

COVID-19 Prevention Program (CPP) for Besant Hill School of Happy Valley

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

Date: Started Summer of 2020, ongoing edits as needed

Authority and Responsibility

Alex Smith, CEO 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:

1. Conduct workplace-specific evaluations using the **Appendix A: Identification of COVID-19 Hazards** form.
2. Evaluate employees' potential workplace exposures to all persons at, or who may enter, our workplace.
3. 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.
4. Evaluate existing COVID-19 prevention controls in our workplace and the need for different or additional controls.
5. 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.
6. Collection of laboratory specimens for surveillance and response to incident SARS CoV-2 testing

Employee participation

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

1. Bringing their concerns to any member of the Besant Hill of Happy Valley Covid-19 Reopening Committee.

Employee screening: we screen our employees by:

1. Every day, when reporting for work, employees check-in at the following locations for symptom review and temperature check with non-contact thermometers:
2. Maintenance: Maintenance office
3. Dining Services: Back entrance to the kitchen
4. Faculty: Student Affairs office
5. Main Office/Administration: Main office
6. All employees have been instructed that if they are not feeling well they are to stay at home and notify Health Services Staff or their immediate supervisor, PRIOR to reporting for work

Correction of COVID-19 Hazards

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

1. The severity of the hazard will be assessed and a remedy, as well as the time frame for correcting the issue, will be determined.
2. Individuals are identified as being responsible for the corrective action plan.
3. Responsible individual(s) will notify the Reopening Committee when the corrective action is complete.

Control of COVID-19 Hazards

Physical Distancing

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

1. Reducing the number of persons in an area at one time
2. Visual cues such as signs and floor markings to indicate where employees and others should be located or their direction and path of travel.
3. Staggered arrival, departure, work, and break times.

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

Face Coverings

Employees may use their own face masks (no bandanas or gaiters), or we will provide clean, undamaged face masks to anyone who requests them. We ensure they are properly worn by employees over the nose and mouth when indoors or outdoors. Employees have been informed that face masks must be in clean and undamaged condition.

Any employee who encounters an individual not wearing an appropriate face covering will immediately inform the individual that it is the policy that a face mask be worn at all times, except when eating or drinking. If the individual does not have a face mask, a clean, undamaged face mask will be provided.

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

1. When an employee is alone in a room, and there is no expectation that anyone will come into the room.
2. While eating and drinking at the workplace, provided employees are at least six feet apart, or appropriate partitions are in place (i.e., the dining commons). If indoors, ventilation has been maximized to the extent possible.
3. 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. Alternatives will be considered on a case-by-case basis.

Engineering controls

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

1. In the dining commons, where individuals are unmasked, and less than six feet apart, Plexiglass partitions have been installed on the tables to contain the aerosol spread

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

1. Having air conditioning systems set to "Fan on" at all times
2. Allow windows to be open to bring in fresh air
3. Replacing ventilation filters with MERV-13 filters
4. Outside HVAC consultant brought in to assist in the review of HVAC systems
5. Systems maintained as per State of California requirements for schools

Cleaning and disinfecting

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

1. New shared responsibility by all staff at Besant Hill School. Reducing the risk of exposure to COVID-19 by cleaning and disinfection is an important part of our Covid 19 Protection Plan at Besant Hill School. Everyone has a role in making sure our community is as safe as possible.
2. The virus that causes COVID-19 can be killed if you use the right products. EPA has compiled a list of disinfectant products that can be used against COVID-19, including ready-to-use sprays, concentrates, and wipes. Each product has been shown to be effective against viruses that are harder to kill than viruses like the one that causes COVID-19.
3. Normal routine cleaning with soap and water will decrease how much of the virus is on surfaces and objects, which reduces the risk of exposure.
4. Disinfection using EPA - approved disinfectants can also help reduce the risk. Frequent disinfection of surfaces and objects touched by multiple people is important.
 - a. When EPA-approved disinfectants are not available, alternative disinfectants can be used safely and effectively.
 - b. PPE:
 - i. Gloves:

- ii. Wear disposable gloves when cleaning and disinfecting. Gloves are discarded after each use.
- iii. Clean hands immediately after gloves are removed.
 - 1. Soap and Water are preferable, hand sanitizer otherwise.
- iv. Eye Protection:
 - 1. When there is potential for splash or splatter in the face

5. Cleaning kit:

- a. This is a tote that is placed in each space (classrooms, main office) where cleaning is performed routinely during the day)
 - i. 32oz bottle of disinfectant with a spray nozzle
 - ii. One roll of shop towels
 - iii. One box of gloves
 - iv. One Ziplock baggie of face masks (in case someone does not have one)
 - v. One Ziplock baggie of wipes specifically for electronic devices
- b. The Maintenance Department is the keeper of supplies and is responsible for keeping the Cleaning Kit adequately stocked.

6. Cleaning/Disinfecting Procedures:

- a. Indoor areas, hard surfaces:
 - i. Faculty: at the end of each class period
 - 1. Spray and wipe down each desk using disinfectant spray.
 - 2. Spray door handles, inside and outside
 - 3. Wipe down whiteboard markers and remotes, if used
 - ii. Maintenance: at end of the day
 - 1. Clean obviously dirty surfaces using soap and water first
 - 2. Disinfect all hard surfaces, especially high touch surfaces
 - 3. High touch surfaces include:
 - a. Tables, doorknobs, light switches, countertops, handles, desks, phones, keyboards, toilets, faucets, sinks, etc.
 - b. Disinfectant Procedures:
 - i. We are using Magic Wand disinfectant which is an EPA-registered household disinfectant, reconstituted and filled into 32oz. spray bottles
 - ii. Maintenance is responsible for keeping containers filled
 - iii. Follow the instructions on the label to ensure safe and effective use of the product
 - 1. Keeping the surface wet for approximately 10 minutes (see product label).
 - 2. Wearing gloves and good ventilation during the use of the product.
 - 3. Use no more than the amount recommended on the label.
 - 4. Use water at room temperature for dilution (unless stated otherwise on the label).
 - 5. Avoid mixing chemical products.

6. Label diluted cleaning solutions.
 7. Store and use chemicals out of the reach of children.
 8. You should never eat, drink, breathe or inject these products into your body or apply them directly to your skin as they can cause serious harm.
- iv. Alternative disinfectants:
1. These products are only to be used in case of emergency or our inability to procure supplies.
 2. Diluted household bleach solutions may also be used if appropriate for the surface.
 - a. Check the label to see if your bleach is intended for disinfection and has a sodium hypochlorite concentration of 5%–6%.
 - b. Ensure the product is not past its expiration date.
 - c. Follow the manufacturer's instructions for application and proper ventilation.
 - d. Never mix household bleach with ammonia or any other cleanser.
 - e. Leave the solution on the surface for at least 1 minute.
 - f. To make a bleach solution, mix:
 - g. 5 tablespoons (1/3rd cup) bleach per gallon of room temperature water OR
 - h. 4 teaspoons bleach per quart of room temperature water
 - i. (iii) Bleach solutions will be effective for disinfection up to 24 hours.
 3. Alcohol solutions with at least 70% alcohol may also be used.
4. Soft surfaces:
- a. Reduce the number of these items as much as possible around campus.
 - b. Remove area rugs and decorative pillows from dorms.
 - c. For soft surfaces such as carpeted floors, bean bag chairs
 - i. Clean the surface using soap and water or disinfectants appropriate for use on these surfaces.
 - ii. Launder items (if possible) according to the manufacturer's instructions. Use the warmest appropriate water setting and dry items completely.
 - iii. Vacuum as usual.
 1. Use a vacuum equipped with a high-efficiency particulate air (HEPA) filter.

2. Do not vacuum in space that is occupied.
 3. When students vacuum, they should wear a mask
5. Electronics
 - a. For electronics, such as tablets, touch screens, keyboards, AND remote controls, clean/disinfect prior to use.
 - b. Follow the manufacturer's instructions for cleaning and disinfecting.
 - i. If no guidance, use alcohol-based wipes or sprays containing at least 70% alcohol. Dry surface thoroughly.
 6. Laundry:
 - a. Routine:
 - i. Provide disposable gloves, and hand sanitizer in each laundry space.
 - ii. Signage:
 1. Guidance on proper laundry procedures
 2. For clothing, towels, linens, and other items
 3. Launder items according to the manufacturer's instructions. Use the warmest appropriate water setting and dry items completely.
 7. Cleaning and disinfecting outdoor areas.
 - a. Outdoor areas generally require normal routine cleaning but do not require disinfection.
 - b. High touch surfaces made of plastic or metal, such as grab bars and railings, should be cleaned routinely.
 - c. Cleaning and disinfection of wooden surfaces or groundcovers are not recommended.
 - d. Sidewalks and roads should not be disinfected.
 - e. Alternative disinfection methods
 - i. The efficacy of alternative disinfection methods, such as ultrasonic waves, high-intensity UV radiation, and LED blue light against COVID-19 virus is not known.
 - ii. EPA does not routinely review the safety or efficacy of pesticidal devices, such as UV lights, LED lights, or ultrasonic devices. Therefore, EPA cannot confirm whether, or under what circumstances, such products might be effective against the spread of COVID-19.
 - iii. CDC does not recommend the use of sanitizing tunnels. There is no evidence that they are effective in reducing the spread of COVID-19. Chemicals used in sanitizing tunnels could cause skin, eye, or respiratory irritation or damage.
 - iv. CDC only recommends the use of the [surface disinfectants identified on List N](#) against the virus that causes COVID-19.

7. Cleaning and Disinfecting Schedules

- a. Schedule: Reopening
 - i. If the space has been cleaned, and unoccupied for 7 days or more, it will only need normal routine cleaning to reopen the area.
 - 1. Maintenance responsibility
- b. Schedule: Routine/Daily
 - i. Faculty/Staff:
 - 1. Clean and disinfect shared areas and frequently touched surfaces using EPA-registered disinfectants at the end of each class period, end of the workday, or at the end of using any space.
 - ii. Maintenance:
 - 1. Clean obviously dirty surfaces. Disinfect all surfaces using EPA-registered disinfectant daily.
 - 2. Bathrooms: cleaned daily
 - 3. Continue regular Maintenance cleaning schedules.
 - iii. Kitchen Staff:
 - 1. Continue existing practices for Cleaning, Disinfecting, and Sanitizing.
- 8. Signage:
 - a. Signage supporting the cleaning and disinfecting policies will be distributed across campus.

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

- 1. Cleaning and Disinfecting:
 - a. Depending on where the COVID-19 case is on campus, will determine the cleaning and disinfecting requirements. For example, we would utilize the services of an outside company if the positive case is part of the kitchen staff since that area has strict cleaning and disinfecting requirements.
 - b. Products used for routine cleaning are to be used with a COVID-19 positive case.
 - i. Initial training provided to Maintenance staff. If the need arises, prior to beginning the cleaning/disinfecting process for a COVID-19 case, Health Services staff will meet with the Maintenance team to review processes and procedures.
 - c. Someone is sick (non-quarantine/isolation location)
 - i. Close off areas used by the person who is sick.
 - ii. Open outside doors and windows to increase air circulation in the area.
 - iii. Wait 24 hours before you clean or disinfect. If 24 hours is not feasible, wait as long as possible.
 - iv. Once an area has been appropriately disinfected, it can be opened for use.
 - 1. Persons without close contact with the person who is sick can return to work immediately after disinfection.
 - v. If more than 7 days since the person who is sick visited or used the facility, additional cleaning and disinfection is not necessary
 - 1. Continue routine cleaning and disinfection.
 - 2. Vacuum the space if needed.

3. Use a vacuum equipped with a high-efficiency particulate air (HEPA) filter.
 4. Do not vacuum a room or space that has people in it. Wait until the room or space is empty to vacuum, such as at night, for common spaces, or during the day for private rooms.
- d. Quarantine and Isolation Areas
- i. The person who is in quarantine/isolation will stay separated from other people and be responsible for cleaning their space.
 1. Separate bedroom and bathroom
 - a. Clean the area around the person who is sick when needed.
 2. Shared bathroom
 - a. Clean and disinfect after each use, done by the sick individuals.
 - ii. Once quarantine/isolation is vacated, wait 24 hours (if possible) and then clean/disinfect the entire space.
 1. Maintenance responsibility:
 - a. Cleaning will be done wearing disposable coveralls, gloves, and a mask
 - b. Follow Cleaning/Disinfecting guidelines outlined for Cleaning and Disinfecting hard and soft surfaces, electronics, and laundry.
 2. Laundry
 - a. Sick Individual:
 - i. Wear disposable gloves when handling dirty laundry from a person who is sick.
 - ii. Dirty laundry from a person who is sick can be washed with other people's items
 1. Do not shake dirty laundry
 2. Clean and disinfect clothes hampers
 3. Remove gloves, wash hands immediately.

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

1. Personal Protective Equipment (gloves, goggles, masks, face shields) must not be shared.
2. 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 using the products supplied in the cleaning kit for each work area.
3. Sharing of vehicles will be minimized to the extent feasible, and high-touch points (for example, steering wheel, door handles, seat belt buckles, armrests, shifter, etc.) will be disinfected between users using the cleaning supplies in the cleaning kit in the workspace.

Hand sanitizing

Implementation of effective hand sanitizing procedures:

1. Community-wide promotion and enforcement for washing hands, avoiding contact with one's eyes, nose, and mouth, and covering coughs and sneezes. Proper Handwashing technique

discussed and demonstrated. In-person education has occurred which has been reinforced with written and recorded materials. Continuing in-person education with all new hires during orientation by Health Services staff.

2. Touchless soap dispensers in all bathrooms.
3. Increased the number of hand sanitizer stations throughout campus. Outside of every classroom, dining commons, dorms, theatre, and main office. Only using hand sanitizer that is at least 60% ethyl alcohol.

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

1. 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.
2. 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.
3. We provide and ensure the 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 our internal Besant Hill COVID-19 Investigation tool.

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

1. Tested on campus by Health Services staff when possible, if not, the employee will be sent to the closest available Ventura County testing facility.
 - a. The testing is at no cost to the employee
2. An investigation and contact tracing will be started by members of the Reopening Committee and reported to Ventura County Public Health using the appropriate methodology.

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:

1. The current system for communicating with employees may take one of several forms, depending upon the severity of the situation and the requirements for keeping information confidential.:
 - a. Face to face communication
 - b. Telephone call or text messaging
 - c. Email - either individual or group
 - d. Group face-to-face communication either in person or by web conference

2. Employees will report COVID-19 symptoms or potential close contacts to their immediate supervisor. If the immediate supervisor is not available, they may report to the Health Services Office or Administration
 - a. Testing of these individuals may be done on campus, by a personal physician or at a Ventura County Health Department testing site location
 - b. Information about these options will be given to the employee. If not on campus, it is best to have the employee go to an outside location as to not expose any members of the Besant Hill community.
 - c. Employees will be informed by the Health Services Office about the ramifications of symptoms, or close contact with a positive individual, including potential quarantine and isolation.
3. Employees should report any COVID -19 potential hazards to their immediate supervisor or any member of the Besant Hill Reopening Committee.
4. Communicating COVID -19 symptoms, contact, or potential hazards will always be without reprisal to the employee.
5. Any employee with a medical or other condition that puts them at increased risk of severe COVID-19 will report this to the Administration without fear of reprisal. When possible, given the type of job the employee performs, accommodations will be made.
6. The Besant Hill Covid-19 Safety Plan as well as the Reopening Plan for Ventura County is available to all employees by request or on the website.

In the event we are required to provide testing because of 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 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. Will be provided to the exposed employees

Training and Instruction

We have provided effective training and instruction that includes:

1. Written, recorded, and in-person training
2. What SARS-CoV2 and Covid-019 is, how the virus is transmitted (including asymptomatic spread), mitigation strategies, the school protection plan, use of PPE, hand Hygiene, physical distancing, use of face masks, cleaning/disinfecting responsibilities, procedures, and schedules
3. Our COVID-19 policies and procedures to protect employees from COVID-19 hazards.
4. Encouraged staff to come forward regarding concerns they have regarding engaging in the school community. If an employee comes forward, information on employer and government-sponsored leave benefits staff may be entitled to will be made available and discussed.
5. Any community member who has symptoms of COVID-19 has been educated NOT to come to work. Any community member who is not feeling well must contact their immediate supervisor, the Health Office, or Administrator on Duty.
6. Mitigation strategies such as physical distancing of at least six feet and the importance of combining physical distancing with the wearing of face coverings.
 - a. Proper type and use of face coverings

7. The importance of frequent handwashing 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.

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:

1. Ensuring that COVID-19 cases are excluded from the workplace until our return-to-work requirements are met and they have received a return to work document from the Ventura County Health Department
2. Excluding employees with COVID-19 exposure from the workplace for 14 days after the last known COVID-19 exposure to a COVID-19 case.
3. Continuing and maintaining an employee's earnings, seniority, and all other employee rights and benefits whenever we've demonstrated that there is a COVID-19 exposure whether work-related or not. This will be accomplished by paying employees their normally scheduled wages, currently exceeding the provisions of the FFCRA.
4. Providing employees at the time of exclusion with information on available benefits. All employee notices have been clearly communicated and we have posted these provisions in writing in three locations on campus, the main office, kitchen, and maintenance office. These employee rights are posted in both English and Spanish.

Reporting, Recordkeeping, and Access

It is our policy to:

1. 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.
2. 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.
3. Maintain records of the steps taken to implement our written COVID-19 Prevention Program in accordance with CCR Title 8 section 3203(b).
4. Make our written COVID-19 Prevention Program available at the workplace to employees, authorized employee representatives, and representatives of Cal/OSHA immediately upon request.
5. Use State of California's SPOT tool to record and keep track of all COVID-19 cases as required.
 - a. The information will be made available to employees, authorized employee representatives, or as otherwise required by law, with personal identifying information removed.
6. Using an internal tracking tool for all issues surrounding Covid -- staff who call in sick and what transpired, community contact that has not impacted school, etc.

Return-to-Work Criteria

1. COVID-19 cases with COVID-19 symptoms will not return to work until all the following have occurred:
 - a. At least 24 hours have passed since a fever of 100.4 or higher has resolved without the use of fever-reducing medications.
 - b. COVID-19 symptoms have improved.
 - c. At least 10 days have passed since COVID-19 symptoms first appeared.
2. COVID-19 cases who tested positive but never developed COVID-19 symptoms will not return to work until a minimum of 10 days has passed since the date of specimen collection of their first positive COVID-19 test.
 - a. A negative COVID-19 test will not be required for an employee to return to work.
3. 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.

Appendix A: Identification of COVID-19 Hazards

All persons, regardless of symptoms or negative COVID-19 test results, will be considered potentially infectious. Particular attention will be paid to areas where people may congregate or come in contact with one another, regardless of whether employees are performing an assigned work task or not. For example meetings, entrances, bathrooms, hallways, aisles, walkways, dining commons, common areas, and waiting areas.

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, visitors, members of the public, students, and families. We will consider how employees and other persons enter, leave, and travel through the workplace, in addition to addressing fixed work locations.

Person(s) conducting the initial evaluation:

2020-2021 Besant Hill Reopening Committee Members

Date:

June - October 2020

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

Alex Smith, Portia Johnson, Megan Walton, Cindy Gagnon, Claire Lowndes, Anh-Dao Tran, Juana Juarez

Interaction, area, activity, work task, process, equipment and material that potentially exposes employees to COVID-19 hazards	Places and times	Potential for COVID-19 exposures and employees affected, including members of the public and employees of other employers	Existing and/or additional COVID-19 prevention controls, including barriers, partitions and ventilation
Dormitory Common Space	All days, varying times	Intermittent potential for interaction	<ul style="list-style-type: none">• PPE required and readily available• MERV-13 filters installed in Dormitory HV/AC system• non-permeable chairs clearly marked and spaced 6' apart

			<ul style="list-style-type: none"> Limited numbers of students per supervisor
Dining Spaces (Cafeteria & Outdoor dining tables)	All days, varying times	Intermittent potential for interaction	<ul style="list-style-type: none"> Masks required at all times other than while eating Hand sanitization, symptom check, and temperature taken at the entrance for each meal Plexiglass dividing partitions affixed to all tables to limit seating and exposure Access to individually wrapped items Serving line protected by plexiglass barriers PPE required by all dining personnel Tables disinfected after each use Disposable dishes and flatware at all meals Common drink dispensers removed Clearly marked one-way pattern for traffic flow
Student Affairs Offices	All days, varying time	Intermittent potential for interaction	<ul style="list-style-type: none"> Office space reassigned to allow for greater physical distancing Marked pattern for both traffic flow and designated waiting spots

Classrooms	All days, varying time	Intermittent potential for interaction	<ul style="list-style-type: none"> • PPE required and readily available • Non-permeable, individual desks clearly marked and spaced 6' apart • Limited numbers of students per supervisor • All classrooms have noted maximum occupancy • Marked traffic flow for entering and exiting rooms • Extended passing periods between classes for sanitization
Theater	All days, varying time	Intermittent potential for interaction	<ul style="list-style-type: none"> • PPE required and readily available • Theater seats strategically blocked for 6' distancing • Maximum occupancy reduced and clearly noted • Marked traffic flow for entering and exiting • MERV-13 filters installed in theater HV/AC system • Disinfectant solution, gloves, disposable masks and paper towels are available and required to be used between activities
Weight Room	All days, varying time	Intermittent potential for interaction	<ul style="list-style-type: none"> • Masks required • Limited to 2 students at a time

			<ul style="list-style-type: none"> • Hand sanitizing station prior to entering and upon exiting • Disinfectant solution, gloves, disposable masks and paper towels are available
Signage	Varying locations, permanent posting	N/A	<ul style="list-style-type: none"> • We identified the need for educational signage to support hygiene practices including hand washing procedure, hand sanitization, physical distancing, and traffic flows • Necessary signage is posted throughout the campus

Appendix B: COVID-19 Inspections

When Besant Hill School was creating the Reopening Plan for Ventura County during the summer of 2020, we inspected the entire campus specifically looking for COVID-19 hazards. Once the Inspections were performed, then procedures were put in place to address potential hazards.

Date: Summer 2020

Name of person conducting the inspection:

- Alex Smith
- Portia Johnson
- Megan Walton
- Claire Lowndes
- Anh-Dao Tran
- Carissa Fenney
- Sarah Stevens
- Jesse Johnson
- Wade Lyle

Work location evaluated: Entire Physical Campus

Exposure Controls	Status	Person Assigned to Correct	Date Corrected
Engineering			
Barriers/partitions	Partitions installed on Indoor and Outdoor Dining tables.	Cindy Gagnon	Summer 2020
Ventilation (amount of fresh air and filtration maximized)	Filters replaced with MERV-13 filters. Outside consultant brought in to assist in strategies to increase the efficiency of current systems	Jesse Johnson and Wade Lyle	Summer 2020
Dining Services	<p>Dining Services now responsible for plating food and handing it to employees. Self-service items are individually contained. Staggered meal times to limit the number of people in Dining Commons space.</p> <p>Dining tables are disinfected after each use</p>	Reopening Committee and Dining Services Staff	Summer of 2020 and on-going
Transportation			

Barriers/Partitions	Partitions installed in two vans that may be used to transport students to appointments, airport in order to protect the driver from aerosols	Cindy Gagnon	Summer 2020
Vehicle Usage Reduce transportation of students to medical appointments, emergencies, or airport	Must use vehicles with partitions unless an emergency situation where that is not possible All occupants of the vehicle will have on face masks. Individuals need to sit as far apart from one another as possible in the vehicle (staggered seating)	Megan Walton and Kim Reichenbach	Summer 2020
Administrative			
Physical distancing	<p>(1) All staff and students instructed that at least 6 feet of physical distancing required., regardless of face mask usage</p> <p>(2) Visual indicators used in high traffic areas indicating 6-foot distances</p> <p>(3) Signage used throughout campus reminding personnel of</p>	Besant Hill Reopening committee	Summer 2020

	<p>physical distancing requirements</p> <p>(4) Seats in Zalk Theatre are marked off to allow one individual every 6 feet.</p>		
Surface cleaning and disinfection (frequently enough and adequate supplies)	All classrooms, Main Office, Student Affairs, Theatre are equipped with cleaning kits for cleaning and disinfecting after each class. Maintenance staff continues routine cleaning schedule	Cindy Gagnon	Summer 2020
Handwashing facilities	Updated to non-touch dispensers in most shared spaces	Maintenance Department	Summer 2020
Disinfecting and hand sanitizing solutions	Added hand sanitizer stations throughout campus, outside of each classroom, each office building, outside each dorm, inside and outside of dining commons	Maintenance Department	Summer 2020
Traffic Flow through campus	Visual indicators throughout campus indicating the preferred traffic flow in order to decrease the number	Reopening Committee	Summer 2020

	of persons in any area at any one time		
Mandatory Influenza vaccine	All staff and students in order to decrease the incidence of Influenza on campus	Administration	Fall 2020
Closed campus	Front gates are kept closed and campus is accessible to only those who are invited.	Administration	Summer 2020
Personal Protective Equipment			
Face coverings	Employees may wear their own face masks which must be cleaned often and in good condition, or the school will provide them for free. Only well-fitting, face masks may be worn, no gaiters or bandanas. Face masks are to be worn indoors and outdoors and may only be removed while eating or drinking.	Administration	
Gloves	Gloves are to be worn whenever there is a chance of having hands come in contact with bodily fluids or	Administration	Summer 2020

	disinfectants where the label states gloves are to be used		
Face shields/goggles	<p>(1)Face Shields are available for staff requesting them. However, they are to be worn in addition to face masks. If an employee cannot use a face mask secondary to a medical condition, Face Shields with a drape must be use</p> <p>(2)Face Shields are to be worn when performing test collection Goggles are to be used when handling disinfectants where the manufacturers label states goggles must be worn</p>	Administration	Summer 2020
Respiratory protection	<p>(1)N95 masks are available for staff performing test collection activities or when in circumstances where 6 foot physical distancing cannot be observed for more than 15 minutes.</p> <p>(2)Employees with Health Conditions requiring N95 masks</p>	Administration	Summer 2020

	will be provided the masks at no cost to the employee		
Gowns, Coveralls and Foot Coverings	<p>(1)Gowns must be worn by staff collecting test specimens or when caring for a COVID-19 positive individual</p> <p>(2)Coveralls and foot coverings to be used by staff when deep cleaning and disinfecting in a space where a confirmed case was residing</p>	Administration	

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.

As January 14, 2021, we are required to do case investigation in the SPOT tool created by the State of California to assist with contract tracing and case investigation activities.

Besant Hill School has created our own Covid case investigation tool, which can be found here: [vid](#)
Investigation forms are located in the Besant Hill Health Office:

Date:		Person Conducting investigation		Is this case linked to any other on the				
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				school campus?				
		Employee/Non-employee name						
		Occupation:						
		Location of work						
		Date Investigation Initiated						
		Covid Test Offered?		Date/Time of Results		Results:		
		Date/time Covid case last in the workplace?						
		Date Covid case had symptoms?		VCPH notified?		VCPH Contact		
Investigation Details:								

Close Contacts Identified and Notified:		Name:	Work Area	Date:	How:			
What work place condition s contribut ed to the risk of COVID-19 exposure ?			What could have been done to reduce exposure to Covid 19?					
Notes:								

Appendix D: COVID-19 Training:

August 21, 2020:

All staff on-line webinar was held to educate the adult community to the Besant Hill School reopening plan.

Topics discussed:

- Covid Transmission and Mitigation strategies
- Personal Protective equipment
- Cleaning/Disinfecting responsibilities and schedules
- Face Mask, Physical distancing, Hand Hygiene requirements
- Testing schedules and requirements
- Hazard Identification and Reporting

August 25, 2020:

Faculty and Residential staff walk-around with Maintenance Staff.

Topics Discussed:

- Signage, Physical Distancing markings in Classrooms and around campus
- Plexiglass partitions in Dining Commons and staggered meal times
- Hand Sanitizing stations, touchless thermometers

Additional Consideration #1: (see separate document)
Multiple COVID-19 Infections and COVID-19 Outbreaks

Additional Consideration #2: (see separate document)
Major COVID-19 Outbreaks

Additional Consideration #3: (not applicable)
COVID-19 Prevention in Employer-Provided Housing

Additional Consideration #4: (not applicable)

COVID-19 Prevention in Employer-Provided Transportation to and from Work

§3380. Personal Protective Devices.

(a)(1) The terms "protection" and "protective" where modified by the words head, eye, body, hand, foot and as used in subsection (d), per the orders in this article mean the safeguarding obtained by safety devices and safeguards of the proper type for the exposure and of such design, strength and quality as to eliminate, preclude or mitigate the hazard.

(2) Personal protective equipment shall be approved for its intended use as provided in Section 3206 of these Orders.

(b) Protective equipment shall be distinctly marked so as to facilitate identification of the manufacturer.

EXCEPTION: Employer manufactured shields, barriers, etc.

(c) The employer shall assure that the employee is instructed and uses protective equipment in accordance with the manufacturer's instructions.

(d) The employer shall assure that all required safety devices and safeguards, whether employer or employee provided, including personal protective equipment for the eyes, face, head, hand, foot, and extremities (limbs), protective clothing, respiratory protection, protective shields and barriers, comply with the applicable Title 8 standards and are maintained in a safe, sanitary condition.

(e) Protectors shall be of such design, fit and durability as to provide adequate protection against the hazards for which they are designed. They shall be reasonably comfortable and shall not unduly encumber the employee's movements necessary to perform his or her work.

(f) Hazard assessment and equipment selection.

(1) The employer shall assess the workplace to determine if hazards are present, or are likely to be present, which necessitate the use of personal protective equipment (PPE). If such hazards are present, or likely to be present, the employer shall:

(A) Select, and have each affected employee use, the types of PPE that will protect the affected employee from the hazards identified in the hazard assessment;

- (B) Communicate selection decisions to each affected employee; and,
- (C) Select PPE that properly fits each affected employee.

NOTE: Non-mandatory Appendix A contains an example of procedures that would comply with the requirement for a hazard assessment.

(2) The employer shall verify that the required workplace hazard assessment has been performed through a written certification that identifies the workplace evaluated; the person certifying that the evaluation has been performed; the date(s) of the hazard assessment; and, which identifies the document as a certification of hazard assessment.

(3) Defective and damaged equipment. Defective or damaged personal protective equipment shall not be used.

(4) Training. The employer shall provide training to each employee who is required by this section to use PPE. Each such employee shall be trained to know at least the following:

- (A) When PPE is necessary;
- (B) What PPE is necessary;
- (C) How to properly don, doff, adjust, and wear PPE;
- (D) The limitations of the PPE; and,
- (E) The proper care, maintenance, useful life and disposal of the PPE.

(5) Each affected employee shall demonstrate an understanding of the training specified in subsection (f)(4) of this section, and the ability to use PPE properly, before being allowed to perform work requiring the use of PPE.

(6) When the employer has reason to believe that any affected employee who has already been trained does not have the understanding and skill required by subsection (f)(5) of this section, the employer shall retrain each such employee. Circumstances where retraining is required include, but are not limited to, situations where:

- (A) Changes in the workplace render previous training obsolete; or
- (B) Changes in the types of PPE to be used render previous training obsolete; or
- (C) Inadequacies in an affected employee's knowledge or use of assigned PPE indicate that the employee has not retained the requisite understanding or skill.

(7) The employer shall verify that each affected employee has received and understood the required training through a written certification that contains the name of each employee trained, the date(s) of training, and that identifies the subject of the certification.

(8) Subsections (f)(1) and (2) and (f)(4) through (7) of this section apply only to Sections 3381, 3382, 3384 and 3385 of these Orders. Subsections (f)(1) and (2) and (f)(4) through (7) of this section do not apply to Section 5144 of these Orders and Section 2940.6 of the High Voltage Electrical Safety Orders. Subsection (f) does not apply to workplace operations regulated by the Construction Safety Orders or the Mine Safety Orders.

§5144. Respiratory Protection.

Guide to Respiratory Protection at Work

(a) Permissible practice.

(1) In the control of those occupational diseases caused by breathing air contaminated with harmful dusts, fogs, fumes, mists, gases, smokes, sprays, or vapors, the primary objective shall be to prevent atmospheric contamination. This shall be accomplished as far as feasible by accepted engineering control measures (for example, enclosure or confinement of the operation, general and local ventilation, and substitution of less toxic materials). When effective engineering controls are not feasible, or while they are being instituted, appropriate respirators shall be used pursuant to this section.

(2) Respirators shall be provided by the employer when such equipment is necessary to protect the health of the employee. The employer shall provide the respirators which are applicable and suitable for the purpose intended. The employer shall be responsible for the establishment and maintenance of a respiratory protection program which shall include the requirements outlined in subsection (c).

(b) Definitions. The following definitions are important terms used in the respiratory protection standard in this section.

Air-purifying respirator means a respirator with an air-purifying filter, cartridge, or canister that removes specific air contaminants by passing ambient air through the air-purifying element.

Assigned protection factor (APF) means the workplace level of respiratory protection that a respirator or class of respirators is expected to provide to employees when the employer implements a continuing, effective respiratory protection program as specified by this section.

Atmosphere-supplying respirator means a respirator that supplies the respirator user with breathing air from a source independent of the ambient atmosphere, and includes supplied-air respirators (SARs) and self-contained breathing apparatus (SCBA) units.

Canister or cartridge means a container with a filter, sorbent, or catalyst, or combination of these items, which removes specific contaminants from the air passed through the container.

Demand respirator means an atmosphere-supplying respirator that admits breathing air to the facepiece only when a negative pressure is created inside the facepiece by inhalation.

Emergency situation means any occurrence such as, but not limited to, equipment failure, rupture of containers, or failure of control equipment that may or does result in an uncontrolled significant release of an airborne contaminant.

Employee exposure means exposure to a concentration of an airborne contaminant that would occur if the employee were not using respiratory protection.

End-of-service-life indicator (ESLI) means a system that warns the respirator user of the approach of the end of adequate respiratory protection, for example, that the sorbent is approaching saturation or is no longer effective.

Escape-only respirator means a respirator intended to be used only for emergency exit.

Filter or air purifying element means a component used in respirators to remove solid or liquid aerosols from the inspired air.

Filtering facepiece (dust mask) means a negative pressure particulate respirator with a filter as an integral part of the facepiece or with the entire facepiece composed of the filtering medium.

Fit factor means a quantitative estimate of the fit of a particular respirator to a specific individual, and typically estimates the ratio of the concentration of a substance in ambient air to its concentration inside the respirator when worn.

Fit test means the use of a protocol to qualitatively or quantitatively evaluate the fit of a respirator on an individual. (See also Qualitative fit test QLFT and Quantitative fit test QNFT.)

Helmet means a rigid respiratory inlet covering that also provides head protection against impact and penetration.

High efficiency particulate air (HEPA) filter means a filter that is at least 99.97% efficient in removing monodisperse particles of 0.3 micrometers in diameter. The equivalent NIOSH 42 CFR 84 particulate filters are the N100, R100, and P100 filters.

Hood means a respiratory inlet covering that completely covers the head and neck and may also cover portions of the shoulders and torso.

Immediately dangerous to life or health (IDLH) means an atmosphere that poses an immediate threat to life, would cause irreversible adverse health effects, or would impair an individual's ability to escape from a dangerous atmosphere.

Interior structural firefighting means the physical activity of fire suppression, rescue or both, inside of buildings or enclosed structures which are involved in a fire situation beyond the incipient stage. (See Article 10.1)

Loose-fitting facepiece means a respiratory inlet covering that is designed to form a partial seal with the face.

Maximum use concentration (MUC) means the maximum atmospheric concentration of a hazardous substance from which an employee can be expected to be protected when wearing a respirator, and is determined by the assigned protection factor of the respirator or class of respirators and the exposure limit of the hazardous substance. The MUC can be determined mathematically by multiplying the assigned protection factor specified for a respirator by the required OSHA permissible exposure limit, short-term exposure limit, or ceiling limit. When no OSHA exposure limit is available for a hazardous substance, an employer must determine an MUC on the basis of relevant available information and informed professional judgment.

Negative pressure respirator (tight fitting) means a respirator in which the air pressure inside the facepiece is negative during inhalation with respect to the ambient air pressure outside the respirator.

Oxygen deficient atmosphere means an atmosphere with an oxygen content below 19.5% by volume.

Physician or other licensed health care professional (PLHCP) means an individual whose legally permitted scope or practice (i.e., license, registration, or certification) allows him or her to independently provide, or be delegated the responsibility to provide, some or all of the health care services required by subsection (e).

Positive pressure respirator means a respirator in which the pressure inside the respiratory inlet covering exceeds the ambient air pressure outside the respirator.

Powered air-purifying respirator (PAPR) means an air-purifying respirator that uses a blower to force the ambient air through air-purifying elements to the inlet covering.

Pressure demand respirator means a positive pressure atmosphere-supplying respirator that admits breathing air to the facepiece when the positive pressure is reduced inside the facepiece by inhalation.

Qualitative fit test (QLFT) means a pass/fail fit test to assess the adequacy of respirator fit that relies on the individual's response to the test agent.

Quantitative fit test (QNFT) means an assessment of the adequacy of respirator fit by numerically measuring the amount of leakage into the respirator.

Respiratory inlet covering means that portion of a respirator that forms the protective barrier between the user's respiratory tract and an air-purifying device or breathing air source, or both. It may be a facepiece, helmet, hood, suit, or a mouthpiece respirator with nose clamp.

Self-contained breathing apparatus (SCBA) means an atmosphere-supplying respirator for which the breathing air source is designed to be carried by the user.

Service life means the period of time that a respirator, filter or sorbent, or other respiratory equipment provides adequate protection to the wearer.

Supplied-air respirator (SAR) or airline respirator means an atmosphere-supplying respirator for which the source of breathing air is not designed to be carried by the user.

Tight-fitting facepiece means a respiratory inlet covering that forms a complete seal with the face.

User seal check means an action conducted by the respirator user to determine if the respirator is properly seated to the face.

(c) Respiratory protection program. This subsection requires the employer to develop and implement a written respiratory protection program with required worksite-specific procedures and elements for required respirator use. The program must be administered by a suitably trained program administrator. In addition, certain program elements may be required for voluntary use to prevent potential hazards associated with the use of the respirator. The Small Entity Compliance Guide contains criteria for the selection of a program administrator and a sample program that meets the requirements of this subsection. Copies of the Small Entity Compliance Guide will be available from the Occupational Safety and Health Administration's Office of Publications, Room N 3101, 200 Constitution Avenue, NW, Washington, DC, 20210 (202-219-4667).

(1) In any workplace where respirators are necessary to protect the health of the employee or whenever respirators are required by the employer, the employer shall establish and implement a written respiratory protection program with worksite-specific procedures. The program shall be updated as necessary to reflect those changes in workplace conditions that affect respirator use. The employer shall include in the program the following provisions, as applicable:

- (A) Procedures for selecting respirators for use in the workplace;
- (B) Medical evaluations of employees required to use respirators;
- (C) Fit testing procedures for tight-fitting respirators;
- (D) Procedures for proper use of respirators in routine and reasonably foreseeable emergency situations;
- (E) Procedures and schedules for cleaning, disinfecting, storing, inspecting, repairing, discarding, and otherwise maintaining respirators;
- (F) Procedures to ensure adequate air quality, quantity, and flow of breathing air for atmosphere-supplying respirators;
- (G) Training of employees in the respiratory hazards to which they are potentially exposed during routine and emergency situations;
- (H) Training of employees in the proper use of respirators, including putting on and removing them, any limitations on their use, and their maintenance; and

(l) Procedures for regularly evaluating the effectiveness of the program.

(2) Where respirator use is not required:

(A) An employer may provide respirators at the request of employees or permit employees to use their own respirators, if the employer determines that such respirator use will not in itself create a hazard. If the employer determines that any voluntary respirator use is permissible, the employer shall provide the respirator users with the information contained in Appendix D to this section ("Information for Employees Using Respirators When Not Required Under the Standard"); and

(B) In addition, the employer must establish and implement those elements of a written respiratory protection program necessary to ensure that any employee using a respirator voluntarily is medically able to use that respirator, and that the respirator is cleaned, stored, and maintained so that its use does not present a health hazard to the user. Exception: Employers are not required to include in a written respiratory protection program those employees whose only use of respirators involves the voluntary use of filtering facepieces (dust masks).

(3) The employer shall designate a program administrator who is qualified by appropriate training or experience that is commensurate with the complexity of the program to administer or oversee the respiratory protection program and conduct the required evaluations of program effectiveness.

(4) The employer shall provide respirators, training, and medical evaluations at no cost to the employee.

d) Selection of respirators. This subsection requires the employer to evaluate respiratory hazard(s) in the workplace, identify relevant workplace and user factors, and base respirator selection on these factors. The subsection also specifies appropriately protective respirators for use in IDLH atmospheres, and limits the selection and use of air-purifying respirators.

(1) General requirements.

(A) The employer shall select and provide an appropriate respirator based on the respiratory hazard(s) to which the worker is exposed and workplace and user factors that affect respirator performance and reliability.

(B) The employer shall select a NIOSH-certified respirator. The respirator shall be used in compliance with the conditions of its certification.

(C) The employer shall identify and evaluate the respiratory hazard(s) in the workplace; this evaluation shall include a reasonable estimate of employee exposures to respiratory hazard(s) and an identification of the contaminant's chemical state and physical form. Where the employer cannot identify or reasonably estimate the employee exposure, the employer shall consider the atmosphere to be IDLH.

(D) The employer shall select respirators from a sufficient number of respirator models and sizes so that the respirator is acceptable to, and correctly fits, the user.

(2) Respirators for IDLH atmospheres.

(A) The employer shall provide the following respirators for employee use in IDLH atmospheres:

1. A full facepiece pressure demand SCBA certified by NIOSH for a minimum service life of thirty minutes, or
2. A combination full facepiece pressure demand supplied-air respirator (SAR) with auxiliary self-contained air supply.

(B) Respirators provided only for escape from IDLH atmospheres shall be NIOSH-certified for escape from the atmosphere in which they will be used.

(C) All oxygen-deficient atmospheres shall be considered IDLH.

Exception: If the employer demonstrates that, under all foreseeable conditions, the oxygen concentration can be maintained within the ranges specified in Table II (i.e., for the altitudes set out in the table), then any atmosphere-supplying respirator may be used.

(3) Respirators for atmospheres that are not IDLH.

(A) The employer shall provide a respirator that is adequate to protect the health of the employee and ensure compliance with all other OSHA statutory and regulatory requirements, under routine and reasonably foreseeable emergency situations.

1. Assigned Protection Factors (APFs) Employers must use the assigned protection factors listed in Table 1 to select a respirator that meets or exceeds the required level of employee protection. When using a combination respirator (e.g., airline respirators with an air-purifying filter), employers must ensure that the assigned protection factor is appropriate to the mode of operation in which the respirator is being used.

