by public health authorities.

Key Considerations

All employee information gathered in this process will be confidential.

Step 1: Employee is to contact COVID-19 Intake by telephone at 714-424-3695 or by email at intake@nmusd.us when they are:

1. COVID-19 positive
2. Close contact to a COVID-19 positive
3. Symptomatic with COVID-19 symptoms

Please include your name, phone number, position, site, last day at work and a brief description of your situation. For example: COVID-19 positive, close contact with someone COVID-19 positive, or symptomatic.

Step 2: Intake Team will contact the employee accordingly if additional information is needed and communicate the gathered information to the Health Services COVID-19 Liaison.



Step 3: Health Services COVID-19 Liaison will contact trace to identify and notify employees and/or students who may have had close contact and give guidance on current recommendations for quarantine and options for leaves.

Close contacts, defined as being within 6 feet of a COVID-19 case for a cumulative total of 15 minutes or greater in any 24-hour period within or overlapping with the “high-risk exposure period, will be asked to stay home, quarantine and monitor for symptoms.

Health Services COVID-19 Liaison will collaborate/consult with the Orange County Health Care Agency during this process and will notify Maintenance and Operations of any cleaning/disinfecting needs.

Step 4: Return to Work Criteria for COVID-19 positive employees and close contacts are as follows:

COVID-19 Cases with COVID-19 Symptoms:

- At least 24 hours have passed since a fever of 100.4 F or higher has resolved without the use of fever-reducing medications;
- COVID-19 symptoms have improved; and
- At least 10 days have passed since first test.

COVID-19 Cases who Tested Positive without COVID-19 Symptoms:

- 10 days have passed from the date of specimen collection of their first positive COVID-19 test.

Close Contacts:

- Close contact but never developed symptoms: when 10 days have passed since the last known close contact.
- Close contact with symptoms: when the "cases with symptoms" criteria (above) have been met, unless the following are true:
 - The person tested negative for COVID-19 using a PCR test with specimen taken after the onset of symptoms; and
 - At least 10 days have passed since the last known close contact; and
 - The person has been symptom-free for at least 24 hours, without using fever-reducing medications.

COVID-19 Inspections

Date: **[enter date]**

Name of person conducting the inspection: **Jonathan Wilby, Director of Risk Management**

Work location evaluated: **[enter information]**

Exposure Controls	Status	Person Assigned to Correct	Date Corrected
Engineering			
Ventilation (fresh air and filtration maximized)			
Additional room air filtration			
Administrative			
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			
PPE (not shared, available and being worn)			
Face coverings			
N95			
Face Shields			
Face Shields with Drape			
Disposable Gowns			
Disposable Gloves			
Students and staff wearing face coverings inside buildings and in vehicles			
Face covering exemption process understood			
Wellness Screening			
Employee wellness screening process understood			
Employees doing passive screening before arrival			
Employees staying home if 100.4 F or higher or symptomatic			
Teachers conducting visual wellness checks of students			

Illness/COVID-19 Cases			
Handling of symptomatic employee process understood			
Handling of symptomatic student process understood			
Observation room established			
Process for student or staff member who tests positive understood			
Observation Room			
Supervision for observation room established			
Process established for student pick-up			
Process established and understood for observation room cleaning			
PPE requirements for observation room understood			
Enhanced Cleaning and Disinfecting			
Additional custodial staff and/or supervision established			
Maintenance & Operations Safety Protocol for Reopening Schools understood			
Teacher cleaning supplies received and in place			
Custodial staff trained on and following cleaning protocols			
Custodial schedule established			
School Campus and Building Set-Up			
Visitor and employee face covering requirement signage in place			
Additional signage in place throughout the facility to support safe protocols			
Handwashing facilities assessed (adequate number and supplies)			
Other			

Guidance for the Use of Face Coverings

Background

The risk for COVID-19 exposures and infection will remain in California until we reach community immunity with vaccinations, especially in communities heavily impacted by COVID-19. Continued use of face coverings helps prevent COVID-19 transmission among people with higher risk of infection (those who are unvaccinated or immunocompromised), those with prolonged, cumulative exposures, and individuals whose vaccination status is unknown.

Face Covering Requirements

Requirements for School Settings

- Face coverings are required for all employees, students and visitors when indoors regardless of vaccination status.
- Face coverings are not required when outdoors.

Requirements for Non-School Settings

- Face coverings are not required for fully vaccinated persons after they have submitted their vaccination information to the Human Resources Department and received confirmation that they have been verified.
- Face coverings are required for unvaccinated persons when indoors or in a vehicle.
- Face coverings are not required for unvaccinated persons when outdoors but are recommended when six feet of distance between people is not maintained.

** "Fully Vaccinated" means that the person received, at least 14 days prior, either the second dose in a two-dose COVID-19 vaccine series or a single-dose COVID-19 vaccine*

Face Covering Exceptions

- Persons **younger than two years old**.
- Persons with a **verified medical condition, mental health condition, or disability** that prevents wearing a mask. This includes persons with a medical condition for whom wearing a face covering could obstruct breathing or who



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are unconscious, incapacitated, or otherwise unable to remove a face covering without assistance.

- Persons who are **hearing impaired** or communicating with a person who is hearing impaired or where the ability to see the mouth is essential for communication.
- Persons for whom wearing a face covering would create a **risk to the person related to their work**, as determined by local, state, or federal regulators or workplace safety guidelines.
- Persons alone in a room or vehicle.
- While eating or drinking provided at least six feet apart and outside air has been maximized to the extent feasible.

Note: Persons exempted from wearing a face covering due to a medical condition who are in a position involving regular contact with others should wear a non-restrictive alternative, such as a face shield with a drape on the bottom edge, as long as their condition permits it. **The Human Resources Department must be contacted for accommodation requests.**



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Newport-Mesa
Unified School District

Proper Washing of Reusable Face Coverings

Reusable face coverings, when combined with every day preventive actions and social distancing, are an essential tool in slowing the spread of COVID-19. It's important that these face coverings are washed regularly and properly.

Washing Machine

- You can include your face covering with your regular laundry.
- Use regular laundry detergent.
- Use the warmest appropriate water setting for the face covering material.

How to Dry

- Dryer – Use the highest heat setting and leave in the dryer until completely dry.
- Air Dry – lay flat and allow to completely dry. If possible, place mask in the direct sunlight.

By Hand

- Wear gloves when washing by hand
- Ensure adequate ventilation.
- Use bleach containing 5.25% - 8.25% sodium hypochlorite.
- Prepare a bleach solution by mixing: 5 tablespoons of bleach per gallon of room temperature water.
- Soak the mask in the bleach solution for 5 minutes.
- Discard the bleach solution down the drain and rinse the mask thoroughly with cool or room temperature water.
- Make sure to completely dry the mask after washing.



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Extended Use and Reuse of N95/KN95 Respirators

Background

Extended use refers to the practice of wearing the same N95 or KN95 respirator for repeated close contact encounters with several patients (or general uses) without removal of the respirator.



Reuse refers to the practice of using the same N95 or KN95 respirator for multiple encounters with patients (or general uses) but removing it in between each encounter or use.

Key Considerations

Respirator Extended Use Recommendations

- Extended use is favored over reuse because it is expected to involve less touching of the respirator and therefore less risk of contact transmission.
- A key consideration for safe extended use is that the respirator must maintain its fit and function.
- Research studies show N95 and KN95 respirators can work for several hours before they needed to be removed so the maximum length of continuous use is typically dictated by hygienic concerns (e.g., the respirator was discarded because it became contaminated) or practical considerations (e.g., need to use the restroom, meal breaks, etc.), rather than a pre-determined number of hours.
- If extending the use of a respirator, staff should take the following steps to reduce contact transmission after donning:
 - Discard N95 respirators following use during aerosol generating procedures.
 - Discard N95 or KN95 respirators contaminated with blood, respiratory or nasal secretions, or other bodily fluids.



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- Discard N95 or KN95 respirators following close contact with, or exit from, the care of anyone co-infected with an infectious disease requiring contact precautions.
- Consider use of a cleanable face shield instead of N95 or KN95 respirator to reduce surface contamination.
- Clean hands with soap and water or an alcohol-based hand sanitizer before and after touching or adjusting the respirator (if necessary for comfort or to maintain fit).
- Discard any respirator that is obviously damaged or becomes difficult to breathe through.

Respirator Reuse Recommendations

There is no way of determining the maximum possible number of safe reuses for an N95 or KN95 respirator.

- Safe N95 or KN95 reuse is affected by a number of variables that impact respirator function and contamination over time.
- Based on manufacturer recommendations, no N95 or KN95 should be reused more than 5 times and should be replaced if there's **ever** a doubt of its cleanliness or effectiveness. (review extended use recommendation above)
- Hang used respirators in a designated storage area or keep them in a clean, breathable container such as a paper bag between uses. To minimize potential cross-contamination, store respirators so that they do not touch each other and clearly identify the person using the respirator. Storage containers should be disposed of or cleaned regularly.
- Avoid touching the inside of the respirator. If inadvertent contact is made with the inside of the respirator, discard the respirator and perform hand hygiene as described above.
- Use a pair of clean (non-sterile) gloves when donning a used N95 or KN95 respirator and performing a user seal check. Discard gloves after the N95 or KN95 respirator is donned and any adjustments are made to ensure the respirator is sitting comfortably on your face with a good seal.



RISK BULLETIN

Face Shield Use and Cleaning

Background

While face shields are new to many of us, healthcare professionals know them quite well. In medical settings, they're worn when the chances of bodily fluids or hazardous substances getting into the eyes, nose and mouth are high. Face shields are made of a plastic or Plexiglas panel that curves around the face and an elastic band or adjustable strap that holds the panel in place.

Face Shield Usage at NMUSD

In limited situations when a face covering cannot be used for instructional or developmental reasons (i.e. communicating or assisting young children or those with special needs) instructional staff may use a face shield instead of a face mask.

Staff must return to wearing a face mask once completed with providing services.

Key Considerations

How to Wear a Face Shield

The panel of your face shield should extend well past the chin and curve around the sides of your face. There should not be any gaps between your forehead and the face shield's headpiece.

Face shields are not an alternative for a mask or face covering except for the limited situations described above.





How Long Can You Use Your Face Shield?

You can use a non-disposable face shield repeatedly as long as it's not warped, damaged or cracked. If your face shield becomes damaged, don't try to fix it. Throw it away and get a new one.

What's the Best Way to Clean a Face Shield?

Face shields should be cleaned after every use. Submerge the protective panel in warm, soapy water and gently clean the surface with a soft sponge or cloth. After washing, rinse and gently dry it with a soft towel (cotton or microfiber) to avoid scratching the clear surface. You can clean the headpiece separately.

It is possible to clean a face shield with antibacterial wipes, but be careful because they can leave a residue. Do not use a window or household cleaner since these harsh chemicals could potentially damage your face shield.

Remove your gloves and **always** wash your hands with soap and water after cleaning your face shield.



RISK BULLETIN

Newport-Mesa
Unified School District

Disposable Masks and Gowns

The District provides disposable masks to employees.



<i>How to Wear a Disposable Mask</i>	<i>How to Remove a Disposable Mask</i>	<i>When to Replace a Disposable Mask</i>
<ul style="list-style-type: none"> • Clean your hands with soap and water or hand sanitizer before touching mask. • Remove mask from the box, ensure no tears or holes. • The side of the mask that has a stiff bendable edge is the top molds to the shape of your nose. • The colored side of the mask is usually the front and should be worn away from you, while the white side touches your face. • Hold the mask with the ear loops and place a loop around each ear. • Mold or pinch the stiff edge to the shape of your nose. • Pull the bottom of the mask over your mouth and chin. 	<ul style="list-style-type: none"> • Avoid touching the front of mask. • Hold both of the ear loops and gently lift and remove the mask. • Throw mask in the trash and clean hands with soap/water or hand sanitizer. 	<ul style="list-style-type: none"> • There is no way of determining the maximum amount of time a mask should be worn or the number of reuses. • Guidance for wearing a mask in a non-medical environment recommends disposing after each day or if when doubt of their cleanliness or effectiveness. • Always discard of a disposable mask if it has been damaged, if you've had contact with anyone co-infected with an infectious disease, or if its contaminated with blood, respiratory or nasal secretions, or other bodily fluids.



Background: Disposable Gowns

The District provides disposable gowns to be used by school nurses and health assistants during aerosol generating procedures and voluntarily by other employees who prefer additional protection in challenging educational environments.

How to Wear a Disposable Gown

- Clean your hands with soap and water or hand sanitizer before touching gown.
- Opening is in the back.
- Place arms through openings.
- Secure at neck and waist.



How to Remove a Disposable Gown

- Avoid touching the front and sleeves of gown which may be contaminated.
- Unfasten ties and pull away from neck and shoulders, touching inside of gown.
- Turn the gown inside out and fold or roll into a bundle.
- Throw gown in the trash and clean hands with soap/water or hand sanitizer.

When to Replace a Disposable Gown

- There is no way of determining the maximum amount of time a gown should be worn or the number of reuses.
- Guidance for people wearing a gown in a non-medical environment recommend disposing after each day or if there's ever a doubt of cleanliness or effectiveness.
- Always discard of a disposable gown if it has been damaged, if you've had contact with anyone co-infected with an infectious disease, or if its contaminated with blood, respiratory or nasal secretions, or other bodily fluids.



RISK BULLETIN

Stop Germs! Wash Your Hands

Background

Washing hands can help keep you healthy and prevent the spread of infections from one person to the next.

Germs can spread from other people or surfaces when you:

- Touch your eyes, nose, and mouth with unwashed hands.
- Prepare or eat food and drinks with unwashed hands.
- Touch contaminated surface or objects.
- Blow your nose, cough, or sneeze into hands and then touch other people's hands or common objects.

How to wash hands

1. Wet your hands with clean, running water (warm or cold), turn off the tap, and apply soap.
2. Lather your hands by rubbing them together with the soap. Be sure to lather the backs of your hands, between your fingers, and under your nails.
3. Scrub your hands for at least 20 seconds. Need a timer? Hum the "Happy Birthday" song from beginning to end twice.
4. Rinse hands well under clean, running water.
5. Dry hands using a clean towel or air dry them.

Wash hands frequently

- Before, during, and after preparing food.
- Before and after eating.
- After blowing your nose, coughing, or sneezing.
- Before and after using the restroom.
- Before and after caring for someone who is sick with vomiting or diarrhea.
- After changing diapers or cleaning up a child who has used the toilet.
- After touching an animal, pet food or treats, or animal waste.
- After classes where items were shared (e.g., outside recreation, art, or shop).
- After touching garbage.

Use of Hand Sanitizer

- Fragrance-free hand sanitizer should be used when handwashing is not practicable.
- Sanitizer must be rubbed into hands until completely dry.

Note: frequent hand washing is more effective than the use of hand sanitizers.

[Center for Disease Control and
Prevention Handwashing: Clean Hands
Save Lives](#)



RISK BULLETIN

Coughing and Sneezing Etiquette

Background

Covering coughs and sneezes, and keeping hands clean can help prevent the spread of serious respiratory illnesses like influenza, respiratory syncytial virus (RSV), whooping cough, and COVID-19.

Key Considerations

Spreading of Germs

Germs can be easily spread by:

- Coughing, sneezing, or talking.
- Touching your face with unwashed hands after touching contaminated surfaces or objects.
- Touching surfaces or objects that may be frequently touched by other people.



Stopping the Spread of Germs

The spreading of germs can be prevented by following sneeze and cough etiquette:

- Cover your mouth and nose with a tissue when you cough or sneeze.
- Throw used tissues into the trash immediately.
- If you don't have a tissue, cough or sneeze into your elbow, not your hands.
- Immediately wash your hands after blowing your nose, coughing, or sneezing.
- Avoid close contact with people who are sick.
- Distance yourself from others if you are ill. **Stay home from work or school.**

More Information

[Center for Disease Control and Prevention Coughing and Sneezing](#)



RISK BULLETIN

Alen BreatheSmart 75i High-Efficiency Particulate Air (HEPA) Purifier

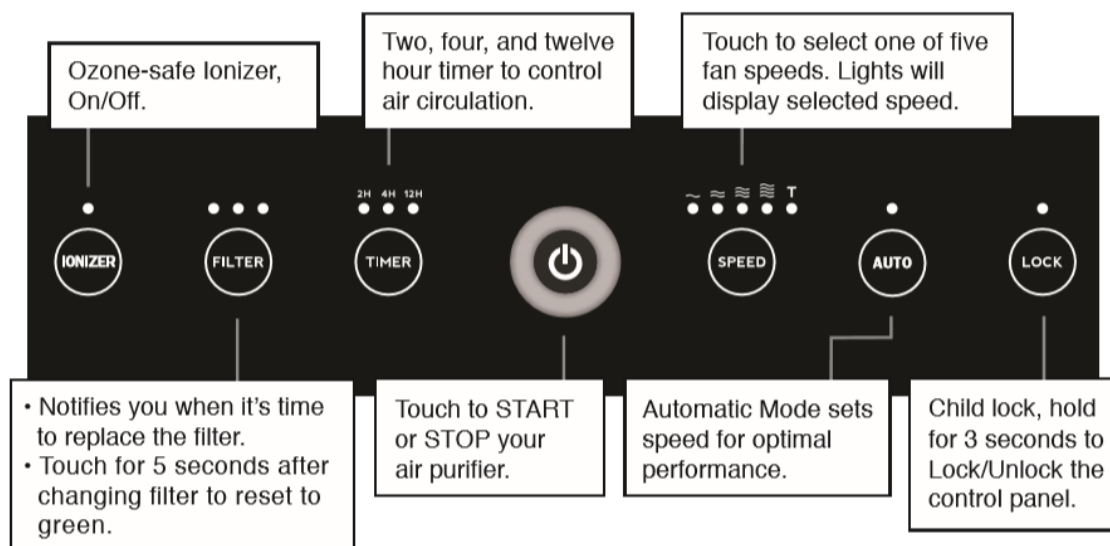
Background

Alen BreatheSmart 75i HEPA Purifiers were provided for each classroom and made available upon request for other areas throughout the District. This risk bulletin provides information on their operation and the color ring indicator located on the touch panel. Additional information can be found in the [Alen BreatheSmart 75i HEPA Purifier Owner's Manual](#).

Key Considerations

BreatheSmart 75i HEPA Purifier Capacitive Touch Panel

The BreatheSmart 75i has a capacitive touch panel with buttons that only operate with a quick, light touch. Holding the buttons down will not activate the controls properly.



RISK BULLETIN



Newport-Mesa
Unified School District

Operation of the Alen BreatheSmart 75i HEPA Purifier

1. Plug the HEPA purifier into a grounded outlet.
2. Touch the power button in the center to turn on the HEPA purifier. When the unit is on, the lights will light up. Touch the power button a second time to operate without the lights on. Touch the power button a third time to turn off the unit.
3. The color ring around the power button indicates the air quality measured by the particle sensor.



COLOR	MEANING
Blue	Very low level of airborne particles detected
Green	Low level of airborne particles detected
Orange	Medium level of airborne particles detected
Red	Significant level of airborne particles detected
Purple	Very significant level of airborne particles detected

4. Press the ionizer button to activate the ozone-safe ionizer. Activation of the ionizer enhances the unit's ability to remove airborne particles (similar to the way dust is attracted to a TV screen) and can be used to reduce particles more quickly. Press the ionizer button again to turn off.
5. Filter Life Indicator – there are three lights above the filter button: green, yellow and red. The green light will be illuminated for most of the life of the filter. The yellow light will come on shortly before your filter should be replaced. The red light will be illuminated when it is time to replace the filter. Contact your custodian if the yellow or red filter light are on.
6. Press the timer button to have the HEPA purifier run for a specific number of hours (two, four, or twelve) before turning off. The use of this feature is



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not necessary in a classroom setting since it's recommended the unit run 24/7 or be turned off upon exiting the classroom at the end of the day.

Initial Use in a Room

The manufacturer recommends using a higher fan speed like speed four (4) or turbo (T), for at least two hours, when using the HEPA purifier for the first time in a room in order to clean the room's air initially. It further recommends that the HEPA purifier run continuously on speed two (2) or three (3) or be set on Auto mode. The HEPA purifier can run continuously or be turned off at the end of the day with the initial use process being followed upon reentering the room.

Color Ring Indicator

The color ring indicator does not indicate poor indoor air quality, but is simply there as a visual indication that the unit is detecting a low, medium, or high level of particles in the air. Particles can be in any form from dirt, dust, ash, pollen, perfume or fragrance, etc. Particles can be stirred up in the air and cause the light to fluctuate anytime you open a door or window or walk through a room. The color ring indicator changing color throughout the day should not cause alarm since it shows the HEPA purifier is working. The sensor doesn't discriminate on what type of particle it will read as long as the particle is big enough, it will sense its movement.

Best Management Practices

Best management practices to maximize the function of your unit include:

- Keep filter away from doors and windows
- Keep doors and windows closed while the HVAC system is running
- Do not block the filter, place in an open area
- Make sure the "filter" indicator is not lit
- Avoid using fragrances, especially diffusers, wicks, plug-ins, etc. that could contribute to poor indoor air quality
- Keep away from heavy traffic areas

More Information

[Alen BreatheSmart 75i Air Purifier Information](#)