CITY OF LOS ANGELES
COVID-19
WORKPLACE SAFETY STANDARDS

Revised October 3, 2022
INTRODUCTION

The City’s COVID-19 Workplace Safety Standards are established for the health and safety of its employees, contractors, and the public against the novel Coronavirus of 2019 (COVID-19).

These Standards will be periodically revised, if needed, to reflect applicable COVID-19 requirements and/or guidance from sources such as:

- State Executive Orders (Governor’s Executive Orders)
- California Division of Occupational Safety and Health (Cal/OSHA)*
- California Labor Code
- California Public Health Officer Orders and guidance (California DPH)
- Los Angeles County Department of Public Health (LA County DPH)
- City ordinances
- City memoranda
- Centers for Disease Control and Prevention (CDC)

*For COVID-19 prevention, City departments are subject to the requirements set forth by the Cal/OSHA COVID-19 Prevention Emergency Temporary Standards (ETS) unless the department’s operation is covered by Cal/OSHA Aerosol Transmissible Diseases (ATD) Standard. Such departments/operations must also consult those regulations for additional applicable requirements that are not covered herein.

Status. Based on the CDC indicators and thresholds, on September 02, 2022, the CDC moved LA County into the Low Community Level for severe illness in the community from COVID-19, reflecting minimal stress on the hospital system in LA County associated with COVID-19. Per CDC, many people in the United States have some protection, or immunity, against COVID-19 due to vaccination, previous infection, or both. This immunity, combined with the availability of tests and treatments, has greatly reduced the risk of severe illness, hospitalization, and death from COVID-19 for many people.

Per LA County, “Local health jurisdictions may implement additional protective measures based upon local conditions.”

With decreasing numbers of case positivity in LA County, the City is revising its safety standards.

For department questions about COVID-19 Workplace Safety Standards, you may email: per-covid-safetystandards@lacity.org
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1. **COVID-19 VACCINATION**

**UPDATE.**
LA County DPH requires employees who work in High-Risk Settings and who are currently eligible for a COVID-19 booster vaccination, receive their booster dose no later than March 1, 2022. (This includes emergency medical technicians (EMTs), EMT-paramedics.) Employees not yet eligible for a booster must receive a booster within 15 days of becoming eligible for receiving one.

As of February 25, 2022, LA County DPH aligned with [State Health Officer's Health Care Worker Vaccine Requirement Order](#) which allows for workers with completed primary series vaccination and recent infection to defer booster dose by up to 90 days from date of first positive test or clinical diagnosis, which may extend the booster dose requirement beyond March 1st. Workers with a deferral due to a proven COVID-19 infection must receive their booster dose no later than 15 days after the expiration of their deferral.

For a detailed list of “workers” under this Order, see: [Health Care Worker Vaccination Requirement (LA County DPH Health Officer Order).pdf](#)

1.1 **COVID-19 Vaccination.** All employees must be fully vaccinated for COVID-19, or have an approved medical or religious exemption.

1.2 **Boosters.** Booster shots for the COVID-19 vaccines may be required in accordance with guidance provided by the CDC, federal Food and Drug Administration (FDA), California DPH, LA County DPH and/or any other medical entity that provides health and safety guidance.

1.3 **Tracking and Verification.** The City will treat all vaccination tracking data and verification records as confidential. Each City department will have its employees upload vaccination records to a secured and confidential database maintained by a third party administrator selected by the City. Designated Human Resources and confidential staff (e.g., Medical Services Division Administrator) may review vaccination records, mobile vaccination verifications, and/or medical provider documentation and attest through a secured database entry, to the status of an employee as fully vaccinated.

1.4 **Disclosure.** All employees, including employees who have been granted an exemption or deferment, must report their vaccination status.

1.5 **Non-Discrimination.** Departments will not discriminate against or harass employees or job applicants on the basis of a protected characteristic; the department in working with designated Human Resources will provide reasonable accommodations related to disability or sincerely-held religious beliefs or practices; and will not retaliate against
anyone for engaging in protected activity (such as requesting a reasonable accommodation).

1.6 **Public Entry into City Facilities.** Per City ordinance, proof of a COVID-19 vaccination for individuals 12 years of age or older is required to enter an indoor portion of a City facility. Alternatively, visitors may show proof of a negative PCR or antigen COVID-19 test conducted within 72 hours before entry.

2. **FACE COVERINGS**

**UPDATE.** At the time of this updated document, LA County DPH Health Officer Order (HOO) entitled, “Responding Together At Work and in the Community,” dated September 22, 2022 highlighted the following changes:

- “Revised to strongly recommend, but no longer require, masking for all persons using public transit or at indoor transportation hubs. Transit agencies may elect to continue requiring masking.
- Revised to align with the State Public Health Officer’s September 20, 2022 guidance regarding masking in the following high-risk settings: correctional facilities, homeless shelters, emergency shelters, and cooling and heating centers.
- Continues to require masking at all indoor healthcare settings.”

“Per LA County, the changes to this HOO was based on, “evidence that the County of Los Angeles has receded to a Low COVID-19 Community Level as determined by the CDC and receded to a weekly rate of current COVID-19 transmission that is below 100 new cases per 100,000 people. Public Health continues urging individuals to continue taking common sense precautions, such as, being up to date on their vaccinations, including obtaining the Fall 2022 bivalent COVID-19 booster; that persons at elevated risk for severe illness continue to mask at indoor public spaces, that persons continue to mask at indoor transportation hubs and while on public transportation, including ride shares and shuttles; test prior to gathering with others who are at an elevated risk for severe illness; and increase ventilation at indoor settings.”

“Regardless of the CDC’s COVID-19 Community Level, employers are required to offer well-fitting medical masks and respirators, such as an N95, KN95 or KF94, at no cost to their employees who work indoors and have contact with other workers, customers, or members of the public, or in vehicles with more than one person. Respirators must be offered at no cost to workers in indoor settings where customers may spend time unmasked.”

“In workplaces, employers and employees are subject to either the Cal/OSHA COVID-19 Emergency Temporary Standards or the Cal/OSHA Aerosol Transmissible Diseases Standard and should consult those regulations for additional applicable requirements.”
The City is updating its face covering standards at the workplace as follows. **In most workplace settings including indoor public transit and transportation hubs face coverings are no longer required and are optional with few exceptions listed below.** In settings where face coverings are no longer required or optional, to protect those persons at elevated risk for severe health outcomes due to COVID-19 infection, the City strongly recommends using face coverings. This face covering requirement may be changed or be updated as regulations change or as conditions warrant.

2.1 **Face coverings are still required in the following settings and conditions.** All employees, regardless of vaccination status, previous infection, or lack of symptoms, are **required** to wear clean and undamaged face coverings (any of the following are acceptable: a well-fitting medical grade mask, surgical mask, or higher level respirator such as N95, KN95, KF94 - for more information see Definitions section) that fit snugly over the nose, mouth, and chin with no large gaps on the outside of the face in the following workplace settings and conditions:

(a) **Specific Higher Risk Settings.**
   (i) Healthcare and congregate care (such as long-term care & adult/senior care facilities) indoor settings. A well-fitting medical mask or respirator that covers their mouth and nose are **required** for all individuals regardless of vaccination status while working indoors with others and in vehicles with more than one person in the following settings:
   - Healthcare settings (applies to all healthcare settings including those that are not covered by the [State Health Officer Order issued on July 26, 2021](#))
   - Long Term Care Settings & Adult and Senior Care Facilities

(ii) Local correctional facilities and detention centers settings.

(iii) For these other specified high-risk settings - homeless shelters, emergency shelters and cooling centers - the following CDC Community Levels determine the masking requirements:
   - When the CDC COVID-19 Community Levels are **low**: face coverings are optional and not required in non-clinical settings and when there have been no outbreaks (defined as three suspected, probable, or confirmed COVID-19 cases within a 14-day period among epidemiologically linked residents and/or staff) in the entire facility or within separated, closed sub units that do not allow for mixing of those residents with the general population.
   - When the COVID-19 Community Level is **medium or high**:......
Facilities must maintain or reinstate universal masking for all staff and residents, regardless of if there are no outbreaks within the facility.

**Clinical Areas.** Universal masking of all staff and residents, regardless of vaccination status and Community Level, is **required** in all clinical areas (or when any healthcare is being delivered), including isolation and quarantine areas, or any other areas that are covered by other specified high-risk settings.

(b) **During Outbreaks.**
- *non-major outbreaks* - all employees in the exposed group when indoors, or when outdoors and less than six feet from another person unless an exception applies;
- *major outbreaks* - all employees, regardless of vaccination status, must be offered respirators to use on a voluntary basis; where respirators are not worn, employees in the exposed group must be separated from other persons by at least six feet where feasible;

(c) **Early Exit of Isolation or Quarantine (both indoor and outdoor)** - employees who have exited isolation or quarantine early must follow the indoors masking above but must also wear a mask outdoors while around people for 10 days following symptom on-set or positive test if no symptoms or after the exposure after the employee’s isolation or quarantine period;

(d) **COVID-19 Rebound Case** - employees who ended their isolation period and begin to have symptoms again 2 - 8 days after the isolation period ended or after testing positive again must wear a mask both indoors and outdoors while around people for 10 days following the start of rebound. Per LA County DPH, COVID-19 rebound is when people with COVID-19 get better, then begin to have symptoms 2-8 days after they have recovered; they may also test positive again;

(e) **Other** - In any other location where masking/face covering is the policy of the facility, business or venue; and

(f) **Agency Orders** - when the California DPH and LA County DPH require more stringent measures than these Standards listed above in this section (a-e).

2.2 **When a face covering is required** (per section 2.1 **Face Coverings**) to be worn in the workplace, in settings and conditions listed above (see sub-sections a-f above), employees are allowed to take off face covering when:

(a) **Alone in a room and vehicles.** While alone in a separate room, office or interior space and in vehicles where a face covering is required;

(b) **Actively eating/drinking indoors.** While actively eating or drinking indoors, provided a physical distance of six (6) or more feet from other individuals is maintained in locations and situations where a face covering is required;
(c) **Specific Tasks.** When specific tasks as determined by local, state, or federal regulators or workplace safety guidelines that cannot be feasibly performed with a face covering (or alternative) and are required to be worn as outlined above (in Section 2.1) This exception is limited to the period of time in which such tasks are actually being performed. Employees who cannot feasibly wear a mask while performing their work, must be tested for COVID-19 at least weekly. Such testing is to be conducted during paid time and at no cost to the employee;

(d) **Accommodation.** If employees qualify for an accommodation related to a medical or a mental health condition, or a documented religious exemption, or if a particular disability, or who are hearing-impaired or communicating with a hearing-impaired person prevents them from wearing a face covering when face coverings are required to be worn as outlined above (in Section 2.1).

(i) Employees who qualify for such exemptions as listed above must wear an effective non-restrictive alternative, such as a face shield with a drape on the bottom or a clear mask or cloth masks with a clear plastic panel that fit well are an alternative type of mask for people who interact with: people who are deaf or hard of hearing, children or students learning to read, people learning a new language, and people with disabilities, so long as their condition or disability permits it.

(ii) In the event an employee is unable to wear an alternative type of face covering, that employee must undergo weekly testing for COVID-19, and such testing be conducted during paid time and at no cost to the employee. Employees in this category whose medical condition prevents them from wearing a mask or an alternative type of face covering, as it could obstruct breathing or who could be unconscious, incapacitated, or otherwise unable to remove a mask without assistance, will be engaged in an interactive accommodation discussion with Human Resources.

2.3 **Enhanced Face Coverings.** Departments must provide high quality and well-fitting masks and respirators to employees when required as outlined above in Section 2.1.

2.4 **Voluntary Use of Face Coverings.** Regardless of vaccination status, employees have the option of voluntarily wearing a face covering that is acceptable in the workplace, when not required by these safety Standards or by an applicable Public Health Order. Upon request by an employee, in workplace indoor settings where masking is recommended, but not required, departments must provide, for voluntary use, well-fitting medical masks and respirators, such as an N95, KN95 or KF94, at no cost to their employees who work indoors and have contact with other workers, customers, or members of the public, or in vehicles with more than one person. Employees can request face coverings from their employing department at no cost to the employee and without fear of retaliation. No one can be prevented from wearing a mask to participate in an activity or enter a business.
2.5 **Respirators**

Upon request, regardless of vaccination status departments must provide a NIOSH-approved respirator (such as an N95) to employees who are working indoors or in vehicles with more than one person for voluntary use in compliance with Cal/OSHA's Respiratory Protection Standard, subsection Title 8 CCR, §5144(c)(2) at no cost. Such requests can be made by employees without fear of retaliation. Departments may also permit workers to voluntarily use their own respirators, such as N95, as long as the respirator used will not create a hazard.

**Outbreaks:**

(a) During a non major outbreak, departments must provide notice to employees in the exposed group of their right to request a respirator for voluntary use.

(b) During a major outbreak, departments must provide a respirator for voluntary use in compliance with Cal/OSHA's Respiratory Protection Program to employees in the exposed group.

(c) During a major outbreak employees who are not wearing respirators required by the department and used in compliance with Cal/OSHA's Respiratory Protection Program shall be separated from other persons by at least six feet, except where a department can demonstrate that six (6) feet of separation is not feasible, and except for momentary exposure while persons are in movement. Methods of physical distancing include: telework or other remote work arrangements; reducing the number of persons in an area at one time, including the public; visual cues such as signs and floor markings to indicate where employees and others should be located or their direction and path of travel; staggered arrival, departure, work, and break times; and adjusted work processes or procedures, such as reducing production speed, to allow greater distance between employees. When it is not feasible to maintain a distance of at least six (6) feet, individuals shall be as far apart as feasible.

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**Note 1.** Department operations that fall under Cal/OSHA's Aerosol Transmissible Diseases (ATD) Standard (Title 8 California Code of Regulations (CCR), §5199) or who are already covered by Cal/OSHA's Respiratory Protection Standard (Title 8 CCR, § 5144) where employees are required to wear tight fitting respirators to protect themselves from breathing in harmful substances, including chemical, biological, and radiological agents, will continue to follow all the required elements of Cal/OSHA Title 8 CCR, §5144.

**Note 2.** Other than the categories under Note 1 above, departments issuing N95 respirators as an upgraded face covering for protection against the spread of COVID-19 are not required to

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1 Per Cal/OSHA respirator filters should be replaced if they get damaged, deformed, dirty, or difficult to breathe through. Filtering Facepiece Respirators (FFRs) such as N95s are disposable respirators that cannot be cleaned or disinfected. Disposable FFRs are mainly for one-time use only. Ideally, such respirators should not be used once they are soiled or the inner lining gets moist. The minimum number of FFRs would be 2 per/person/work-shift (1 plus 1 replacement). Additional N95 replacement may be needed depending on the nature and/or condition of work (e.g., when working outdoors in a hot humid weather, dusty environment, job requiring physical exertions, etc.)
have a written respiratory protection program or medically evaluate and fit test employees. Department must ensure that employees’ use of a respirator will not create a hazard e.g. if the employee is engaged in strenuous physical activity like continuous heavy lifting. When respirators are provided for voluntary use to employees, the department shall encourage their use and ensure the respirator is the correct size for the employee. Departments shall train affected employees on how to properly wear the N95, provide manufacturer's respirator use instruction, information on how to do a seal check, the fact that facial hair interferes with a seal, and provide information contained in Title 8, CCR § 5144, Appendix D.

**Note 3.** Consult the Department Safety Engineer or the Personnel Department’s Occupational Safety and Health Division for further guidance on applicable respirator standards, if needed.

**Note 4.** Department must implement measures to clearly communicate to non-employees the masking requirements on their respective premises. Persons younger than two years old and very young children must not wear a mask because of the risk of suffocation. No one can be prevented from wearing a mask to participate in an activity or enter a business.

### 3. PERSONAL PROTECTIVE EQUIPMENT (PPE) AND BARRIERS

(a) **PPE.** Departments must continue to evaluate the need for PPE, such as respirators, gloves, goggles, and face shields to prevent COVID-19 related exposure and provide PPE as necessary. Departments shall provide and ensure use of eye and respiratory protection for employees exposed to procedures that aerosolizes saliva or other potentially infectious materials.

(b) **Barriers.** All protective barriers that were installed in response to the COVID-19 pandemic are to remain in place. (Departments may choose to include additional barriers.)

### 4. PHYSICAL DISTANCING

Physical distancing (of six or more feet) is required in indoor and outdoor settings under the following situations:

(a) employees who are actively eating or drinking while indoors\(^2\) where a face-covering is required (See Section 2.1);

(b) all exposed employees in the event of a major outbreak; and

(c) all exposed employees when determined necessary in the event of a non-major outbreak or, where six feet of physical distancing is not feasible, as much distance between persons as feasible.

**Note.** Where not otherwise required under these Standards, physical distancing is encouraged where possible.

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\(^2\) “Actively eating or drinking” refers to the limited time during which the face covering can be briefly removed to eat or drink, after which it must be immediately put back on.
5. **CLEANING AND DISINFECTION**

5.1 **Personal Work Stations and Vehicles:** Employees should be encouraged to regularly sanitize their personal work stations and equipment including assigned vehicles, during their shifts. Departments shall provide cleaning materials and gloves (or other appropriate personal protective equipment per manufacturer’s instruction) to employees for these purposes. Department must also ensure that hand sanitizers are available for all drivers and riders so that they can sanitize their hands before entering and exiting any shared vehicle. Hand sanitizers with methyl alcohol are prohibited.

5.2 **Cleaning and disinfecting of rooms or areas or vehicles when someone is sick or diagnosed with COVID-19 in the space.** (The following does not apply in facilities which house persons overnight. Also the following are not meant for cleaning in healthcare facilities, correctional care institutions, or other locations for which specific guidance already exists. [http://ph.lacounty.gov/media/Coronavirus/](http://ph.lacounty.gov/media/Coronavirus/) Departments are to ensure that the rooms or spaces or vehicles occupied by a person confirmed to have COVID-19 within 24 hours during their infectious period is secured. Per the CDC and [LA County DPH](http://ph.lacounty.gov/media/Coronavirus/), if more than 24 hours have passed since the person who is sick or diagnosed with COVID-19 has been in the space, regular cleaning is enough and space can be reoccupied. For any COVID-19 disinfection questions or need, the Personnel Department’s Medical Services Division (MSD) must be contacted. MSD will provide further guidance to the department’s Human Resources and/or the General Services Department (GSD) Custodial Services regarding the sanitary (cleaning and disinfection) measures that should be taken.

**Note 1.** Leased buildings will also follow the cleaning/disinfection procedures; GSD will request the necessary service to the leased facility building management per MSD’s guidance.

**Note 2.** Custodial staff will have the necessary knowledge and training, and be provided with appropriate PPE, and supplies required to conduct COVID-19 disinfection.

**Note 3.** Once the required COVID-19 cleaning and disinfection per MSD’s instructions have been completed by the custodial staff, the affected space(s) which were secured can be reoccupied.
6. **VENTILATION**

Regardless of community risk level, proper ventilation throughout indoor spaces should be maintained.

6.1 **Buildings:** Review the *Interim Guidance for Ventilation, Filtration, and Air Quality in Indoor Environments*. Evaluate how to maximize ventilation with outdoor air -- the highest level of filtration efficiency compatible with the existing ventilation system -- and evaluate the use of additional air cleaning systems. During an outbreak, use filters with the highest compatible filtering efficiency and evaluate whether portable or mounted High Efficiency Particulate Air (HEPA) filtration units or other air cleaning systems would reduce the risk of transmission and implement their use to the degree feasible.

For buildings with mechanical or natural ventilation, or both, the City shall maximize the quantity of outside air provided to the extent feasible, except when the United States Environmental Protection Agency (EPA) Air Quality Index is greater than 100 for any pollutant or if opening windows or maximizing in outdoor air by other means would cause a hazard to employees, for instance from excessive heat or cold.

**Note.** Leased facilities and their building operator are also subject to the same interim guidance to provide a safe workplace, whether they have employees on site or not. GSD has and will continue to request that building landlords comply with the interim guidance.

6.2 **Vehicles:** When riding in vehicles with others, windows must be kept open, and the ventilation system set to maximize outdoor air and not set to recirculate air. Windows do not have to be kept open if one or more of the following conditions exist:

(a) The vehicle has functioning air conditioning in use and excessive outdoor heat would create hazard for employees;

(b) The vehicle has functioning heating in use and excessive outdoor cold would create hazard for employees;

(c) Protection is needed from weather conditions, such as rain or snow; and/or

(d) The vehicle has a cabin air filter in use and the United States Environmental Protection Agency Air Quality Index for any pollutant is greater than 100 (Contact fleet maintenance).

7. **SIGNAGE**

Departments must maintain signage regarding face coverings, physical distancing, hand sanitation, hand-washing, vaccination and testing, and other related topics consistent with these safety Standards and as required by applicable Public Health Orders, where applicable.

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3 Issued by California DPH on October 7, 2021:

October 3, 2022
8. **ENTRY SCREENING**

Departments will continue to utilize daily screening or self-screening protocols.

8.1 **Self-Screening.** Employees must perform self-screening by evaluating their own symptoms before reporting to work. Departments may use other methods such as posting self-screening signs or performing in-person screening at the facility entrances, using third party daily symptom monitoring applications, etc. Employees must also perform self-screening prior to riding with others in a vehicle or shared transportation and not board the vehicle if having COVID-19 symptoms.

8.2 **In-Person Screenings.** If a department chooses to conduct in-person screenings in indoor settings, then: (i) face coverings are required of both screeners and employees; and (ii) non-contact thermometers must be used for temperature checks.

**Note:** Before coming to work or riding shared transportation, employees who have COVID-19 symptoms, or become sick or who are under isolation or quarantine orders, shall inform their supervisor and/or Human Resources as soon as possible and stay home and/or seek medical care, if needed. Employees who have had a close contact outside of work must inform their supervisor and/or Human Resources and follow applicable requirements.

9. **COVID-19 TESTING**

Departments must either offer COVID-19 testing to or require COVID-19 testing of employees depending on the situation as listed below. COVID-19 testing (See Definitions section, COVID-19 test) must be provided in a manner that ensures employee confidentiality. When testing is required, or recommended, employees may obtain a COVID-19 test from either their healthcare provider or from a Los Angeles County COVID-19 free testing site using the link: [https://covid19.lacounty.gov/testing/](https://covid19.lacounty.gov/testing/). (See also [https://www.covid.gov/tests](https:).

When a test is required or offered, the department must make testing available during “paid time” and “at no cost to employees.”

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4 Per Cal/OSHA, “paid time” means that the employer must make testing available during paid time. While the employee must be compensated for their time and travel expenses, the employer is not obligated to provide the test during the employee's normal working hours.

5 Per Cal/OSHA, ensuring that an employee does not incur costs would include paying employees' wages for their time to get tested, as well as travel time to and from the testing site. It would also include reimbursing employees for travel costs to the testing site (for example, mileage or public transportation costs).
COVID-19 Testing Requirements:

<table>
<thead>
<tr>
<th>Scenario #1</th>
<th>COVID-19 Cases or Employees showing COVID-19 Symptoms</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Require COVID-19 Testing:</strong></td>
<td>A COVID-19 case without symptoms. A negative test is required to exit early isolation. The test cannot be taken earlier than Day 5.</td>
</tr>
<tr>
<td><strong>Offer COVID-19 Testing to:</strong></td>
<td>All employees regardless of vaccination status, showing COVID-19 Symptoms.</td>
</tr>
</tbody>
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<table>
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<tr>
<th>Scenario #2</th>
<th>After a Close Contact in the Workplace</th>
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</table>
| **Require COVID-19 Testing:** | - When required by a regulatory agency (a department will receive an order to comply or citation from a regulatory agency mandating COVID-19 testing);  
- For close contacts without symptoms who remain at work (no quarantine), a negative test is required between days 3-5; or  
- For close contacts with symptoms, a negative test is required to exit early quarantine. The test cannot be taken earlier than Day 5. |
| **Offer COVID-19 Testing to:** | All employees regardless of vaccination status. See additional requirements under *Multiple Infections and COVID-19 Outbreaks* section. |
| **Offer of COVID-19 Testing Not Necessary for:** | Returned cases-Employees returned to work after recovering from COVID-19 infection, and have remained free of COVID-19 symptoms, and it is within 90 days after:  
- the initial onset of COVID-19 symptoms; or  
- the first positive test if employees never developed symptoms. If California or LA County Public Health may require a period of other than 90 days by regulation or order that period shall apply. |
### Scenario #3
**Employees part of an Exposed Group of a Non-Major Outbreak or a Major Outbreak**

**Require COVID-19 Testing to:**
All employees within the exposed group regardless of vaccination status -
- twice a week during a major outbreak or more frequently or additional testing when recommended by Public Health Department or exclude starting from the date that the outbreak begins; and
- continue testing those who remain at the workplace until the outbreak ends; or
- when deemed necessary by Cal/OSHA through its “Order to Take Special Action.”

**Offer COVID-19 Testing to:**
All employees within the exposed group regardless of vaccination status -
- weekly for non-major outbreak in the first two weeks; and
- continue at least weekly for non-major outbreak who remain at the workplace until the outbreak ends; or
- more frequently or additional testing when recommended by the Public Health Department.

**Offer of COVID-19 Testing Not Necessary for:**
Employees who were not present at the workplace during the infectious period -
- Returned cases - Employees returned to work after recovering from COVID-19 infection, and have remained free of COVID-19 symptoms, and is within 90 days
  - after the initial onset of COVID-19 symptoms; or
  - the first positive test if employees never developed symptoms.

### Scenario #4
**Employees who are exempted from wearing face coverings due to specific task**

**Require COVID-19 Testing:**
At least once per week regardless of vaccination status.

### Scenario #5
**Employees who are exempted from receiving a COVID-19 vaccine**

**Require COVID-19 Testing:** Per the City Ordinance “COVID-19 Vaccination Requirement for all Current and Future City Employees,” employees who have approved exemptions that prevent them from receiving a COVID-19 vaccine as follows:
- Currently at the workplace be tested weekly.
- Teleworkers who will be required to report to any work locations on an as needed basis tested on an ad-hoc basis.
10. PROCEDURES FOR ADDRESSING COVID-19 CASE(S), COVID-19 SYMPTOMS OR CLOSE CONTACT IN THE WORKPLACE

10.1 COVID-19 Case.
Upon knowledge that an employee or contracted workers has a positive diagnosis, regardless of vaccination status, previous infection, or lack of symptoms of COVID-19 while at the workplace, the department shall ensure the following occurs:

(a) Separate the employee or contracted workers from other employees and individuals, and send home immediately (if not already) to self-isolate per the Exclusion from the Workplace Due to COVID-19 Cases or Close Contact section.
(b) Secure the affected work spaces and vehicles (if applicable), ventilate the space or vehicle (if possible), and if the space will be used within 24 hours since the COVID-19 case was last present at the workplace, follow the Cleaning and Disinfection section.
(c) Notify Human Resources immediately and provide the following:
   (i) a timeline of when the employee was last at work (which is critical for the custodial services crew to commence the cleaning procedure);
   (ii) a list of names (such as coworkers, other City employees, contractors, facility residents, or building tenants) the sick/diagnosed employee had close contact with during the infectious period (with up to 2 days before symptoms appeared or 2 days prior to the test date for COVID-19 asymptomatic employees); and
   (iii) the date the employee first began to experience symptoms (to the extent possible) and/or tested positive.
(d) Notifications. Human Resources will:
   (i) Contact MSD for next steps using COVID-19 Case Referral Form,
   (ii) Potential Exposure Notification. Send written potential exposure notification within one (1) business day to all employees, their authorized representatives, independent contractors, and other employees present on the premises at the same worksite during the infectious period with information as required by the California Labor Code § 6409.6. Note: MSD will provide recommendations to Human Resources regarding which individuals need to be notified about close contact.

● Manner of Notice. The notice following the requirements of California Labor Code § 6409.6 shall be written in a way that does not reveal any personal identifying information of the COVID-19 case, and in the manner the City department normally uses to communicate employment-related information. Notice can be provided via email, personal service, or text. Additionally, oral notification is required where the department has reason to believe
that the employee did not receive or did not understand the written notification.

(iii) **Close Contact Notification (Employee).** Notify all identified close contacts and require that they quarantine in accordance with the *Exclusion from the Workplace Due to COVID-19 Cases or Close Contact* section.

- All potentially exposed employees with close contacts must be offered testing (see exceptions under, *COVID-19 Testing* section) at no cost during paid time and be provided with information about benefits.

(iv) **COVID-19 Case and Close Contact Notification (Labor).** Send written notification within one (1) business day to the authorized labor representative, if any, of the COVID-19 case and of any employee who had a close contact with information as required by the California Labor Code §6409.6(a)(2) and (c).

(e) Department must take any reports of exposure seriously and investigate any evidence of exposure/close contacts. If COVID-19 case is determined to be work-related, the department must follow the injury and illness reporting and investigation protocols (e.g., provide employees with workers’ compensation claims form, investigate whether any workplace conditions could have contributed to the risk of COVID-19 exposure, what could be done to reduce exposure to COVID-19 hazards, etc.) including recording in Cal/OSHA Form 300 log, etc., and as outlined in the Department’s Injury and Illness Prevention Plan (IIPP) and/or their written COVID-19 Prevention Program (CPP).

10.2 **COVID-19 Symptoms.**

(a) Upon knowledge that an employee or contracted workers is developing COVID-19 symptoms when they arrive at work or who becomes sick during the day while at work, the department should immediately separate the employees from other employees, customers, and the public and contact Human Resources/or MSD for advice and next steps.

(b) If the employee developed symptoms after a reported close contact, the department shall ensure exclusion, and other requirements are followed per these Standards and relevant information provided to affected employees, as appropriate.

(c) All employees who have COVID-19 symptoms must be offered testing at no cost during paid time.

**Note.** Employees who have had a close contact outside of work must inform their supervisor and/or Human Resources Section and follow guidance provided by Human Resources.
11. EXCLUSION FROM THE WORKPLACE DUE TO COVID-19 CASES OR CLOSE CONTACT

Exclusion from the Workplace. To limit the transmission of COVID-19 in the workplace, in non-high-risk settings, departments shall ensure that both: COVID-19 cases and employees who are experiencing symptoms after a close contact are excluded from the workplace until the following return to work requirements are met. See Section 11.2.2 below for high-risk settings.

11.1 COVID-19 CASES. The following isolation requirements apply to all employees, regardless of vaccination status, previous infection, or lack of symptoms (Persons are considered to have COVID-19 if they have a positive viral test and/or their healthcare provider has reason to believe they have COVID-19 [presumptive clinical diagnosis]).

If an employee has severe COVID-19 or an immune disease, the employee may need to isolate for longer and follow the guidance of a licensed healthcare provider.

(a) TABLE 1. COVID-19 CASES - WITHOUT SYMPTOMS

<table>
<thead>
<tr>
<th>COVID-19 CASES - WITHOUT SYMPTOMS</th>
</tr>
</thead>
<tbody>
<tr>
<td>☑ must self-isolate immediately;</td>
</tr>
</tbody>
</table>

Option 1

| ☑ obtain a COVID-19 viral test on Day 5 after the last known exposure (Employees may choose to obtain a COVID-19 viral test); |
| ☑ if COVID-19 symptoms do not develop; and |
| ☑ if the COVID-19 viral test collected on Day 5 (or later) is negative, the employee may return to work. |

☑ If an employee tests positive, on or after Day 5 the employee may return to the workplace after Day 10.

Option 2

| ☑ If no test was obtained, isolation must continue for at least 10 days from the last known close contact. |

Follow masking requirements. (See Face Coverings section.)
(b) **TABLE 2. COVID-19 CASES - WITH SYMPTOMS OR RESOLVING SYMPTOMS**

<table>
<thead>
<tr>
<th>Requirements</th>
</tr>
</thead>
<tbody>
<tr>
<td>✅  must self-isolate immediately;</td>
</tr>
<tr>
<td>✅  at least 10 days have must passed since COVID-19 symptoms first appeared;</td>
</tr>
<tr>
<td>✅  at least 24 hours have passed since a fever of 100.4 degrees Fahrenheit or</td>
</tr>
<tr>
<td>higher has resolved without the use of fever-reducing medications before</td>
</tr>
<tr>
<td>the employee can return to work; and</td>
</tr>
<tr>
<td>✅  Other COVID-19 symptoms are not present or have improved before</td>
</tr>
<tr>
<td>the employee can return to work.</td>
</tr>
</tbody>
</table>

Follow masking requirements. (See Face Coverings section.)

(c) **TABLE 3. PRESumptIVE CLINICAL DIAGNOSIS (HEALTHCARE PROVIDER TELLS EMPLOYEE TO ISOLATE)**

<table>
<thead>
<tr>
<th>Requirements</th>
</tr>
</thead>
<tbody>
<tr>
<td>✅  must self-isolate immediately and remain removed from the workplace</td>
</tr>
<tr>
<td>until the COVID-19 case isolation requirements are met;</td>
</tr>
<tr>
<td>✅  if the healthcare provider reassesses the initial diagnosis and</td>
</tr>
<tr>
<td>concludes that the patient is not infected with SARS-CoV-2 (patient</td>
</tr>
<tr>
<td>never tested positive); the patient can leave isolation if</td>
</tr>
<tr>
<td>fever-free for 24 hours; and</td>
</tr>
<tr>
<td>✅  symptoms have improved.</td>
</tr>
</tbody>
</table>

If employees are close contacts to a confirmed case that are required to     
quarantine, they must continue to follow quarantine requirements (outlined    
below) and other instructions provided by the healthcare provider.          

Follow masking requirements. (See Face Coverings section.)

---

6 Per County DPH, presumed COVID-19 means a patient with clinically compatible symptoms of COVID-19 and no clear alternate diagnosis with/without exposure history. This presumptive clinical diagnosis is used when the provider has a high index of suspicion that a patient has COVID-19 despite a negative COVID-19 test.
(d) TABLE 4. REBOUND COVID-19 CASES - WITH SYMPTOMS RECURRING, WORSENING OR TESTING POSITIVE AGAIN AFTER ENDING ISOLATION

<table>
<thead>
<tr>
<th>REBOUND COVID-19 CASES - WITH SYMPTOMS RECURRING, WORSENING OR TESTING POSITIVE AGAIN AFTER ENDING ISOLATION</th>
</tr>
</thead>
</table>

☑️ must re-isolate immediately;

Before returning to work, the following criteria must be met:

☑️ at least 5 days must have passed since rebound began; and

☑️ at least 24 hours have passed since a fever of 100.4 degrees Fahrenheit or higher has resolved without the use of fever-reducing medications before the employee can return to work; and

☑️ Other COVID-19 symptoms are not present or have improved.

Follow masking requirements. (See Face Coverings section.)

11.2 **CLOSE CONTACTS.** The following applicable steps must be met before an employee who had close contact with a COVID-19 case can return to work. Employees who were close contacts during an outbreak must have a negative test taken within three (3) to five (5) days after the close contact or shall be excluded from the workplace starting from the date of the last known contact (see Multiple Infections and COVID-19 Outbreaks section). The following requirement applies regardless of vaccination status.
11.2.1 The following requirements apply regardless of vaccination status except those who work in high-risk and non-outbreak settings.

(a) TABLE 5. CLOSE CONTACT - WITHOUT SYMPTOMS

<table>
<thead>
<tr>
<th>No quarantine occurs - employees remain in the workplace and monitor symptoms</th>
<th>Exception. Quarantine or work exclusion is required for certain workers in specific high-risk settings (see Table 7 below).</th>
</tr>
</thead>
<tbody>
<tr>
<td>must obtain a COVID-19 viral test on three (3) to five (5) days after the last known exposure</td>
<td></td>
</tr>
<tr>
<td>If an employee tests positive, the employee must be isolated and removed from the workplace until the COVID-19 case isolation requirements are met.</td>
<td></td>
</tr>
</tbody>
</table>

Recently returned cases. An antigen test is preferred for employees who have tested positive within the previous 90 days of close contact. In order to not be subject to the 3 - 5 day testing, employees must provide HR with proof of a COVID-19 positive test within the previous 90 days of close contact.

Follow masking requirements. (See Face Coverings section.)

---

*Per California CDPH, symptom self-monitoring should include checking temperature twice a day and watching for fever, cough, shortness of breath, or any other symptoms that can be attributed to COVID-19 for 10 days following the last date of exposure.*
TABLE 6.  close contact - with symptoms

<table>
<thead>
<tr>
<th>Option 1</th>
</tr>
</thead>
<tbody>
<tr>
<td>☑ Quarantine immediately (monitor symptoms for 10 days).</td>
</tr>
<tr>
<td>☑ <strong>Option 1</strong></td>
</tr>
<tr>
<td>☑ obtain a COVID-19 viral test five (5) days after the last known exposure. Employees may choose to obtain a COVID-19 viral test. An antigen test is preferred for employees who have tested positive within the previous 90 days of close contact;</td>
</tr>
<tr>
<td>☑ if COVID-19 symptoms are not present; and</td>
</tr>
<tr>
<td>☑ if the COVID-19 viral test collected on Day 5 (or later) is negative, the employee may return to work.</td>
</tr>
<tr>
<td>☑ If an employee tests positive, the employee must remain removed from the workplace until the COVID-19 case isolation requirements are met.</td>
</tr>
</tbody>
</table>

(If the employee or anyone who lives with the employee is at an increased risk for severe illness\(^8\) obtaining a test as soon as possible is recommended by LA County DPH. California DPH recommends retesting if tested during the first 1-2 days of symptoms and tested negative with an antigen test)

<table>
<thead>
<tr>
<th>Option 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>☑ If no test was obtained, quarantine must continue for at least 10 days from the last known close contact.</td>
</tr>
</tbody>
</table>

Follow masking requirements. (See Face Coverings section.)

---

\(^8\) Severe illness means that a person with COVID-19 may need: hospitalization, intensive care, a ventilator to help them breathe or they may even die.
11.2.2 High-Risk Settings. Employees who work in the following settings listed below have high transmission risk and populations served are at risk of more serious COVID-19 disease consequences including hospitalization, severe illness, and death:

- Homeless Shelters
- Emergency Shelters
- Cooling and Heating Centers
- Long Term Care Settings & Adult and Senior Care Facilities*
- Local correctional facilities and detention centers*
- Healthcare settings*

* Note that some employees in these high risk settings are covered by the Aerosol Transmissible Diseases standard (section 5199) and are subject to different requirements.

Employees who work in a healthcare setting and are exposed to COVID-19, are required to be excluded from work depending on exposure, vaccination status, and staffing levels at the facility and follow appropriate LA County Public Health guidance:

- Work Restrictions for Asymptomatic Healthcare Personnel with Exposures
- Work Restrictions for Asymptomatic EMS Personnel with Exposures

The following requirements apply to employees who are a) not fully vaccinated or b) not infected with SARS-CoV-2 within the prior 90 days and working in non-health care high-risk settings.

TABLE 7. CLOSE CONTACT - SPECIFIC NON-HEALTH CARE HIGH-RISK SETTINGS

<table>
<thead>
<tr>
<th>CLOSE CONTACT - SPECIFIC NON-HEALTH CARE HIGH-RISK SETTINGS</th>
</tr>
</thead>
<tbody>
<tr>
<td>☑ Quarantine immediately (monitor symptoms for 10 days) for at least five days.</td>
</tr>
<tr>
<td><strong>Option 1</strong></td>
</tr>
<tr>
<td>☑ obtain a COVID-19 viral test five (5) days after the last known exposure (if the employee or anyone who lives with the employee is at increased risk for severe illness, getting test as soon as possible is recommended by LA County DPH);</td>
</tr>
<tr>
<td>☑ if COVID-19 symptoms are not present; and</td>
</tr>
<tr>
<td>☑ if the COVID-19 viral test collected on Day 5 (or later) is negative, the employee may return to work.</td>
</tr>
</tbody>
</table>
If employees develop symptoms after returning to work, they must be excluded from the workplace and test as soon as possible. If employees test positive, they must follow COVID-19 case isolation requirements in Table 1.

☑️ If an employee tests positive, the employee must remain removed from the workplace until the COVID-19 case isolation requirements are met.

**Option 2**

☑️ If no test was obtained, and no symptoms are present, quarantine must continue for at least 10 days from the last known close contact.

Follow masking requirements. (See *Face Coverings* section.)

11.3 Use the following table to count days, where the tables above refer to action to be taken on a specified day e.g. “day 5” or “day 10.”

<table>
<thead>
<tr>
<th>TABLE 8. COUNTING THE DAYS</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>COUNTING THE DAYS</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>COVID Case - With Symptoms</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Day 0 is the first day of symptoms.</td>
</tr>
<tr>
<td>• Day 1 is the first full day after symptoms develop.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>COVID Case - Without Symptoms</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Day 0 is the day the positive test (specimen) was taken.</td>
</tr>
<tr>
<td>• Day 1 is the first full day after the positive test was taken.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Close Contacts</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Day 0 is the day of last contact (exposure) with the infected person (COVID-19 Case).</td>
</tr>
<tr>
<td>• Day 1 is the first full day after last exposure.</td>
</tr>
</tbody>
</table>

**Note 1.** In establishments and settings with active outbreaks, quarantine and isolation may be extended for additional days by County Public Health outbreak investigators to help lower the risk of ongoing transmission at the site.
Note 2. If an order to isolate, quarantine, or exclude an employee is issued by a local or state health official, the employee shall not return to work until the period of isolation or quarantine is completed or the order is lifted even if the order exceeds the specified exclusion requirements in the ETS or California DPH recommendation. If no period was specified, then the period shall be in accordance with the return to work periods listed above, as applicable.

Note 3. Per Cal/OSHA, “if no violations of local or state health officer orders for isolation, quarantine, or exclusion would result, Cal/OSHA may, upon request, allow employees to return to work on the basis that the removal of an employee would create undue risk to a community’s health and safety. In such cases, the employer shall develop, implement, and maintain effective control measures to prevent transmission in the workplace including providing isolation for the employee at the workplace and, if isolation is not feasible, the use of respirators in the workplace.”

Note 4. Per LA County DPH, EMS Provider Agencies & Healthcare facilities should have a plan to evaluate personnel with symptoms of possible COVID-19 illness. It is recommended that symptomatic personnel be evaluated by a clinician.

12. MULTIPLE COVID-19 INFECTIONS AND COVID-19 OUTBREAKS

12.1 Non-Major Outbreak. Following an outbreak when a department is made aware that there are at least three (3) COVID-19 cases that were at the workplace during their infectious exposure period at the same worksite within a 14-day period, the department must ensure the following until there are no new COVID-19 cases detected in the exposed group for a 14-day period:

(a) Immediately make testing available to all employees (regardless of vaccination status) in the exposed group and exclude positive cases and close contacts from work in accordance with the Exclusion from the Workplace Due to COVID-19 Cases or Close Contact section; repeat the testing one week later; and

(b) Continue to make tests available to employees at least weekly until the workplace no longer qualifies as an outbreak.

(c) Departments do not need to make testing available to the following employees:

(i) those who were absent from the workplace during the relevant 14 day period; or

(ii) recently returned COVID-19 cases (employees returned to work after recovering from COVID-19 infection) and have remained free of COVID-19 symptoms. The exception for returned COVID-19 cases lasts for 90 days after the employee’s original onset of symptoms or, if the recovered COVID-19 case never developed symptoms, 90 days following the first positive test.

(d) Perform a review of potentially relevant COVID-19 policies, procedures, and controls and implement changes as needed to prevent further spread of COVID-19.
(e) Implement ventilation changes to mechanical ventilation systems including increasing filtration efficiency to at least MERV-13, or the highest efficiency compatible with the ventilation system. Evaluate whether HEPA air filtration units are needed.

(f) Provide notice to employees in the exposed group of their right to request a respirator for voluntary use. Note that all employees in the exposed group, regardless of vaccination status, must wear face coverings when indoors, or when outdoors and less than six (6) feet from another person, unless an exception applies.

12.2 **Major Outbreak.** Following a major outbreak when a department is made aware that there are at least twenty (20) COVID-19 cases that were at the workplace during their high-risk exposure period at the same worksite within a 30-day period, the department must ensure the following until there are fewer than three COVID-19 cases detected in the exposed group for a 14-day period, after that follow requirements listed above:

(a) Make testing available to all employees in the exposed group at least twice weekly (more frequently if recommended by the local health department) until there are fewer than three (3) cases detected for a 14-day period and exclude positive cases and close contacts from work in accordance with the *Exclusion from the Workplace Due to COVID-19 Cases or Close Contact* section. Employees in the exposed group must be tested or shall be excluded starting from the date the outbreak began;

(b) Offer respirators to all employees, regardless of vaccination status, to use on a voluntary basis; determine the need for a respiratory protection program (non-voluntary, with fit testing and medical evaluation requirements) or changes to an existing respiratory protection program under Title 8 CCR, § 5144, Respiratory Protection to address COVID-19 hazards;

(c) Separate any employees in the exposed group who are not wearing respirators required by the department in compliance with Section 5144 from other persons by at least six (6) feet, except where the department can demonstrate that six (6) feet of separation is not feasible, and except for momentary exposure while employees/persons are in movement.

**Note.** Methods of physical distancing include: telework or other remote work arrangements; reducing the number of persons in an area at one time, including visitors; visual cues such as signs and floor markings to indicate where employees and others should be located or their direction and path of travel; staggered arrival, departure, work, and break times; and adjusted work processes or procedures, such as reducing production speed, to allow greater distance between employees. When it is not feasible to maintain a distance of at least six (6) feet, individuals shall be as far apart as feasible.

(d) Separate employees in the exposed group from other persons by at least six (6) feet where feasible; at work stations where an employee in the exposed group is
assigned to work for an extended period of time, such as cash registers, desks, and production line stations, and where the physical distancing requirement cannot be maintained at all times, the department shall install cleanable solid partitions that effectively reduce transmission between the employee and other persons.

(e) Consider halting all or part of operations to control the virus.

(f) Perform a review of potentially relevant COVID-19 policies, procedures, and controls and implement changes as needed to prevent further spread of COVID-19.

(g) Implement ventilation changes to mechanical ventilation systems including increasing filtration efficiency to at least MERV-13, or the highest efficiency compatible with the ventilation system. Evaluate whether HEPA air filtration units are needed; and

(h) Any other control measures deemed necessary by Cal/OSHA through the Issuance of Order to Take Special Action, in accordance with Title 8 CCR, § 332.3.

12.3 In the event that three or more cases are identified within the workplace (employees, assigned or contracted workers or volunteers) within a span of 14 days, the department shall report the outbreak to MSD. (See Regulatory Reporting section.)

13. EXCLUSION PAY (COVID-19 RELATED BENEFIT)

Contact Human Resources regarding Exclusion Pay and related benefits.

14. REGULATORY REPORTING

14.1 LA County DPH Outbreak Reporting. In the event that three (3) or more cases are identified within the workplace (employees, assigned or contracted workers or volunteers) within a span of 14 calendar days, the department shall report the outbreak to MSD at (213) 473-7037 or by email at joanne.obrien@lacity.org immediately and within 48 hours. MSD will report such outbreaks to the Department of Public Health at (888) 397-3993 or (213) 240-7821, or online at www.redcap.link/covidreport.

14.2 CAL/OSHA Serious Illness and Fatality Reporting. Department are required to report any the COVID-19 related serious illness (e.g., COVID-19 illness requiring inpatient hospitalization) or death immediately (defined as soon as practically possible but not longer than 8 hours after the departments knows or with diligent inquiry would have known of the death or serious injury or illness) to the nearest Cal/OSHA district office. If the department can demonstrate that exigent circumstances exist, the time frame for the report may be extended however be made no longer than 24 hours after the Department is made aware of the employee's death, and/or inpatient hospitalization. For full details on the information to be reported, see:

- Report a Work-Related Accident - Employers.
15. **ANTI-COVID-19 DISCRIMINATION, HARASSMENT & RETALIATION**

15.1 Employees regardless of vaccination status must be allowed to wear face coverings and request N95 type respirators without fear of retaliation.

15.2 The City will not retaliate against an employee for disclosing a positive COVID-19 test or diagnosis or order to quarantine or isolate.

15.3 The City will not discriminate, retaliate, or otherwise take any adverse action against any employee who makes COVID-19 hazard report in good faith.

15.4 The City will not discriminate against or harass employees or job applicants on the basis of a protected characteristic.

16. **CONTRACTORS**

16.1 Effective October 20, 2021, any new contract executed by the City shall include a clause requiring employees of the contractor and/or persons working on their behalf who interact with City employees, are assigned to work on City property, and/or come into contact with the public during the course of work on behalf of the City to be fully vaccinated. Standard contract language will include a clause that the contractor shall grant medical or religious exemptions to contractor personnel as required by law.

16.2 Contractors covered under City Ordinance, “COVID-19 Vaccination Requirement For All Current and Future City Employees” are exempt from City Ordinance, “Proof of Full Vaccination with a Covid-19 Vaccine Required to Enter Certain Public Locations.”

16.3 City departments must ensure Contractors are provided with a copy of these Standards and that contractors working on-site at any building, structure, or premises belonging to or under the control of the City follow these Standards at a minimum.

17. **MEMBERS OF THE PUBLIC**

17.1 Members of the public, regardless of vaccination status, are required to follow all posted signage and safety protocols.

17.2 Any visitors/guests entering City facilities should be registered in a visitor log that includes their name, phone number and email address, if feasible.

17.3 Affected City Building/Facility shall display prominently on its premises, visible to any persons or Patrons upon entrance, an advisory notice that Proof of Vaccination is required to enter any Indoor Portion of a City Building/Facility
(a) This requirement does not apply to any individual City employee or contractor covered by the “COVID-19 Vaccination Requirement for all Current and Future City Employees,” Los Angeles Administrative Code § 4.700 et seq.

(b) This requirement does not apply to a Non-resident Performer who enters any Indoor Portion of a City Facility for purposes of performing or competing.

17.4 Affected City departments must cross check any persons’ or Patrons’ (who appear to be 12 years of age or older), prior to entering any Indoor Portion of a City Building/Facility Proof of Full Vaccination records or Proof of Negative COVID-19 Tests against the persons’ or Patrons’ photo identification.

17.5 An Individual Eligible for a COVID-19 Vaccine who does not provide Proof of Vaccination will be provided alternative arrangements for access to government services, to be determined on a case-by-case basis by each department, including, but not limited to, online or remote service, service outdoors, or providing Proof of Negative COVID-19 Test prior to entering any Indoor Portion of a City Facility.

18. WRITTEN COVID-19 PREVENTION PROGRAM

18.1 All Departments must also have a written COVID-19 Prevention Program (CPP) as required by the Cal/OSHA COVID-19 Prevention Emergency Temporary Standards, which shall be maintained either separately, or as part of the Department’s Injury and Illness Prevention Plan (IIPP).

18.2 Each Department shall maintain records of the steps taken to implement the written CPP.

18.3 Each Department shall make the written CPP and/or IIPP available at the workplace to employees, authorized employee representatives, and to representatives of the Cal/OSHA immediately upon request.

19. TRAINING

19.1 Departments must ensure employees comply with any updated Citywide COVID-19 training administered by the Personnel Department on topics such as City’s COVID-19 Workplace Safety Standards, efficacy of vaccines, right to request/use of/policy for providing respirators such as N95s and face coverings, non-discrimination against employees who choose to wear face coverings regardless of vaccination status, etc. Departments can supplement this updated COVID-19 training with any respective worksite-specific procedures developed for COVID-19 prevention by the department.

19.2 Any employee who is not fully vaccinated shall be required to complete an online COVID-19 vaccination training course administered by the Personnel Department.
20. DEFINITIONS

“City building or facility” means the Indoor Portion of any building, structure, or premises belonging to or under the control of the City.

“Employer [City] provided transportation” means any transportation of an employee, during the course and scope of employment, including transportation to and from different workplaces, job sites, delivery sites, buildings, stores, and facilities, provided, arranged for, or secured by the Department, regardless of the travel distance or duration involved.

“Close contact” per California DPH, means someone sharing the same indoor airspace (e.g., home, clinic waiting room, airplane etc.) for a cumulative total of 15 minutes or more over a 24-hour period (for example, three individual 5-minute exposures for a total of 15 minutes) during an infected person's (laboratory-confirmed or a clinical diagnosis) infectious period. [This definition provides an exception for those individuals who wear respirators (such as N95) for which they have undergone medical evaluation and fit testing, per Title 8 CCR, § 5144. This exception does not apply to those individuals who wear respirators for voluntary use and/or who wear face coverings.]

“COVID-19” (Coronavirus Disease 2019) means the disease caused by SARS-CoV-2 (severe acute respiratory syndrome coronavirus 2).

“COVID-19 case” means an employee who:
- Has a positive “COVID-19 test;” or
- Has a positive COVID-19 diagnosis from a licensed healthcare provider; or
- Is subject to a COVID-19-related order to isolate issued by a local or state health official; or
- Has died due to COVID-19, in the determination of a local health department or per inclusion in the COVID-19 statistics of a county.

“COVID-19 hazard” means potentially infectious material that may contain SARS-CoV-2, the virus that causes COVID-19. 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, or coughing, or sneezing, or from procedures performed on persons which may aerosolize saliva or respiratory tract fluids.

“COVID-19 symptoms” means fever of 100.4 degrees Fahrenheit or higher, chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, or...
diarrhea, unless a licensed health care professional determines the person’s symptoms were caused by a known condition other than COVID-19.

“COVID-19 test” means a test for SARS-CoV-2 that is:

- Cleared, approved, or authorized, including in an Emergency Use Authorization (EUA), by the United States Food and Drug Administration (FDA) to detect current infection with the SARS-CoV-2 virus (e.g., a viral test); and
- Administered in accordance with the authorized instructions (FDA approval or FDA EUA, as applicable).
- To meet the return to work criteria, self-administered and self-read over-the-counter (OTC) tests are acceptable per Cal/OSHA if verification of the results, such as a time and date stamped photograph of the result or an OTC test that uses digital reporting with time and date stamped results, is provided.
- Currently FDA-authorized viral tests for SARS-CoV-2 (NAATs or antigen) can be used for both diagnostic and screening purposes. Per California DPH, Antigen tests directly detect fragments of SARS-CoV-2 viral protein (as opposed to viral RNA detected by nucleic acid amplification tests [NAAT aka PCR tests]). The main drawbacks of Antigen tests are lower sensitivity (more false negatives) and intended use limited to individuals suspected of COVID-19 within 5-12 days of symptom onset (number of days varies by manufacturer).

"Employees" means full, part-time and as-needed City employees regardless of appointment type, volunteers, interns, hiring hall, appointed officers, board members and commissioners, 120-day retired employees, elected officials and at-will appointees of elected officials.

“Exposed group” means 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 infectious period. A common area at work includes bathrooms, walkways, hallways, aisles, break or eating areas, and waiting areas. The following exceptions apply:

- For the purpose of determining the exposed group, a place where persons momentarily pass through while everyone is wearing face coverings, without congregating, is not a work location, working area, or a common area at work.
- If the COVID-19 case was part of a distinct group of employees who are not present at the workplace at the same time as other employees, for instance a work crew or shift that does not overlap with another work crew or shift, only employees within that distinct group are part of the exposed group.
- If the COVID-19 case visited a work location, working area, or a common area at work for less than 15 minutes during the infectious period, and the 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. **Note.**
An exposed group may include the employees of more than one employer. (See Labor Code § 6303 and § 6304.1.)

“Face coverings” means a well fitting medical grade mask, surgical mask, or higher level respirator—such as N95, KN95, KF94. A face covering is a solid piece of material without slits, visible holes, or punctures, and must fit snugly over the nose, mouth, and chin with no large gaps on the outside of the face. A well-fitted mask does not include a scarf, ski mask, balaclava, bandana, gaiter, turtleneck, collar, or single layer of fabric or any mask that has an unfiltered one-way exhaust valve. Cloth masks are not acceptable.

For medical grade masks, per LA County DPH, masks with an adjustable nose bridge that are made of at least three layers of non-woven material (melt-blown fabric and/or polypropylene) will provide increased protection and meet the requirements for a “medical mask.” These masks are often sold as disposable, protective, medical, or surgical masks.

Special considerations are made for people with communication difficulties or certain disabilities. Clear masks or cloth masks with a clear plastic panel that fit well are an alternative type of mask for people who interact with: people who are deaf or hard of hearing, children or students learning to read, people learning a new language, and people with disabilities.

Note. Face shields are not a replacement for face coverings, although they may be worn together for additional protection. Surgical masks and medical procedure masks that meet the FDA requirements for fluid barrier protection and particulate filtration would not be single-layered. Masks with a single layer of fabric that look like a surgical mask or medical procedure mask will likely not provide the protection intended for wearing face coverings.

“Fully vaccinated” means the employer has documented:

- A person’s status two weeks after completing primary vaccination with a COVID-19 vaccine with, if applicable, at least the minimum recommended interval between doses in accordance with the approval, authorization, or listing that is:
  - Approved or authorized for emergency use by the FDA;
  - Listed for emergency use by the World Health Organization (WHO); or
  - Administered as part of a clinical trial at a U.S. site, if the recipient is documented to have primary vaccination with the active (not placebo) COVID-19 vaccine candidate, for which vaccine efficacy has been independently confirmed (e.g., by a data and safety monitoring board) or if
the clinical trial participant at U.S. sites had received a COVID-19 vaccine that is neither approved nor authorized for use by FDA but is listed for emergency use by WHO;

or

● A person’s status two weeks after receiving the second dose of any combination of two doses of a COVID-19 vaccine that is approved or authorized by the FDA, or listed as a two-dose series by the WHO (i.e., a heterologous primary series of such vaccines, receiving doses of different COVID-19 vaccines as part of one primary series). The second dose of the series must not be received earlier than 17 days (21 days with a 4-day grace period) after the first dose.

“High-Risk in Healthcare Settings” per the LA County DPH February 25, 2022 Health Officer Order entitled, “Health Care Worker Vaccination Requirements,” means “health care facilities within County of Los Angeles public health jurisdiction, including every licensed acute care hospital, skilled nursing facility (SNF), intermediate care facility, dental office, other health or direct care facility types, and emergency medical services provider agency, adult or senior care facilities or home care residential settings or individual homes where vulnerable individuals receive care or reside. Patients and residents receiving care at these facilities or in their homes are at an increased risk for severe illness and death from COVID-19 due to age, underlying health conditions, or both.”

Note. The term “High-Risk Settings” is used for the purpose of vaccination requirements for health care workers (See COVID-19 Vaccination and COVID-19 Testing sections.)

“Infectious period” per California DPH, means:

● For symptomatic infected persons, 2 days before the infected person had any symptoms through Day 10 after symptoms first appeared (or through Days 5-10 if testing negative on Day 5 or later), and 24 hours have passed with no fever, without the use of fever-reducing medications, and symptoms have improved, OR

● For asymptomatic infected persons, 2 days before the positive specimen collection date through Day 10 after positive specimen collection date (or through Days 5-10 if testing negative on Day 5 or later) after specimen collection date for their first positive COVID-19 test.

“Isolation” means separating those infected with a contagious disease from people who are not infected.
“Major Outbreak” means 20 or more COVID-19 cases among workers at the same worksite within a 30-day period. This may include volunteers, employees of contractors, subcontractors, or other businesses or agencies.

“Mega Events (indoor or outdoor)” include conventions, conferences, expos, concerts, shows, nightclubs, sporting events, live events and entertainment, fairs, festivals, parades, theme parks, amusement parks, water parks, large private events or gatherings, marathons or endurance races, and car shows. See the current LA County Health Officer Order to determine the attendance thresholds for Indoor Mega Events and Outdoor Mega Events. **UPDATE:** Per LA County DPH, beginning February 16, 2022, the attendance thresholds for Mega Events are returned to 1,000 attendees for Indoor Mega Events and to 10,000 attendees for Outdoor Mega Events. The agency recommends masking for attendees at Outdoor Mega Events.

“Outbreak (non-major outbreak)” means at least three (3) COVID-19 cases among workers at the same worksite within a 14-day period. This may include volunteers, employees of contractors, subcontractors, or other businesses or agencies.

“Partially Vaccinated” means employees who have received at least one dose of a COVID-19 vaccine, but do not meet the definition of fully vaccinated as defined herein.

“Quarantine” means to restrict the movement of persons who were exposed to COVID-19 in case they become infected.

“Returned case” means a COVID-19 case who returned to work pursuant to Cal/OSHA T8 CCR § 3205 (c)(10) and did not develop any COVID-19 symptoms after returning. A person shall only be considered a returned case for 90 days after the initial onset of COVID-19 symptoms or, if the person never developed COVID-19 symptoms, for 90 days after the first positive test. If a period of other than 90 days is required by a CDPH regulation or order, that period shall apply.

“Respirator” means a respiratory protection device approved by the National Institute for Occupational Safety and Health (NIOSH) to protect the wearer from particulate matter, such as an N95 filtering facepiece respirator.

“Unvaccinated” means employees who have not received any doses of COVID-19 vaccine or whose status is unknown.

“Worksite” means the building, store, facility, agricultural field, or other location where a COVID-19 case was present during the infectious period. It does not apply to buildings, floors, or other locations of the employer that a COVID-19 case did not enter, locations where the worker worked by themselves without exposure to other employees, or to a
worker's personal residence or alternative work location chosen by the worker when working remotely.

**Note.** The term “worksite” is used for the purpose of notice requirements per Labor Code § 6409.6(a)(4), § 6409.6(a)(2) and § 6409.6(c) (See Procedures For Addressing COVID-19 Case(s), COVID-19 Symptoms Or Close Contact In The Workplace section.)

“Work Exclusion” prevents a person from working as an employee or entering a specific work facility.

“Work Restriction” prevents a person from working as an employee performing certain types of work (e.g., direct contact with clients or others), or restriction from contact with specific populations.