**University of California Irvine Health**

**COVID-19 Prevention Plan**

**WORKSITE SPECIFIC SAFETY PLAN**

# Overview

On March 19, 2020, the State Public Health Officer and Director of the California Department of Public Health issued an order requiring most Californians to stay at home to disrupt the spread of COVID-19 among the population. To meet statewide industry guidance directives seeking to reduce the risk of COVID-19 in the workplace, the following information is being provided to support development of COVID-19 Worksite Specific Safety Plans (WSSPs). The plan is designed to be completed by organizational units (Divisions, Departments, Workgroups, etc.) and includes minimum State requirements and unit-specific safe operating procedures.

Key elements and prevention practices of this plan include: Physical distancing to the maximum extent possible, Frequent hand hygiene, Regular cleaning and disinfecting, use of face coverings (where respiratory protection is not required), Training employees on these and other elements of the COVID-19 Worksite Specific Safety Plan.

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### Purpose of Worksite Specific Safety Plan

This document provides minimum requirements for UC Irvine Health to support a safe, clean environment for University personnel and others working or entering the facility. The guidance is based on State directives and is not intended to revoke or repeal any employee rights, either statutory, regulatory or collectively bargained, and is not exhaustive, as it does not include county health orders, nor is it a substitute for any existing safety and health-related regulatory requirements such as those of Cal/OSHA. Organizational units should follow changes to public health guidance and State/local orders and update plans as needed, as the COVID-19 situation continues to evolve.

### Identification of Responsible Persons and Facilities and Locations Included in the Plan

Each Manager or Supervisor retains responsibility for implementation of the WSSP for employees under their control. Every individual UCI Health employee is responsible for adhering to established protocols, rules, training and signage established to reduce COVID-19 transmission and to ensure safety in general.

### Maintenance and Revisions of this Plan

The WSSP may be updated as necessary to reflect current risks, mandatory practices and general expectations related to preventing the transmission of COVID-19 in the workplace.

The following facilities and locations are covered by this WSSP and the Individuals responsible for implementing and updating the plan, as well as evaluating the effectiveness of this plan include:

|  |  |  |
| --- | --- | --- |
| **FACILITIES AND LOCATION** |  | **RESPONSIBLE PERSONS** |
| Department/Unit: | UCI Health | Name: | Joe Brothman / Yvonne Ybarra |
| Building(s): | ALL | Email: | jbrothma@hs.uci.edu / ybarray@hs.uci.edu |
| Location(s): | ALL | Phone: | (714) 456- 6738 / (714) 385-4889 |

# Compliance Evaluations and Deficiency Correction

Compliance with the stated protocols and procedures provided in the Worksite Specific Safety Plan (WSSP) are the responsibility of each University of California employee. The health and well-being of our UC personnel, their families and the surrounding community members is of the utmost importance and will require on-going diligence to limit the spread and impacts of COVID-19.

Questions regarding this plan should be sent to  UCIHealthsafety@hs.uci.edu

Each Manager or Supervisor retains responsibility for implementation of the WSSP for employees under their control. Department heads will coordinate and facilitate monitoring of the WSSP as noted below:

* Ensure employees have access to hand washing facilities and/or proper hand sanitizers.
* Monitor the work environment, including office spaces, common areas, conference rooms and dining areas, to verify furniture configurations, workflow, and general employee / pedestrian traffic patterns support adequate physical distancing protocols of 6 ft. or more.
* Provide and document employee training on the Worksite Specific Safety Plan protocols and procedures.
* Review [Incident Reporting policy](https://healthuci.sharepoint.com/sites/policiesandprocedures/hospital/General%20Administrative%20Policies/Incident%20Reporting.pdf#search%3DIncident%20Reporting) with employees and ensure employees know how to correct or report a safety hazard in the event of WSSP deficiencies or potential workplace hazards that could increase the risk of exposure to COVID-19.
* **Conduct Safe and Physical Distancing rounding via UC** [**RSS Inspect**](https://ehs.ucop.edu/inspect/#!/report-create) **as needed to ensure compliance with and identify any noted WSSP deficiencies or COVID-19 workplace hazards.**
* **Complete** [**Safe and Physical Distancing Protocol**](https://docs.google.com/forms/d/e/1FAIpQLSf7wrYV9RerJmU93KIM65xnPqDoevMoa-o7HcLQburO6zr1gQ/viewform) **prior to returning staff to work.**

Managers and Supervisors should make every effort to resolve compliance problems locally. If safety deficiencies are not resolved locally in a timely fashion, the issue will be escalated through the online [Safety Quality Information System](https://intranet2.ha.uci.edu/incidentreport/).

# Information on COVID-19

### Know how it spreads

* There is currently no vaccine to prevent coronavirus disease 2019 (COVID-19).

### The best way to prevent illness is to avoid being exposed to this virus.

* The virus is thought to spread mainly from person-to-person.
* Between people who are in close contact with one another (6 feet or less).
* Through respiratory droplets produced when an infected person coughs, sneezes or talks. These droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs.
* Recent studies have indicated that COVID-19 may be spread by people who are not showing symptoms, although it is well documented that those with (even minor) symptoms are the primary individuals from which COVID is transmitted.

### Understand Who is at Higher Risk for Severe Illness

COVID-19 is a new disease and there is limited information regarding risk factors for severe disease. Based on currently available information and clinical expertise, **older adults and people of any age who have serious underlying medical conditions** might be at higher risk for severe illness from COVID-19.

Based on what we know now, those at high-risk for severe illness from COVID-19 are:

* People 65 years and older.
* People who live in a nursing home or long-term care facility.
* People of all ages with underlying medical conditions, particularly if not well controlled, including:
	+ People with chronic lung disease or moderate to severe asthma.
	+ People who have serious heart conditions.
	+ People who are immunocompromised.
	+ Many conditions can cause a person to be immunocompromised, including cancer treatment, smoking, bone marrow or organ transplantation, immune deficiencies, poorly controlled HIV or AIDS, and prolonged use of corticosteroids and other immune weakening medications.
	+ People with severe obesity (body mass index [BMI] of 30 or higher).
	+ People with diabetes.
	+ People with chronic kidney disease undergoing dialysis.
	+ People with liver disease.

### Be Familiar with and Self-monitor for the Following Symptoms

People with COVID-19 have had a wide range of symptoms reported – ranging from mild symptoms to severe illness. Symptoms may appear **2-14 days after exposure to the virus.**

People with these symptoms may have COVID-19:

|  |  |
| --- | --- |
| * Fever ≥ 99 degrees F
 | * Loss of taste or smell
 |
| * Chills
 | * Headache
 |
| * New cough
 | * Diarrhea
 |
| * New shortness of breath
 | * Vomiting
 |
| * Muscle aches
 | * Nausea
 |
| * Unexpected fatigue
 | * Other cold symptoms
 |
| * Sore throat
 |  |

### If you are exhibiting these signs and symptoms or have been diagnosed with COVID-19, DO NOT REPORT TO WORK. Seek appropriate medical care as needed and inform your supervisor or the responsible person as soon as possible.

### When to Seek Emergency Medical Attention

Look for **emergency warning signs\*** for COVID-19. If someone is showing any of these signs, **seek emergency medical care immediately:**

|  |  |
| --- | --- |
| * Trouble breathing
 | * Inability to wake or stay awake
 |
| * Persistent pain or pressure in the chest
 | * Bluish lips or face
 |
| * New confusion
 |  |
| *\*This list is not all possible symptoms. Please call your medical provider for any other symptoms that are severe or**concerning to you.* |

**Call 911 or call ahead to your local emergency facility**: Notify the operator that you are seeking care for someone who has or may have COVID-19.

### Workplace Screening

All employees should monitor for illness daily through the online [health screening](https://screen.ucihealth.org/) website or text Screen to 59224 or scan QR code with your cellphone camera.



Employees will need to be instructed and directed to self-monitor and report symptoms daily. The daily process for employees who are working on site is as follows:

* Daily completion of [health screening](https://screen.ucihealth.org/) by employees who are working on-site;
* Every on-site employee reports to a screening checkpoint;
* If app attestation is not completed, employee to fall in line to be screened for symptoms;
* Temperature is taken by screener using a touchless thermometer on the forehead;
	+ ≥ 99 degrees F – DO NOT report to work, notify supervisor, call Occupational Health (714) 456-8300 or Triage Screening Team (714) 456- 6733, after hours
	+ < 99 degrees F – PROCEED and receive badge band of the day
* Every person (e.g., healthcare personnel, patients, visitors) must wear a mask at all times for source control, regardless of symptoms, while on UCI Health premises.
* All staff and healthcare providers are required to wear their own community cloth face masks when entering and leaving UCI Health premises.

Managers are responsible for ensuring compliance with daily clearances among their work force.

UCI Occupational Health follows guidance from the Centers for Disease Control (CDC), Orange County Healthcare Agency (OCHA), UCI Epidemiology and Infection Control (EIP) Committee and Senior Leadership. Occupational Health will perform an individualized assessment and coordinate medical care and follow-up instructions.

PCR Swab testing for COVID-19 is available to employees who meet current testing criteria. Employees are eligible

for this testing if they are sick with signs or symptoms of COVID-19. Staff should call Occupational Health Services during normal business hours. **Employees may not report to work if they are sick. Any employees who report signs of illness, or who are observed to have signs of illness, should be sent home first.**

### Symptomatic staff requesting testing for COVID-19 must:

* NOT come to work until consultation with Occupational Health
* NOT physically walk into Occupational Health. Occupational Health does not have its own testing capability. An appointment will be made for the UCI COVID testing tent
* Call your supervisor immediately and notify Occupational Health: (714) 456-8300
* Conduct monitoring for symptoms and fever for 14 days using the [monitoring log](https://healthuci.sharepoint.com/sites/covid19/FAQs%20for%20Health%20Care%20Workers/Monitoring%20Yourself%20For%20Infection%20Symptoms.pdf)

For additional screening questions, please contact Occupational Health at (714) 456-8300, available Mon – Fri, 7 a.m. – 5 p.m.

**If your employee is tested for COVID-19 and their result is positive, they are required to notify** Occupational Health Services **-** (714) 456-8300, and if the test was not performed at UCI, they must provide a copy of the documented test result to Occupational Health.

Exposed employee may continue to work as long as they remain asymptomatic. This guidance is consistent with CDC recommendations and is being used throughout the country. Employee should monitor themselves for signs and symptoms of illness for 14 days after date of exposure. Maintain a low threshold of suspicion for any of the new symptoms listed here:

* Fever ≥ 99 degrees F sweats or chills
* New cough
* New shortness of breath
* Muscle aches
* Unexpected fatigue
* Other less commonly reported symptoms include: sore/scratchy throat, headache, diarrhea, vomiting/nausea, which often seem to occur before fever and lower respiratory symptoms.
* Loss of taste or smell

If symptoms develop - STAY HOME and notify your supervisor and Occupational Health.

Contact Occupational Health at (714) 456-8300 during the next business day if symptoms appear. Occupational Health will triage you based upon employment status and give you further instructions.

Employees may be reassured that we are monitoring for employee exposures in the workplace and are making efforts to prevent the spread of infectious diseases. If you believe you have been exposed to COVID-19, review [guidance](https://healthuci.sharepoint.com/sites/covid19/FAQs%20for%20Health%20Care%20Workers/Monitoring%20Yourself%20For%20Infection%20Symptoms.pdf) on monitoring yourself for infection symptoms. Employees should be reminded to respect the privacy of their co-workers and not perform investigations, gossip, or review electronic medical records of those suspected of illness.

# Universal Prevention Measures

The following universal prevention measures and accompanying guidance are to be followed by all employees while working and interacting with others in the facility. The universal prevention measures include hand hygiene, avoiding close contact with sick individuals, using and caring for face coverings, and covering coughs and sneezes.

#### Hand Hygiene

Washing with soap and water

* Wet hands with water then apply soap
* Rub hands together covering all surface for at least 20 seconds
	+ Front and back
	+ Between the fingers and thumb
	+ Under nails
	+ Wrist
* Dry hands with clean paper towels Hand sanitizer
* Use a hand sanitizer that contains at least 70% alcohol. Cover all surfaces of your hands and rub them together until they feel dry.

### Avoid touching your eyes, nose, and mouth

#### Avoid Close Contact

* **Avoid close contact with people who are sick, even inside your home.** Whenever possible, maintain at least 6 feet between the person who is sick and other household members.

### Put distance between yourself and other people outside of your home.

* Remember that some people without symptoms may be able to spread virus.
* Stay at least 6 feet (about 2 arms’ length) from other people.
* Do not gather in groups.
* Stay out of crowded places and avoid mass gatherings.
* Keeping distance from others is especially important for people who are at higher risk of getting very sick.

#### Universal Masking

### Universal Masking is required for every person entering UCI Health premises

* All staff and healthcare providers are required to wear their own community cloth face masks when entering UCI Health premises.
	+ Staff whose job duties do not require patient care masks should wear their community cloth mask for source control while on UCI Health premises.
	+ Direct patient care providers must change from a community cloth mask to a UCI Health patient care regular mask when performing patient care duties.

|  |  |  |
| --- | --- | --- |
| Who | What | When |
| Non-direct patient care providers | Community cloth mask | On arriving and leaving UCI Health andcontinuously through the day |
| Direct patient care providers (e.g. MDs, RNs, OT/PT/Speech, Technicians, RTs) | Community cloth mask | On arriving and leaving UCI Health Non- patient care areas During administrative time (not providing patient care for all orpart of day) During breaks |
| Direct patient care providers | UCI patient care mask | Can be worn continuously in patient care areas or during patient care duties |

* Unit and Department Managers should ensure that N95 masks are only used where clinically indicated which is for aerosol generating procedures and airborne precautions.
* Employees should stay 6 feet apart at all times, or there should be a barrier in place (example: cubicle walls). If that is not possible, a facial covering needs to be worn. In non-clinical areas, these face coverings can be cloth or homemade (with no logos). Clinical masks should not be worn in non-clinical settings.
* Patients and visitors for whom masking should not be used include all children younger than 2 years of age and persons who cannot easily remove a mask on their own should it become necessary (e.g. impaired neurologic or cognitive function).
* It is the responsibility of all employees to be effective and vigilant stewards of PPE, in particular face masks, as masks which are used and thrown away today will not be available for use in future days or during a patient surge. We have no guarantee of re-supply when current masks are consumed.
* While asymptomatic cases of COVID-19 can exist, whether and how asymptomatic people may infect others is still unknown. In fact, if asymptomatic patients shed live virus, it may be more likely that environmental contamination is more common than droplet spray, in the absence of coughing. People wearing masks need to remember this does not reduce the need to ensure clean hands when touching your face – including to adjust the mask.

#### Cover your Mouth and Nose with a cloth face cover when around others in non-clinical settings

* You could spread COVID-19 to others even if you do not feel sick**. The cloth face cover is not only intended to protect you; it also protects other people in case you are infected.**
* Everyone should wear a cloth face cover when they must go out in public, interact with co-workers and are in the workplace.
* Do **NOT** use a facemask meant for a healthcare worker.
* Continue to keep at least 6 feet between yourself and others. The cloth face cover is not a substitute for social distancing.
* Note the following with regards to face coverings:
	+ Face coverings are not health care certified personal protective equipment (PPE).
	+ Face coverings can help protect people near the wearer, but do not replace the need for physical distancing and frequent handwashing.
	+ Employees should wash or sanitize hands before and after donning, doffing, or adjusting face coverings.
	+ Avoid touching eyes, nose, and mouth.
	+ Face coverings should be washed after each shift.

#### Cover Coughs and Sneezes

* **If you are in a private setting and do not have on your cloth face covering, remember to always cover your mouth and nose** with a tissue when you cough or sneeze or use the inside of your elbow.
* **Throw used tissues** in the trash.
* Immediately **wash your hands** with soap and water for at least 20 seconds. If soap and water are not readily available, clean your hands with a hand sanitizer that contains at least 70% alcohol.

# Cleaning and Disinfection Protocols

Increased cleaning and disinfection procedures will be implemented to decrease the probability of coronavirus workplace exposure. The following measures will be taken as part of these enhanced cleaning and disinfection procedures.

### Inpatient: Code Clean – Twice Daily Wipe Down by RN, MD, ALL

|  |  |  |
| --- | --- | --- |
| Nurses only | Start of Shift (SOS) Wipe Down | Comments |
| Times | 7:30 AM7:30 PM | Start each shift ensuring that all “high touch” surfaces are clean for your patients. Bed side nurses can be assisted by SHAs. |
| Product Used | Hospital approved disinfectant. Cavi Wipe wet/contact time is 3 minutes.Alcohol prep pads may be used for small surfaces/items (e.g. cell phone, badge, i-pad).Wipe, and allow to air dry. |
| ALL | Twice Daily Code Clean Wipe Down | Comments |

|  |  |  |
| --- | --- | --- |
| Times: Nurses and Support/Ancillary Staff | 2:00 PM2:00 AM | Try not to disturb patient sleep during the evening (2:00 AM) BID Code Clean Wipe Down. |
| Times: Physicians | 2:00 PM2:00 AM (if awake and about) | Clean the keyboard you may be using, and the area around you. If you go to bed before 2:00 AM, please clean your keyboard, work station, chair, cell phone,and stethoscope prior to sleep. |
| Product Used | **Hospital approved disinfectant. Cavi Wipe wet/contact time is 3 minutes.**Alcohol prep pads may be used for small surfaces/items (e.g. cell phone, badge, i-pad).Wipe, and allow to air dry. |
| **Surfaces/Items to Consider\*** | **Examples** |
| Frequently Touched Surfaces | * Computer Keyboard and Mouse
* Desk surfaces / counters
* Arm of chairs
* Light switches/door switch
* Door handles / knobs
 |
| Personal Items | * Cell phone / Pager
* Stethoscope
* Electronic devices (e.g., i-pad)
* Badge
 |
| Shared items | Nurse phones |
| Patient care areas | * Equipment in-use (e.g., IV pump, ventilator, bed rails
* Equipment used between multiple patients (e.g., bladder scanner, glucometers)
* Equipment/carts that travel (e.g., phlebotomy carts, utility carts)
 |

**\*The items listed above are examples of surfaces/items to be disinfected - this is not an exhaustive list. The surface/items disinfected during the SOS and Code Clean BID Wipe Down may vary by unit/area.**

### Ambulatory Clinic Cleaning Practices

|  |
| --- |
| **Code Clean Wipe Down** |
| Times | 8:00 AM and 2:00 PM and as needed |
| Product Used | Hospital approved disinfectant. Maintex Hydrogen Peroxide spray wet/contact time is 3 minutes.* [Maintex Hydrogen Peroxide](https://healthuci.sharepoint.com/sites/covid19/Outpatient%20Protocols%20%20Guidance/Maintex%20Peroxide%20RTU%20FAQs.pdf) disinfectant cleaner frequently asked questions.
* Maintex Hydrogen Peroxide [training video](https://healthuci.sharepoint.com/sites/covid19/Outpatient%20Protocols%20%20Guidance/Ambulatory%20Clinic%20Cleaning%20Practices%20.mp4)

Alcohol prep pads may be used for small surfaces/items (e.g. cell phone, badge, i-pad). When using alcohol prep pad, wipe and allow to air dry.Note: If alternate products are used due to shortages, follow manufacturer’s instructions for use. |
| **High Touch Surfaces\*** | ***Examples*** |
| **Frequently Touched Surfaces** | * Computer Keyboard and Mouse
* Desk surfaces / counters
* Arm of chairs
* Light switches/door switch
* Door handles / knobs
 |
| **Personal Items** | * Cell phone / Pager
* Stethoscope
* Electronic devices (e.g. cell phone, i-pad)
* Badge
 |
| **Shared items** | Nurse phones |
| **Enhanced Common Area Wipe Down** |
| **Times** | 4 X daily and as needed |
| **Product Used** | **Hospital approved disinfectant. Maintex Hydrogen Peroxide spray** |

|  |  |
| --- | --- |
|  | **wet/contact time is 3 minutes.**Alcohol prep pads may be used for small surfaces/items (e.g. cell phone, badge, i-pad). When using alcohol prep pad, wipe and allow to air dry.*Note: If alternate products are used due to shortages, follow manufacturer’s instructions**for use.* |
| **Common areas** | ***Examples*** |
| * Registration desks
 |
| * Door handles
 |
| * Desk items/tablets/pens (between patients/users if not dedicated)
 |
| * Waiting room chairs/tables
 |
| * Nurses station (should be cleaned between users if not dedicated)
 |
| * Break room surfaces including microwave, refrigerator handles
 |

**\*The items listed above are examples of surfaces/items to be disinfected - this is not an exhaustive list. The surface/items disinfected during Code Clean Wipe Down may vary by clinic.**

### Outpatient Exam Room Cleaning – Between Patients/End of Day

|  |
| --- |
| **Exam Room** |
| 1. Soiled linen is placed in the dirty linen hamper. Discard BP cuff if visibly soiled. Check cubicle curtain for visible soil. Remove curtain, or have removed and replaced, if soiled. |
| 1. Waste is properly disposed:
	1. Sharps in the sharps container. Sharps container is replaced when ¾full
	2. Non-biohazardous (regular) trash in the trash can
	3. Biohazardous waste is in a biohazardous container (e.g. red bag)
 |
| 3. If a waste container/linen hamper is full, tie off and empty. |
| 4. Remove gloves and perform hand hygiene |
| 1. Disinfect high touch items/ patient care equipment with approved disinfectant.
	1. Exam table
	2. Equipment used on patient
	3. Horizontal surfaces used/touched during exam
	4. Pens/tablets used by patient
 |
| 6. Remove gloves and perform hand hygiene |
| 7. Check soap, alcohol gel containers, and paper towels. Replace/refill if necessary. |
| 8. Replace paper liner or linen on exam table and pillowcase |
| 1. In addition to high touch surfaces, all exam room surfaces should be disinfected with approved disinfectant at the end of the day
	1. Sinks
	2. Faucets
	3. Door handles
	4. Light Switches
	5. Horizontal Surfaces
	6. BP cuff
 |

### Procedure Room Between Patient and End of Day Cleaning

|  |
| --- |
| **Procedure Room – Between Case Cleaning** |
| 1. Soiled linen is placed in the dirty linen hamper. Check cubicle curtain for visible soil. Remove curtain, or have removed and replaced, if soiled. |
| 1. Waste is properly disposed:
	1. Sharps in the sharps container. Sharps container is replaced with ¾ full.
	2. Non-biohazardous (regular) trash in the trash can
	3. Biohazardous waste is in a biohazardous container (e.g. red bag)
 |
| 3. If waste container/linen hamper is full, tie off and empty. |

|  |
| --- |
| 4. Remove gloves and perform hand hygiene |
| 1. Disinfect high touch items/ patient care equipment with approved disinfectant
	1. Procedure table
	2. Positioning pads in contact with patient
	3. Equipment used on patient
	4. Tables, Prep Stand, Mayo Stand used during procedure
	5. Lights
	6. Horizontal Surfaces used during procedure
	7. Spot clean/disinfect walls and floors if soiled with blood or bodily fluids during the procedure.
 |
| 6. Remove gloves and perform hand hygiene |
| 7. Check soap, alcohol gel containers, and paper towels. Replace/refill if necessary |
| 8. Replace paper liner or linen on procedure table and pillowcase |

|  |
| --- |
| **Procedure Room – End of Day Cleaning** |
| 1. Soiled linen is placed in the dirty linen hamper. Check cubicle curtain for visible soil. Remove curtain, or have removed and replaced, if soiled. |
| 1. Waste is properly disposed:
	1. Sharps in the sharps container. Sharps container is replaced with ¾ full.
	2. Non-biohazardous (regular) trash in the trash can
	3. Biohazardous waste is in a biohazardous container (e.g. red bag)
 |
| 3. If waste container/linen hamper is full, tie off and empty. |
| 4. Remove gloves and perform hand hygiene |
| 1. Disinfect all surfaces and patient care equipment with approved disinfectant
	1. Procedure table
	2. Positioning pads
	3. Patient Care Equipment
	4. Tables, Prep Stand, Mayo Stand
	5. Lights
	6. Horizontal Surfaces
	7. Spot clean/disinfect walls and floors if soiled with blood or bodily fluids
	8. Mop floors
 |
| 6. Remove gloves and perform hand hygiene |
| 7. Check soap, alcohol gel containers, and paper towels. Replace/refill if necessary |
| 8. Replace paper liner or linen on procedure table and pillowcase |

### Administrative Locations: Code Clean and Enhanced Common Area Wipe Down

|  |
| --- |
| **Code Clean Wipe Down** |
| Times | 8:00 AM and 2:00 PM and as needed |
| Product Used | Hospital approved disinfectant. Maintex Hydrogen Peroxide spray wet/contact time is 3 minutes.* [Maintex Hydrogen Peroxide](https://healthuci.sharepoint.com/sites/covid19/Outpatient%20Protocols%20%20Guidance/Maintex%20Peroxide%20RTU%20FAQs.pdf) disinfectant cleaner frequently asked questions.
* Maintex Hydrogen Peroxide [training video](https://healthuci.sharepoint.com/sites/covid19/Outpatient%20Protocols%20%20Guidance/Ambulatory%20Clinic%20Cleaning%20Practices%20.mp4)

Alcohol prep pads may be used for small surfaces/items (e.g. cell phone, badge, i-pad). When using alcohol prep pad, wipe and allow to air dry.Note: If alternate products are used due to shortages, follow manufacturer’s instructionsfor use. |
| **High Touch Surfaces\*** | ***Examples*** |
| **Frequently Touched Surfaces** | * Computer Keyboard and Mouse
* Desk surfaces / counters
* Arm of chairs
* Light switches/door switch
 |

|  |  |
| --- | --- |
|  | * Door handles / knobs
 |
| **Personal Items** | * Cell phone / Pager
* Electronic devices (e.g. cell phone, i-pad)
* Badge
 |
|  | **Enhanced Common Area Wipe Down** |
| **Times** | 4 X daily and as needed |
| **Product Used** | **Hospital approved disinfectant. Maintex Hydrogen Peroxide spray wet/contact time is 3 minutes.**Alcohol prep pads may be used for small surfaces/items (e.g. cell phone, badge, i-pad). When using alcohol prep pad, wipe and allow to air dry.*Note: If alternate products are used due to shortages, follow manufacturer’s instructions**for use.* |
| **Common areas** | ***Examples*** |
| * Time clock
 |
| * Door handles
 |
| * Desk items
 |
| * Printer/copier/fax machine
 |
| * Shared computer workspaces
 |
| * Break room surfaces including microwave, refrigerator handles
 |

**\*The items listed above are examples of surfaces/items to be disinfected - this is not an exhaustive list. The surface/items disinfected during Code Clean Wipe Down may vary by administrative location.**

# Physical Distancing Protocols

A variety of measures will be implemented to support physical distancing of 6 ft. or more between employees and individuals working in the office. These measures include, but may not be limited to:

* Install physical partitions or visual cues (e.g., floor markings or signs to indicate to where employees should stand) to support distancing.
* Utilize telework options, rotational shifts, and modified work schedules
* Office spaces, cubicles, etc. should allow for six feet between employees.
* Decrease the capacity for conferencing and meeting to ensure workspaces.
* Close or restrict common areas, using barriers, or increasing physical distance between tables/chairs where personnel are likely to congregate and interact, such as kitchenettes and break rooms, and discourage employees from congregating in high traffic areas such as bathrooms, hallways, and stairwells.
* Establish directional hallways and passageways for foot traffic, if possible, to eliminate employees from passing by one another.
* Designate separate routes for entry and exit into office spaces to help maintain physical distancing and lessen the instances of people closely passing each other.
* Limit the number of individuals riding in an elevator and ensure the use of face coverings. Post signage regarding these policies.
* Utilize administrative controls, when feasible and necessary, to limit the number of employees at the office at one time. This may include scheduling (e.g. staggering start/end times), establishing alternating days for onsite reporting, returning to the office workspace in phases, or continued use of telework when feasible.
* Stagger employee breaks, within compliance with wage and hour regulations, to maintain physical distancing protocols.
* Discontinue nonessential travel and encourage distance meetings via phone and internet.
* Require employees to avoid handshakes and similar greetings that break physical distance requirements.
* Dedicate staff to direct guests to meeting rooms upon entry to office space rather than congregating in lobbies or common areas.
* Install production transfer-aiding materials, such as shelving and bulletin boards, to reduce person-to-person production handoffs.
* Other Physical Distancing Protocols (document as appropriate under notes)

# Training & Communication

### Employee Training

Managers and/or supervisors are responsible for ensuring staff complete COVID-19 Return to Work training available through the [UC Learning Center](https://uclc.uci.edu/). Employees must be trained about the sources of COVID-19 exposure, the hazards associated with exposure, and appropriate workplace protocols in place to prevent or reduce the likelihood of exposure, as described in this toolkit. Employees must also be trained on the Workplace Screening Protocols (how to self-monitor for symptoms of illness, isolate if sick, and how to report cases of COVID-19).

Employees who conduct cleaning tasks must be protected from exposure to hazardous chemicals used in these tasks. Cleaning chemicals’ [Safety Data Sheets,](https://msdsmanagement.msdsonline.com/bc3f8c11-6db8-47eb-b7d3-8575b727608f/ebinder/?nas=True) product labels, and other manufacturer instructions can provide guidance about what PPE workers need to use the chemicals safely. Workers who use PPE must be trained prior to providing cleaning tasks. Training should include when to use PPE, what PPE is necessary, how to properly don (put on), use, and doff (take off) PPE, and how to properly dispose of PPE.

Train employees on the importance of frequent handwashing and scrubbing with soap for at least 20 seconds (or, in non- food-handling areas, using hand sanitizer where soap and water are not available). Remind employees to allow the sanitizer to dry completely before resuming work activities.

### Communication

Updates and other communications related to COVID-19 precautions are issued periodically, and are found on the [UCI](https://healthuci.sharepoint.com/sites/covid19/SitePages/COVID-19.aspx) [Health COVID-19 SharePoint site](https://healthuci.sharepoint.com/sites/covid19/SitePages/COVID-19.aspx).

# Exposure Investigation

Self-monitoring, screening, rapid identification of COVID-positive individuals and contract tracing are all important elements of controlling COVID-19 outbreaks.

The following measures will be used to support COVID-case investigations:

* Require employees to conduct daily COVID-19 self-monitoring symptom checks prior to reporting to work.
* Perform COVID-19 symptom screening procedures upon entry into the office facility.
* Quickly identify employees with COVID-like symptoms for further isolation guidance and medical evaluation including testing if appropriate.
* In coordination with the Occupational Health Services and Infection Prevention, support contact tracing of staff who test positive for COVID-19.

# Occupational Health Services

In the event of positive test result(s) amongst employees, the following will be contacted:

**Occupational Health Clinic – (714) 456-8300**

**Triage Screening Team – (714) 456-6733, after hours**

# Risk Assessment and Mitigation Strategies

Risk assessment criteria and guidance will be based on current details and directives provided by the Centers for Disease Control and Prevention (CDC), California Department of Public Health (CDPH), Cal-OSHA and the Local County Health Officer, and UCI Health Infectious Disease/Infection Prevention departments. As new information becomes available or is updated by these agencies, control measures and protocols associated with this COVID-19 Worksite Specific Safety Plan will be adjusted as needed. All personnel must remain diligent to prevent COVID-19 outbreaks by following control measures outlined in the Worksite Specific Safety Plan. The location-specific risks and controls are outlined in this section. Details involving schedules and daily standard operating procedures are indicated as well, which provide additional administrative controls. Staff will adhere to all prevention controls outlined in this section. Management to complete **attachment A** of their work area using  [RSS Inspect](https://ehs.ucop.edu/inspect/#!/report-create).

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| **ITEM** | **RISK** | **POSSIBLE MITIGATION STRATEGIES** |
| **Break Rooms** | * **Entrance.** Staff may run into each other during entry/exit
* **Dining.** Seating area is too small to allow for social distancing
* **Appliances.** High contact surfaces such as microwave buttons, refrigerator handles, toaster ovens.
* **Dishes/Utensils.** Reusable dishes and utensils used by multiple staff members
 | * **Maximum Capacity** Ensure there is enough room to maintain physical distance. Limit the number of employee usage at one time. Breakroom preparation area should only be used by one occupant at a time, unless physical distancing parameters are able to be met.
* **Face Coverings** Wear face coverings during entry/exit of break rooms.
* **Schedule** Ensure breaks and meals are schedule for different times to reduce the amount of people in the space.
* **Signage** Place signage to remind staff to practice physical distancing, wash/sanitize hands before eating, use utensils to eat, and don’t share food/straws/utensils/napkins.
* **Hand Hygiene** Designated eating areas have ample hand sanitizer or access to a hand washing sink.
* **Cleaning** Disinfectant and related supplies are available to all employees at designated areas within the department. Area should be cleaned at the frequency indicated on the WSSP. Use surface wipes to disinfect high-contact surfaces after you handle them. Coffee machines, refrigerator handles, and the ice machine handles should be disinfected at least three times per day. Water/beverage faucets that require workers to operate them with their hands should also be disinfected three times per day.
* **High Contact Surfaces** Kitchen areas contain surfaces touched by many people each day, including refrigerator handles, microwaves, cabinets, sink fixtures and vending machines. Avoid touching these surfaces with your bare hands. Instead, use a paper towel or wear clean gloves, and discard immediately after using to handle these surfaces. To avoid many of these high-touch surfaces, we suggest you bring meals that do not require refrigeration or heating. A self- contained cooler bag is recommended.
* **Food and Dishes** Please do not share utensils, glass wear or food.
* **Face Coverings** Require face coverings until the point when occupant has been seated and begins eating.

 |
| **Classrooms and Conference Rooms** | * **Entrance.** Staff may run into each other during entry/exit
* **Space size.** Space is too small for large

group meetings. | * **Maximum capacity** Ensure there is enough room to maintain physical distance by limiting the number of people.
* **Face coverings** Wear face coverings in this space when physically distancing is not possible
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| **ITEM** | **RISK** |  | **POSSIBLE MITIGATION STRATEGIES** |
|  |  | * **Communication** Offer video conferencing/teleconferencing option to participants to limit the number of in person attendees.
* **Physical distancing** Instruct attendees to maintain at least six feet distance from other people. If practical, arrange chairs six feet apart.
* **Occupancy** Consider limiting in-person meetings to 10 people or less, if virtual meetings are not feasible. If meetings are to occur in person, they should be conducted in a quick manner. Lingering and socializing before and after meetings should be discouraged.
* **Cleaning** Conference rooms that are used should be disinfected on a daily basis at minimum. Hospital approved Maintex Hydrogen Peroxide pray should be left in each conference room and employees should be encouraged to wipe down all surfaces and equipment (e.g., mouse, keyboard, phone) touched during conference room meetings.
 |
| **Elevators** | * **High Contact Surfaces.** Touching elevator buttons
* **Space size.** Space is too small for large group meetings.
* **Entrance.** Staff may run into each other during entry/exit
 | of | * **Alternate Routes** Encourage employees to use stairs if physically able to avoid crowding in elevators.
* **High Contact Surfaces** Avoid touching these surfaces with your bare hands. Instead, use a paper towel or wear clean gloves, and discard immediately after using to handle these surfaces. Sanitize hands when entering or exiting elevators when possible.
* **Cleaning** Area should be disinfected at the frequency indicated on the WSSP.
* **Face Coverings** Wear face coverings when physical distancing is not possible.
 |
| **Entrance, Exit and Hallways** | * **Common corridor. “**Choke points” where Staff may run into each other during entry/exit and in narrow hallways/pathways
 | * **Doors** Designate entrance only and exit only doors if possible.
* **Face Coverings** Wear face coverings during entry/exit and when moving outside of cubicle, office, conference, or other spaces.
* **Schedule** Restrict work hours onsite based on an alternating days/time schedule. The remaining days will be conducted via telecommuting.
* **Visitors** Restrict use of space only to occupants when possible.
* **Signage** Install signs and floor markings indicating entrances, exits, appropriate physical distancing requirements, and when face coverings must be used.
 |
| **Lobby and Waiting Areas** | * **High Contact Surfaces.** Touching of chairs, tables, water coolers, coffee makers, etc.
* **Space size.** Space is too small to maintain physical distancing
 | * **Physical Distancing** Review floorplans and remove or reconfigure seats, furniture and workstations as needed to preserve recommended physical distancing in accordance with guidelines. Regulate the use of common areas with clear signage (including maximum occupancy) and physical distancing measures in accordance with public health rules and guidelines.
* **Limiting Contact** Consider eliminating reception seating areas and requesting that guests phone ahead or install a plastic partition at the reception area.
* **Reduce High Contact Items** Temporarily replace amenities that are handled with high contact frequency, such as water coolers, coffee makers, and bulk snacks and replace them with alternatives. Examples include: touchless sensor water dispensers; requesting workers bring in

their own water bottles/coffee mugs; providing individually wrapped snacks. |

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| **ITEM** | **RISK** | **POSSIBLE MITIGATION STRATEGIES** |
|  |  | * **Cleaning** Common areas (e.g., lobby, security check-in) should be cleaned and disinfected daily at minimum.
 |
| **Payment Portals** | * **High Contact Surfaces.**
 | * **Cleaning** Disinfect all payment portals, pens, and styluses after each use.
* **Hand Hygiene** Hand sanitizer is available to the public at or near the entrance of the facility, at checkout and reception counters, and anywhere else inside the facility or immediately outside where people have direct interactions.
* **Physical Distancing** Instruct employees to maintain at least six feet distance from patients/public, except employees may momentarily come closer when necessary for to accept payment. Appropriate universal precautions should be used. Consider use of protective barriers.
 |
| **Restrooms** | * **High Contact Surfaces.** Touching of door handles and doors to multi-stall restrooms.
* **Entrance.** Staff may run into each other during entry/exit
 | * **Cleaning** Area should be disinfected at the frequency indicated on the WSSP.
* **Hand Hygiene** Restrooms normally open to the public shall remain open to the public and well stocked with soap and hand drying options.
* **High Contact Areas** Avoid touching these surfaces with your bare hands. Instead, use a paper towel or wear clean gloves, and discard immediately after using to handle these surfaces. Doors to multi-stall restrooms should be able to be opened and closed without touching handles if possible. Place a trash can by the door if the door cannot be opened without touching the handle.
* **Hand Air Dryers** Provide paper towels in restrooms and disconnect or tape-off hand air dryers.
 |
| **University Vehicles** | * **High Contact Surfaces.** Steering wheels, safety belts, interior locks, knobs, etc.
* **Space size.** More than one person in a vehicle at a time.
 | * **Disinfection** Wipe down door handles, steering wheel, shift handle, brake handle and all other interior locks, knobs and handles of department vehicles or carts before and after each use and at the end of the shift.
* **Cleaning** Clear all trash from your vehicle (towels, napkins, gloves, masks, paper, etc.) after each use.
* **Physical Distancing** Only one person per vehicle is allowed unless the vehicle is large enough to practice physical distancing. If this is not possible, face coverings masks worn while in the vehicle.
 |
| **Lobby and Waiting Areas** | * **High Contact Surfaces.** Touching of chairs, tables, water coolers, coffee makers, etc.
* **Space size.** Space is too small to maintain physical distancing
 | * **Physical Distancing** Review floorplans and remove or reconfigure seats, furniture and workstations as needed to preserve recommended physical distancing in accordance with guidelines. Regulate the use of common areas with clear signage (including maximum occupancy) and physical distancing measures in accordance with public health rules and guidelines.
* **Limiting Contact** Consider eliminating reception seating areas and requesting that guests phone ahead or install a plastic partition at the reception area.
* **Reduce High Contact Items** Temporarily replace amenities that are handled with high contact frequency, such as water coolers, coffee makers, and bulk snacks and replace them with alternatives. Examples include touchless sensor water dispensers; requesting workers bring in

their own water bottles/coffee mugs; providing individually wrapped snacks. |

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| **ITEM** | **RISK** | **POSSIBLE MITIGATION STRATEGIES** |
|  |  | * **Cleaning** Common areas (e.g., lobby, security check-in) should be cleaned and disinfected daily at minimum.
 |
| **Workspaces, Cubicles and Offices** | * **Equipment.** Equipment such as printers and copiers are located next to one employee’s personal space. No other areas are available to move or relocate the equipment.
* **Location.** Cubicles are side-by-side (close together) or ha.).

 | * **Close/block** Limit work area that do not allow physical distancing. Install signs indicating which work areas are out of service and cannot be used.
* **Relocation** Relocate employees to other spaces apart from each other.
* **Physical barrier** Install a temporary physical barrier to separate employee from foot traffic near exit if possible. Reconfigure workstations so that employees do not face each other or establish partitions if facing each other cannot be avoided.
* **Face Coverings** Wear face coverings when workstation occupant is unable to ensure compliance with physical distancing parameters.
* **Equipment** Relocate equipment to other spaces that allow for better physical distancing if possible. Only one employee allowed at copier/printer as one time.
* **Remote Work** Everyone who can carry out their work duties remotely without loss of productivity has been directed to do so, and has a remote working agreement in place, filed with HR/ELR.
* **Communication.** Use videoconferencing/teleconferencing to communicate when possible.
* **Chairs** Remove/block guest chairs in offices.
* **Cleaning Hospital approved** Maintex Hydrogen Peroxide spray is available at designated areas within the department for staff to disinfect their own workspace as needed.
* **Share Spaces** Workstations should not be used by more than one occupant per workday. Shared spaces should be sanitized prior to and end of each workday.
 |

## Attachment A



Safe & Physical Distancing Protocol

Business Name Address

Summary UCI Health has taken extensive precautions to limit the spread of COVID-

19. To ensure compliance with the latest public health orders, we are providing you with this summary of actions we have taken.

Please check the [COVID-19 website](http://www.ucihealth.org/covid-19) for more detail.

Emergency Protocol

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| **#** | **Description** | **Yes / No / NA** | **Notes** |
| **A** | **SIGNAGE** |
| **1** | Signage at each public entrance of the facility to inform all employees, patients and visitors that they should: when possible, maintain a minimum six-foot distance from one another. | **Yes / No / NA** |  |
| **2** | Signage about UCI universal masking policy for staff, patients, and visitors. | **Yes / No / NA** |  |
| **B** | **MEASURES TO PROTECT EMPLOYEES** |
| **1** | Employees are aware of The Safe & Physical Distancing Protocol and can access the protocol for review.  | **Yes / No / NA** |  |
| **2** | Everyone who can carry out their work duties from home has been directed to do so. | **Yes / No / NA** |  |
| **3** | All employees have been told not to come to work if sick and directed to contact Occupational Health if they meet any of the criteria in the UCI Health daily symptom screening (<https://screen.ucihealth.org/>).  | **Yes / No / NA** |  |
| **4** | Daily symptom checks are being conducted before employees may enter the workspace. | **Yes / No / NA** |  |

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| **#** | **Description** | **Yes / No / NA** | **Notes** |
| **5** | All employees who have contact during their shift(s) with the public or other employees are offered, at no-cost, a cloth face covering that must be worn unless removed for eating or alone in a private office. | **Yes / No / NA** |  |
| **6** | Upon appointment confirmation, all patients are asked to wear a mask when visiting – or they will be provided with one before entering the hospital or an ambulatory clinic. | **Yes / No / NA** |  |
| **7** | Staff will wear masks at all times in the workplace (unless in a private office) unless they are 6 feet (or more) apart. Staff will also wear masks to the extent feasible, even if they are 6 feet apart, when in the same room as others, or where they may encounter others (e.g., in common corridors). | **Yes / No / NA** |  |
| **8** | Work spaces will be separated by at least 6 feet (when occupied), or separated by partitions or other barriers that exceed the height of the employee(s) when standing. If the requirement for 6 feet of separation or barriers cannot be met, consider the following actions: 1) modified work schedules (i.e., part-time, staggered telecommuting); 2) identifying alternate work locations, or 3) having fewer employees return to on-site work spaces. | **Yes / No / NA** |  |
| **9** | Common areas are being disinfected frequently, on the following schedule: 2x per shift and more frequent as needed, shift schedule change (area will be cleaned between shifts), immediately after use (e.g., shared equipment will be cleaned), and/or personnel will sanitize their immediate work station at the start and stop of work. | **Yes / No / NA** |  |
| **10** | Employees have been instructed to bring a clean paper bag or thin plastic bag (unsealed) for storing masks during eating. | **Yes / No / NA** |  |

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| **#** | **Description** | **Yes / No / NA** | **Notes** |
| **11** | Designated eating areas have ample hand sanitizer and disinfectant wipes with signage to clean hands and surfaces before and after eating, to store masks in clean bag while eating, and to keep six feet apart when masks are removed for eating. | **Yes / No / NA** |  |
| **12** | Disinfectant and related supplies are available to all employees at designated areas within the department. | **Yes / No / NA** |  |
| **13** | Hand sanitizer is available to all employees at specific locations presenting a greater likelihood of contact with the public. | **Yes / No / NA** |  |
| **14** | Soap and water are available to all employees and the public at all restrooms and other hand washing stations. | **Yes / No / NA** |  |
| **C** | **MEASURES TO PREVENT CROWDS FROM GATHERS** |
| **1** | Department will limit the number of patients and visitors in waiting areas at any one time, which allows for individuals to easily maintain at least six-foot distance from one another at all practicable times by (e.g. signage, monitoring, scheduling). | **Yes / No / NA** |  |
| **D** | **MEASURES TO KEEP PEOPLE AT LEAST SIX FEET APART** |
| **1** | Place visual reminders to maintain physical distancing at gathering places and queuing lines. | **Yes / No / NA** |  |
| **2** | Place tape or other markings at least six feet apart in queuing lines and on walkways at public entrances with signs directing individuals to use the markings to maintain distance. | **Yes / No / NA** |  |
| **3** | Instruct employees to maintain at least six feet distance from patients and from each other, except employees may momentarily come closer when necessary to accept payment or when necessary for patient care. Appropriate universal precautions should be used. | **Yes / No / NA** |  |
| **4** | Encourage employees to use stairs if physically able to avoid crowding in elevators. | **Yes / No / NA** |  |

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| **#** | **Description** | **Yes / No / NA** | **Notes** |
| **E** | **MEASURES TO PREVENT UNNECESSARY CONTACT** |
| **1** | Preventing people from sharing any items when applicable including - all food or drink items brought into the workplace for sharing are packaged, in sealed individual containers by food service staff, will provide for contactless payment systems or, if not feasible, sanitize payment systems regularly | **Yes / No / NA** |  |
| **2** | All automated doors are functional | **Yes / No / NA** |  |
| **F** | **MEASURES TO INCREASE SANITIZATION** |
| **1** | Restrooms normally open to the public shall remain open to the public and well stocked with soap and hand drying options. | **Yes / No / NA** |  |
| **2** | Disinfecting wipes that are effective against COVID-19 are available at designated areas within the department. | **Yes / No / NA** |  |
| **3** | Hand sanitizer, soap and water, or effective disinfectant is available to the public at or near the entrance of the facility, at checkout and reception counters, and anywhere else inside the facility or immediately outside where people have direct interactions. | **Yes / No / NA** |  |
| **4** | All payment portals, pens, and styluses are disinfected after each use. | **Yes / No / NA** |  |
| **5** | Increase the frequency of disinfecting break rooms, bathrooms, common areas and high-contact surfaces (door handles, computer input devices, electronics devices, etc.). | **Yes / No / NA** |  |