


EMERGENCY COVID-19 ILLNESS

AND INJURY PREVENTION PROCEDURES

12.02.100.01

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| SUBJECT: Coronavirus, COVID-19 | NUMBER: 12.02.270.01 |
| RESPONSIBLE OFFICER: City Manager | EFFECTIVE DATE: 03/08/2022 |
| PROCEDURE OWNER: Director of Human Resources | LAST UPDATED: 03/08/2022 |
| PROCEDURE CONTACT: Human Resources Department | APPROVED:  |

PROCEDURE

The following strategies and practices outlined in this procedure are designed to support the protection of employees and the general public by minimizing the risk of exposure to Coronavirus (COVID-19).

- 1) Worker Screening
- 2) Quarantine & Isolation
- 3) Hierarchy of Controls
- 4) Engineering Controls
- 5) Administrative Controls
- 6) Personal Protective Equipment
- 7) Environmental Cleaning and Disinfection
- 8) Worker Training

Fire and Police are covered by Cal/OSHA's Aerosol Transmissible Disease standards and have department specific plans.

1) DEFINITIONS

COVID-19 Means coronavirus disease, an infectious disease caused by the severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2). COVID-19 is an infectious disease that can be spread through the air when an infectious person talks or vocalizes, sneezes, coughs, or exhales; that COVID-19 may be transmitted when a person touches a contaminated object and then touches their eyes, nose, or mouth, although that is less common; and that an infectious person may have no symptoms. Particles containing the virus can travel more than six (6) feet, especially indoors. Depending on vaccination status, other controls may be required, including face coverings and hand hygiene in order to be effective.

COVID-19 Case (1) Has a positive COVID-19 test; (2) Has a positive COVID-19 diagnosis from a licensed health care provider; (3) Is subject to COVID-19-related order to isolate issued by a local or state health official.

Close Contact COVID-19 Exposure Being within six (6) feet of a COVID-19 case for a cumulative total of 15 minutes or greater in any 24-hour period within or overlapping with the "high-risk exposure period" as defined here. This definition is irrespective of vaccination status or use of face coverings.

COVID-19 Hazard Exposure to potentially infectious material that may contain the COVID-19 virus. Potentially infectious materials include airborne droplets, small particle aerosols, and airborne droplet nuclei, which most commonly result from a person or persons exhaling, talking or vocalizing, coughing,

sneezing, or procedures performed on persons which may aerosolize saliva or respiratory tract fluids, among other things. This also includes objects or surfaces that may be contaminated with SARS-CoV-2.

COVID-19 Symptoms (1) fever of 100.4 degrees Fahrenheit or higher or chills; (2) cough; (3) shortness of breath or difficulty breathing; (4) fatigue; (5) muscle or body aches; (6) headache; (7) new loss of taste or smell; (8) sore throat; (9) congestion or runny nose; (10) nausea or vomiting; or (11) diarrhea.

Exposed Group All employees at a work location, working area, or a common area at work, where an employee COVID-19 case was present at any time during the high-risk exposure period. A common area at work includes bathrooms, walkways, hallways, aisles, break or eating areas, and waiting areas. The following exceptions apply, (1) a place where persons momentarily pass through while everyone is wearing face coverings, without congregating, is not a work location, working area, or common area at work; (2) work crews or shifts that do not overlap are not part of the same exposed group; (3) if the employee COVID-19 case visited a work location, working area, or common area for less than 15 minutes during the high-risk exposure period, and the employee COVID-19 case was wearing a face covering during the entire visit, other people at the work location, working area, or common area are not part of the exposed group.

Face Coverings A surgical mask, a medical procedure mask, a respirator worn voluntarily, or a tightly woven fabric or non-woven material of at least two layers. A face covering does not include a scarf, ski mask, balaclava, bandana, turtleneck, collar, or single layer of fabric. Respirator means a respiratory protection device approved by the National Institute for Occupational Safety and Health (NIOSH), such as an N95 filtering facepiece respirator. A face shield alone does not meet the requirements of a face covering.

Fully Vaccinated Employer has documented that the person received, at least 14 days prior, either the second dose in a two-dose COVID-19 vaccine series or a single-dose COVID-19 vaccine.

High-Risk Exposure Period (1) **Symptomatic Employees:** beginning two (2) days before they first develop symptoms until ten (10) days after symptoms first appeared, and 24 hours have passed with no fever, without the use of fever-reducing medications, and symptoms have improved; or (2) **Asymptomatic Positive Employees:** beginning two (2) days before until ten (10) days after the specimen for their first positive test for COVID-19 was collected.

2) SAFE WORK HABITS TO COMBAT COVID-19

Handwashing

Wash hands frequently with soap and water for at least 20 seconds and use hand sanitizer when you do not have immediate access to a sink or hand washing facility. (Caveat: hand sanitizer does not work if hands are soiled.) City does not provide hand sanitizers with methyl alcohol.

Face Coverings

The City of Stockton will follow the California Department of Public Health (CDPH) and the San Joaquin County Public Health Services (SJCPHS) masking requirements.

Personal Protective Equipment (PPE)

Designated department representatives will evaluate the need for PPE, such as gloves, goggles, face shields, and respiratory protection, to prevent exposure to COVID-19.

Designated department representatives will provide and ensure use of respirators when deemed

necessary by Cal/OSHA through the issuance of Order to Take Special Action.

Employees have the right to request a respirator (N95) for voluntary use at no cost to employees. Whenever respirators are provided for voluntary use, training will be provided on how to properly wear the respirator and how to perform a seal check each time a respirator is worn. Employees are encouraged to direct requests for PPE to the department designated representative.

Vaccines are effective at preventing and protecting against COVID-19 transmission, serious illness and/or death. Employees can schedule free Covid-19 vaccinations by accessing the following web address: myturn.ca.gov.

3) WORKER SCREENING

Employees are required to familiarize themselves with COVID-19 symptoms (see Definitions above) and self-monitor both during and outside of work hours.

- **Before Entering the Workplace.** Employees exhibiting any signs related to COVID-19 are NOT TO COME TO WORK. If COVID-19 is suspected as the cause of illness, employees are to immediately notify their supervisor and call Choices Case Management nurse triage line at (800) 405-9498 for guidance on COVID-19 response.
- **At-Work – Exhibiting Symptoms.** Employees experiencing any symptoms related to COVID-19 during work hours are to report to their supervisor immediately and leave the workplace. Employees must contact Choices Case Management nurse triage line at (800) 405-9498 for guidance on COVID-19 response.

4) NOTIFICATIONS OF COVID-19 EXPOSURES

- **Close Contact Notification** (See Exhibit 2) – this notification must be sent to all employees who were identified as a close contact. It is imperative the supervisor notify the Human Resources Deputy Director immediately and provide a copy of the communication sent to employees.

Per California Labor Code section 6409.6, in addition to close contact exposure notice, the following notifications must be sent within one business day after notification of a positive case:

- **Staff Notification** (See Exhibit 3) – this notification must be sent to all employees who were at the work location during the high exposure period. (High exposure period is 48 hours before the onset of symptoms or date the test was performed.)
- **Contractor Notification** (See Exhibit 4) – this notification must be sent to outside employers and contractors who were at the work location during the high exposure period. (High exposure period is 48 hours before the onset of symptoms or date the test was performed.)

Close Contact with Exposed Employee. The City will provide free COVID-19 testing during working hours to all employees who had potential close contact COVID-19 exposure at a worksite or facility.

Additionally, employees can refer to the following website for free COVID-19 testing in cases unrelated to the worksite at: <http://www.sjready.org/events/covid19/testing.html>.

The City may allow qualified employees subjected to quarantine/isolation to telework during the quarantine/isolation period. Said employees will receive compensation at their normal rate of pay.

Recordkeeping. COVID-19 cases will be recorded and tracked by the Human Resources Deputy Director by utilizing the following information: name, contact info, occupation, location worked, last date worked, and date of positive test.

Employees who **become ill at work**, or have been **exposed to a positive COVID-19 case**, must call:

1. Choices Case Management Nurse Support line at **(800) 405-9498**. The nurse will complete an Assessment Form and offer guidance as to the next steps.
2. Notify Supervisor

Employees who **test positive** must call:

1. Choices Case Management Nurse Support line at (800) 405-9498.
2. Workers Compensation Provider Athens Administrators at (844) 490-4712 to file a report
3. Notify Supervisor

5) DECONTAMINATION OF CITY FACILITIES OR VEHICLE

When a supervisor becomes aware of an employee with a COVID-19 positive test who was present in a City facility or vehicle, they must immediately contact the Department of Public Works or building janitorial services (non-city owned facilities) to request decontamination of the affected area. The supervisor should make attempts to limit staff access to an employee's work area until decontamination occurs.

Facilities Maintenance

(209) 937-8954

(209) 937- 7440

(209) 937-7582

Vehicle Fleet Maintenance Management

(209) 937-8453

Note: Vehicle will need to be returned to a City facility and must sit for 72 hours from initial time of contamination before decontamination can begin.

Cleaning and Disinfecting Procedures. Designated department representatives will identify and ensure regular cleaning and disinfecting of frequently touched surfaces and objects such as doorknobs, elevator buttons, equipment tools, handrails, handles, controls, bathroom surfaces, and steering wheels. Said cleaning must be done in a manner that does not create a hazard to employees and the public. The designated department representative will inform employees (and authorized Union representatives) of cleaning and disinfecting protocols, including the planned frequency and scope of regular cleaning and disinfection.

Employees are prohibited from sharing personal protective equipment and, to the extent feasible, items that employees come in regular physical contact with such as phones, headsets, desks, keyboards, writing materials, instruments, and tools.

Sharing of vehicles will be minimized to the extent feasible and high touch points (steering wheel, outdoor handles, seatbelt buckles, armrests, shifters, etc.) shall be disinfected between users.

6) IDENTIFYING HAZARDS/INVESTIGATIONS

Employee Reporting. Employees are encouraged to report any Covid-19 hazards to their department designated representative.

Management. The department designated representative shall investigate hazards and employee complaints utilizing the form in the documents section. Department designated representatives should evaluate how frequent monitoring for hazards should occur at the worksite. Once frequency is determined, a strict monitoring schedule should be adhered to.

7) COVID-19 WORK RELATED MEDICAL LEAVES

Pursuant to California Labor Code section 3205 (c)(9)(D):

"For employees excluded from work under subsection (c)(9) employers shall continue and maintain an employee's earnings, seniority, and all other employee rights and benefits, including the employee's right to their former job status, as if the employee had not been removed from their job. Employers may use employer-provided employee sick leave benefits for this purpose to the extent permitted by law..."

8) PROCESS FOR REQUESTING LEAVE OF ABSENCE:

- a. Employee notifies Manager/Supervisor of COVID related leave requests.
- b. Manager/Supervisor determines if remote work is available for employee (see Telecommuting Request Form)
- c. If remote work is not available, employee completes the 2022 AB84 COVID Leave Request Form and submits to department.
- d. Employee provides required documentation to support leave request.
- e. Department Executive Assistant records leave for departmental tracking.
- f. Department Executive Assistant emails documentation to Leaves@stocktonca.gov with Subject: COVID Notification

Process for requesting credit to leave banks for employees' absence(s) due to COVID related leaves retroactive to JANUARY 1, 2022:

- a. Employee submits 2022 AB84 COVID Leave Request Form and selects box # 5.
- b. Employee provides required documentation to receive credits to their leave banks.
- c. Once verified and signed by employee and manager, email to Leaves@stocktonca.gov with Subject: COVID Reimbursement.
- d. HR coordinates with Payroll for COVID related absences for timely submission and processing.

Additional Guidelines:

1. AB84 COVID Supplemental Paid Sick Leave provides up to 40 hours of COVID related paid leave retroactive from January 1, 2022, through September 30, 2022, for full-time employees. Part-time employees' hours will be based on hours worked.
2. An additional 40 hours of paid sick leave is provided to those who or whose family member test positive for full-time employees. Part-time employees' hours will be based on hours worked. Family members include: a child, spouse, registered domestic partner, parent, grandparent, grandchild, sibling for full-time employees.
3. If employee refuses to take and show positive test results, no additional sick leave will be granted.
4. At home test kits or expenses incurred to seek private medical care are not reimbursed.

9) QUARANTINE AND ISOLATION GUIDELINES

The City of Stockton will follow the California Department of Public Health (CDPH) and the San Joaquin County Public Health Services (SJCPHS) for quarantine and isolation guidelines.

RELATED CITY POLICIES

Emergency COVID-19 Illness and Injury Prevention (12.02.100)

RELATED FORMS, DOCUMENTS, OR LINKS

- Exhibit 1 2022 AB84 COVID Leave Request Form
- Exhibit 2 Covid-19 Exposure Notification Close Contact
- Exhibit 3 Staff Notification
- Exhibit 4 COVID-19 Exposure Notification Outside Employers & Contractors
- Exhibit 5 Identification of COVID Hazards
- Exhibit 6 COVID-19 Inspections
- Exhibit 7 Investigating COVID-19 Cases
- Exhibit 8 COVID-19 Training Roster

Please reach out to Risk for word versions.

FREQUENTLY ASKED QUESTIONS

www.stocktonca.gov/employeeresources

leaves@stocktonca.gov – HR Leaves

riskservices@stocktonca.gov – HR Risk Management

HR Contact Number (209) 937-8233

Employee Name: _____ Employee ID #: _____
Position/Title: _____ Department: _____
Date(s) of Leave: _____ Number of Days: _____
Total Number of Hours used: _____ Dept Log verification: _____

TYPE OF LEAVE REQUESTED

A covered employee may take leave if the employee is unable to work or telework for any of the following reasons:

1. CARING FOR YOURSELF:

- ☐ Employee is subject to quarantine or isolation period related to COVID as defined by an order or guidelines of the California Department of Public Health, the federal Centers for Disease Control and Prevention, or a local health office with jurisdiction over the workplace.
- ☐ Employee has been advised by a healthcare provider to isolate or quarantine due to COVID.
- ☐ Employee is experiencing symptoms of COVID and seeking medical diagnosis.

2. VACCINE-RELATED:

- ☐ The covered employee is attending an appointment for themselves or a family member to receive a vaccine or a vaccine booster for protection against COVID subject to certain limitations
- ☐ The employee is experiencing symptoms, or caring for a family member experiencing symptoms, related to COVID vaccine or vaccine booster that prevents the employee from being able to work or telework.

3. CARING FOR A FAMILY MEMBER:

- ☐ Employee is caring for a family member who is subject to an order or guidance or who has been advised to isolate or quarantine due to COVID.

4. CARING FOR A CHILD:

- ☐ Employee is caring for a child whose school or place of care is closed or otherwise unavailable for reasons related to COVID on the premises.

5. REQUEST CREDIT TO LEAVE BANK: (up to 40 hours – Part-time employees hours vary)

- ☐ Employee was absent on or after January 1, 2022, due to COVID related reasons, and is requesting a credit.

6. POSITIVE TEST RESULT: (up to an additional 40 hours – Part-time employees hours vary)

- ☐ Employee or a family member for whom employee is providing care, tests positive for COVID (submit positive test result documentation)

Submit any of the following required forms to support leave of absence & credit request

- ____ Close Contact Notice
- ____ Healthcare Provider certification
- ____ Positive test result or photo of at home kit test that shows the date it was administered.
- ____ Child's school notification letter
- ____ Nurse notification letter/email

Employee Signature: _____ Date: _____

Department Head Signature: _____ Date: _____

HR Use Only: Verified/Recorded by: _____ Date: _____

EXHIBIT 2

SAMPLE DOCUMENTATION ONLY
(USE FOR EMPLOYEES WHO WERE IDENTIFIED AS A CLOSE CONTACT)

COVID-19 EXPOSURE NOTIFICATION

[DATE]

[EMPLOYEE NAME]

[JOB TITLE/DEPARTMENT]

CITY OF STOCKTON

- This memo is to inform you that on ENTER DATE, you may have come in contact with a person who has tested positive for the COVID-19 virus. The possible contact was reported as occurring during the course of your work. Accordingly, in consultation with County Health Offices, City Administration, and the City Physician, you are directed to do the following: **Call Choices Case Management** on-call nurse triage line at (800) 405-9498 and follow the directions provided by Choices on-call nurse.
- **Initiate Self-monitoring** – City employees receiving this memo should monitor themselves for fever by taking their temperature twice a day and remain alert for any respiratory symptoms (e.g., cough, shortness of breath, sore throat). Anyone self-monitoring should contact their supervisor if symptoms develop or if they have questions. If you develop a fever or respiratory symptoms during the self-monitoring period and you determine medical evaluation is needed, you should contact Choices Case Mgmt. at (800) 405-9498 and speak with the advice nurse.
- **Follow CDC guidelines** – Continue to perform self-monitoring for ten (10) days after the date of this notice.
- **Review the following links:**
 - Stockton FAQ: www.stocktonca.gov/files/Return2Work.pdf.
 - [www.stocktonca.gov/government/departments/humanresources/employee resources](http://www.stocktonca.gov/government/departments/humanresources/employee%20resources)
 - County Health: <https://www.sigov.org/covid19/>
 - CDC: <https://www.cdc.gov/coronavirus/2019-ncov/index.html>

We hope that you were not infected with COVID-19 due to this possible exposure, but out of an abundance of caution, please follow the above directions to promote your own health and well-being as well as the health and well-being of your coworkers and the community at large.

Employees may qualify for COVID-19-related leave benefits. Please consult with your supervisor regarding quarantining leave options which may include either teleworking or sick leave pay.

If you have any questions or concerns regarding this notice, or the associated instructions, please contact Risk Management at 209-937-8233.

cc: Human Resources Deputy Director
Union Representative

EXHIBIT 3

SAMPLE DOCUMENTATION ONLY
(USE FOR ALL EMPLOYEES WHO WERE AT THE WORK LOCATION)
STAFF NOTIFICATION

[DATE]

~ NO ACTION NEEDED ~
Notification of a known COVID-19 case

In accordance with the [Cal/OSHA Emergency Temporary Standard revision](#) and [Assembly Bill 685](#), notification is being sent to inform staff that a positive COVID-19 case has been reported. Notification is being provided to those at the worksite.

IMPORTANT: This notice does **NOT** confirm close contact with a COVID positive individual. Staff who have come into close contact with a COVID positive individual will be notified directly in the contact tracing process.

Again, this is NOT a notice of close contact.

This notification will inform you of:

1. responsive steps we are taking
2. steps all employees must take
3. work exclusion, vaccination status and sick leave
4. returning to work
5. non-retaliation

The City of Stockton was notified that on ENTER DATE, an employee at ENTER DEPARTMENT NAME & ADDRESS has been diagnosed with COVID-19. As an immediate response to protect health and safety and to minimize the spread of COVID-19, an investigation was conducted to determine who may have had **close contact** with the confirmed-positive individual during the **high-risk exposure period**. As such, you have **NOT** been identified as a close contact.

Those who are to remain in isolation or quarantine in accordance with guidance from San Joaquin County Department Health Services (SJCPHS) have been contacted. Quarantine guidelines can be found by visiting the [SJCPHS website](#) or the [CDC website](#).

As a reminder of our COVID-19 safety procedures, it is important that all people self-screen for possible symptoms before arriving at work. According to the Centers for Disease Control (CDC), "Symptoms may appear 2-14 days after exposure to the virus." For information on possible [symptoms](#), please visit the CDC website. Check the County Public Health website for information about local testing sites and appointments.

Please continue reading for information regarding responsive steps we are taking, steps all employees must take, work exclusion, sick leave, returning to work, and non-retaliation.

Steps the Employer is taking:

The Risk Department investigates each case to determine the necessary actions to minimize the spread of COVID-19 based on severity of the outbreak, number of cases, etc.,

The City of Stockton will apply mitigation strategies and take action(s) such as, but not limited to;

- sanitization,
- notification of exposure,
- collaboration with local public health on contact tracing and recommendations,
- exclusion of confirmed-positive individuals from the workplace,
- tracking potential outbreaks,
- promotion of proper hygiene,
- correction of verifiable COVID-19 hazards, as applicable, in compliance with safety protocols and guidelines from federal, state, and local Public Health departments and Cal/OSHA.

The City of Stockton will keep all medical information confidential and will only disclose unredacted medical information to the local health department, CDPH, the Division, NIOSH, or as otherwise required by law immediately upon request. Under the ADA and HIPPA requirements, we are required to maintain the confidentiality of any medical information we receive, including the name of any affected employee.

Disinfection and safety measures will be implemented at the workplace in response to the potential exposure.

- Custodial staff will use disinfectant-strength solution in potential contaminated areas, as needed.
- Cleaning and disinfection of areas, material, and equipment used by a COVID-19 case during the high-risk exposure period will be done in a manner that does not create a hazard to employees.
- Staff will continue to self-screen for symptoms prior to arriving to work.
- The safety measures outlined in the IIPP COVID-19 Prevention Plan will be maintained and re-evaluated periodically as more information becomes available from the aforementioned sources.

Steps all employees must take:

All employees are reminded to abide by the Centers for Disease Control and Prevention (CDC) and the California Department of Public Health (CDPH) guidelines to protect your health and the health of those around you. This includes:

- wash your hands often with soap and water for at least 20 seconds, especially after blowing nose, coughing or sneezing;
- if soap and water are not readily available, use a hand sanitizer that includes at least 60 percent alcohol;
- avoid touching eyes, nose, and mouth with unwashed hands;
- wear a face covering in accordance with the City of Stockton, Cal/OSHA and public health guidelines;
- maintain a physical distance of at least 6 feet from others as often as possible; and
- stay home when sick.

For questions or concerns please contact Risk Services at (209) 937-8805.

ENTER DEPARTMENT REPRESENTATIVE INFORMATION

EXHIBIT 4

SAMPLE DOCUMENTATION ONLY
(USE FOR OUTSIDE EMPLOYERS & CONTRACTORS)

COVID-19 EXPOSURE NOTIFICATION

[DATE]

[EMPLOYER/CONTRACTOR INFORMATION]

Subject: Notification of City of Stockton Staff's Positive COVID-19 Test

Dear [CONTACT],

The City of Stockton has learned that an employee at ENTER LOCATION has tested positive for the COVID-19 virus. The employee was tested for the virus and received positive results of this test on DATE. The employee was last at this location on DATE. This letter is to notify you that you and your workers have potentially been exposed to COVID-19. You should contact your local public health department for guidance and any actions to take based on individual circumstances.

While we understand you may have questions about health of coworkers and associates, it is necessary that we protect the health-related information of our employees. We cannot confirm the health status of employees or communicate about coworkers' health.

Sincerely,

[NAME OF DEPARTMENT REPRESENTATIVE]

IDENTIFICATION OF COVID-19 HAZARDS

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

Date: _____

Name(s) of employee and authorized employee representative that participated:

[illegible]

EXHIBIT 6**COVID-19 INSPECTIONS**

[This form is only intended to get you started. Review the information available at www.dir.ca.gov/dosh/coronavirus/ for additional guidance on what to regularly inspect for, including issues that may be more pertinent to your particular type of workplace. You can need to modify form accordingly.]

Date: _____

Name of person conducting the inspection: _____ -

Work location evaluated: _____

| Exposure Controls | Status | Person Assigned to Correct | Date Corrected |
|--|--------|----------------------------|----------------|
| Engineering | | | |
| Barriers/partitions | | | |
| Ventilation (amount of fresh air and filtration maximized) | | | |
| Additional room air filtration | | | |
| Administrative | | | |
| Physical distancing | | | |
| 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 (cleaned sufficiently often) | | | |
| Gloves | | | |
| Face shields/goggles | | | |
| Respiratory protection | | | |

EXHIBIT 7

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.

Date: _____

Name of person conducting the investigation: _____

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

| | | | |
|--|--|--|--|
| 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): | | | |
| 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: | | | |
| All employees who may have had COVID-19 exposure and their authorized representatives. | Date: | | |
| | Names of employees that were notified: | | |
| Independent contractors and other employers present at the workplace during the high-risk exposure period. | Date: | | |
| | Names of individuals that were notified: | | |
| What were the workplace conditions that could have contributed to the risk of COVID-19 exposure? | | What could be done to reduce exposure to COVID-19? | |
| Was local health department notified? | | Date: | |

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

EXHIBIT 8

COVID-19 TRAINING ROSTER

Date: _____

Person that conducted the training: _____

[illegible]

RELEVANT AUTHORITY

The City of Stockton follows Federal, State, and Local laws, regulations, and guidance.

California Department of Public Health CDPH.ca.gov

San Joaquin County Public Health Department Services sjcphs.org

California Department of Industrial Relations Cal/OSHA dir.ca.gov

RELATED CITY POLICIES

HR-11 - No employee will be retaliated against for exercising any rights under this policy. Whistleblower Protection Policy.

HR-35 – Medical Accommodations, the City Manager Administrative Directive (HR-35) addresses the procedure in place for accommodating employees with medical or other conditions that put them at increased risk of severe COVID-19 illness

HR-73 – Emergency Coronavirus COVID-19 Illness and Injury Prevention Program

RELATED FORMS, DOCUMENTS, OR LINKS

www.stocktonca.gov/employeeresources

leaves@stocktonca.gov – HR Leaves

riskservices@stocktonca.gov – HR Risk Management

HR Contact Number (209) 937-8233

FREQUENTLY ASKED QUESTIONS

This policy is available to Cal/OSHA, all employees, and respective union representatives immediately upon request.

The City will protect all employee medical information consistent with all applicable laws to include California Confidentiality of Medical Information Act.

UPDATE HISTORY

07/22/2020

12/15/2020

12/16/2020

04/01/2021

06/21/2021
08/16/2021
10/01/2021
01/13/2022
03/08/2022
