

San Joaquin County Office of Education

INJURY AND ILLNESS PREVENTION PROGRAM

COVID-19 ADDENDUM

Purpose

It is the policy of the San Joaquin County Office of Education (SJCOE) to ensure a safe and healthy environment for employees, staff, and students. Communicable and infectious diseases, such as COVID-19, are minimized by providing prevention, education, identification through examination, surveillance, immunization, treatment and follow-up, quarantine, isolation, and reporting.

Due to the widespread of COVID-19 in the community, SJCOE has implemented the following infection control measures, including applicable and relevant recommendations from the Centers for Disease Control and Prevention (CDC) as well as guidelines from state and local officials.

Introduction

What is COVID-19?

On February 11, 2020, the World Health Organization announced an official name for the disease that is causing the 2019 novel coronavirus outbreak, first identified in Wuhan, China. The new name of this disease is Coronavirus Disease 2019, abbreviated as COVID-19. In COVID-19, 'CO' stands for 'corona,' 'VI' for 'virus,' and 'D' for disease. Formerly, this disease was referred to as “2019 novel coronavirus” or “2019-nCoV”. There are many types of human coronaviruses including some that commonly cause mild upper-respiratory tract illnesses. COVID-19 is a new disease, caused by a new coronavirus that has not previously been seen in humans. There is currently no vaccine to prevent COVID-19.

What are the Signs and Symptoms of COVID-19?

Signs and symptoms of COVID-19 may appear in as few as 2 days or as long as 14 days after exposure to the virus. Most people experience mild to moderate symptoms, however some people may have no symptoms at all. People with these symptoms may have COVID-19:

- Cough
- Shortness of breath or difficulty breathing
- Fever ≥ 100.4 F
- Chills
- Muscle pain
- Sore throat
- New loss of taste or smell
- Nausea, Vomiting, Diarrhea
- Congestion and or runny nose
- Fatigue
- Muscle and or Body Aches

How COVID -19 Spreads (OSHA)

Although the first human cases of COVID-19 likely resulted from exposure to infected animals, infected people can spread SARS-CoV-2 to other people. The virus is thought to spread mainly from person-to-person, including:

- Between people who are in close contact with one another (close contact is defined as less than 6 feet for more than 15 minutes).
- Through respiratory droplets produced when an infected person coughs or sneezes. These droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs.
- Through contaminated surfaces where respiratory droplets have landed and then touching one's eyes, face, nose or mouth.

People are thought to be most contagious when they are most symptomatic (i.e., experiencing fever, cough, and/or shortness of breath). It may be possible for COVID-19 to spread without experiencing any symptoms; there have been reports of this type of asymptomatic transmission with this new coronavirus, but this is not thought to be the main way the virus spreads. Although the United States has implemented public health measures to limit the spread of the virus, it is likely that some person-to-person transmission will continue to occur. The CDC website provides the latest information about COVID-19 transmission: www.cdc.gov/coronavirus/2019-ncov/about/transmission.html.

How a COVID – 19 Outbreak Could Impact Workplaces (OSHA)

Similar to influenza viruses, SARS-CoV-2, the virus that causes COVID-19, has the potential to cause extensive outbreaks. Under conditions associated with widespread person-to-person spread, multiple areas of the United States and other countries may see impacts at the same time. In the absence of a vaccine, an outbreak may also be an extended event. As a result, workplaces may experience:

- Absenteeism: Workers could be absent because they are sick; are caregivers for sick family members; are caregivers for children if schools or day care centers are closed; have at-risk people at home, such as immunocompromised family members; or are afraid to come to work because of fear of possible exposure.
- Change in patterns of commerce: Consumer demand for items related to infection prevention (e.g., respirators) is likely to increase significantly, while consumer interest in other goods may decline. Consumers may also change shopping patterns because of a COVID-19 outbreak. Consumers may try to shop at off-peak hours to reduce contact with other people, show increased interest in home delivery services, or prefer other options, such as drive through service, to reduce person-to-person contact.
- Interrupted supply/delivery: Shipments of items from geographic areas severely affected by COVID-19 may be delayed or cancelled with or without notification.

Procedures to Help Prevent the Spread of COVID-19

Protect Yourself

Older adults and people who have underlying medical conditions like heart or lung disease or diabetes seem to be at higher risk for developing serious complications from COVID-19 illness.

I. Posting Signs

Post signs in high-traffic areas that will educate staff and serve as reminders of how to help prevent the spread of COVID-19. (See the Attachment 1 and 2)

II. Hand Hygiene

To prevent the spread of respiratory infections from one person to the next, frequent hand washing is recommended. Hand hygiene procedures include the use of fragrance-free, 60% ethanol alcohol-based hand sanitizers or hand washing with soap and water. Washing hands with soap and water is the best way to get rid of germs in most situations, and it's one of the most effective ways to prevent the spread of germs. Handwashing facilities will be maintained to provide adequate supply of hand washing soap and paper towels. Hand sanitizing dispensers should be located throughout the campus where sinks and other hand washing facilities are not readily available. Notify your supervisor if any washing facilities do not have an adequate supply of suitable cleansing agents, water and single-use towels or blowers.

Properly hand wash with soap and water by:

- Wet hands first with clean, running water (warm or cold)
- Apply soap to hands.
- Lather your hands by rubbing them together with the soap.
- Be sure to lather the backs of your hands, between your fingers, and under your nails.
- Scrub your hands for at least **20 seconds**.
- Rinse hands with water and dry thoroughly with paper towel.
- Use paper towel to turn off water faucet.

Fragrance-free 60% ethanol alcohol-based hand rub is an ideal method for decontaminating hands, except when hands are visibly soiled (e.g., dirt, blood, body fluids), and may not remove harmful chemicals from hands like pesticides and heavy metals, in which case soap and water should be used. Hand hygiene stations should be strategically placed to ensure easy access.

Using a fragrance-free 60% ethanol alcohol-based hand sanitizer (follow manufacturer's directions):

- Dispense the recommended amount of product;
- Apply product to the palm of one hand; and
- Rub hands together, covering all surfaces of hands and fingers until they are dry (no rinsing is required), this should take around 20 seconds.

Staff and individuals in the educational setting should be encouraged to wash hands/use hand sanitizer often:

- After blowing one's nose, coughing, or sneezing.
- After using the restroom.
- Before eating or preparing food.
- Before and after touching your face.
- After contact with animals or pets and playing outside.
- Before and after providing routine care for another person who needs assistance (e.g., a child).
- Before putting on and after removing gloves.

- Before putting on and after removing face coverings.
- After touching frequently touched areas (e.g. doorknobs, handrails, shared computers)
- Individuals providing health care services should perform hand hygiene before and after each patient contact, contact with potentially contaminated material, and before putting on and after removing PPE, including gloves. Hand hygiene after removing PPE is particularly important to remove any pathogens that might have been transferred to bare hands during the removal process.

III. Coughing and Sneezing Etiquette

Covering coughs and sneezes and keeping hands clean can help prevent the spread of serious respiratory illnesses. https://www.cdc.gov/flu/pdf/protect/cdc_cough.pdf

Germ can be easily spread by:

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

Covering coughs and sneezes and washing hands are especially important for infection control measures in all settings.

To help stop the spread of germs:

- Cover mouth and nose with a tissue when coughing or sneezing.
- Throw used tissues in a trash receptacle.
- If a tissue is not available, cough or sneeze into the elbow, not in hands.
- Immediately wash hands with soap and water for at least 20 seconds. If soap and water are not readily available, clean hands with a hand sanitizer that contains at least 60% alcohol.

IV. Avoid Close Contact – Physical Distancing

Physical distancing is an effective method that can help stop or slow the spread of an infectious disease by limiting the contact between people. For COVID-19, the recommended distance to be maintained between people is at least 6 feet. To help prevent the spread of respiratory disease, employees should avoid close contact with others.

Each site will have a plan in place to promote physical distancing at their location. The plan may include, but is not limited to the following:

- Implementing flexible work hours by rotating or staggering shifts to limit the number of employees on site at the same time.
- Increasing physical space between employees by modifying the workspace.
- Avoiding shared workspaces (desks, offices, and cubicles) and work items (phones, computers, other work tools, and equipment) when possible. If they must be shared, follow the cleaning and disinfecting the building and facility guidelines to clean and disinfect shared workspaces and work items before and after use.
- Increasing physical space between employees and public by offering drive-through service or physical barriers such as partitions.

- Using signs, tape marks, or other visual cues on the floor, placed 6 feet apart, to indicate where to stand when physical barriers are not possible.
- Close or limit access to common areas where employees are likely to congregate and interact.
- Delivering services and holding meetings remotely by phone, video or internet.
- Limiting any unnecessary travel with passenger(s) from one site to another in work vehicles and personal employee vehicles.
- Eliminating all non-essential and non-related services, such as entertainment activities.
- Using videoconferencing or teleconferencing when possible for work-related meetings and gatherings.
- Canceling, adjusting, or postponing large work-related meetings or gatherings that can only occur in-person in accordance with state and local regulations and guidance.
- When videoconferencing or teleconferencing is not possible, holding meetings in open, well-ventilated spaces continuing to maintain a distance of 6 feet apart and wear cloth face coverings.
- Foot traffic flow encouraging one-way entrance and another way exit.

Employees will also be asked to practice physical distancing outdoors including, but not limited to the following:

- When working in sports fields, playgrounds, assembly areas, and/or other outdoor areas.
- Before starting the work shift.
- After the work shift.
- Coming and going from vehicles.
- Entering, working and exiting physical buildings or other structures.
- During breaks and lunch periods.

V. Self-check and monitoring protocols

Employees will be asked to self-check symptoms daily and directed to stay home if they have been exposed to someone with COVID-19, test positive for COVID-19, or have signs and symptoms of COVID-19, which includes temperature of 100.4 or more, tiredness, chills, shortness of breath, difficulty breathing, nausea, vomiting, diarrhea, sore throat, loss of taste or smell, cough, or muscle pain. Employees will be contacted by a registered nurse or someone in HR to follow-up on possible exposures and contact tracing efforts.

While at work, if an employee is not feeling well and is exhibiting COVID-19 symptoms, such as acute respiratory symptoms, a fever, or signs or symptoms of COVID-19 SJCOE will:

- Immediately send employees with acute respiratory illness symptoms to medical care as needed or to home.
- Actively encourage sick employees to stay home.
- If an employee goes home because they are sick, follow the cleaning and disinfecting guidelines to disinfect the area/room/office where the person worked, the tools and equipment they used prior to use by others.
- Employees who are well but who have a sick family member at home with COVID-19 should stay home, notify their supervisor and follow CDC-recommended precautions.

VI. Cleaning and Disinfecting

SJCOE will establish routine schedules to clean and disinfect common high-touched surfaces and objects in the workplace. This includes, but is not limited to, classroom technology devices, containers, counters, tables, desks, chairs, benches, door handles, knobs, light switches, drinking fountains, refrigerators, vending machines, portable and facility-based restroom and bathroom surfaces, automobiles and buses – inside and out, and trash receptacles.

Cleaning Process

Normal routine cleaning with soap and water removes germs and dirt from surfaces. It lowers the risk of spreading COVID-19 infection. Coronaviruses on surfaces and objects naturally die within hours to days. Warmer temperatures and exposure to sunlight may reduce the time the virus survives on surfaces and objects.

Disinfecting Process

Disinfectants kill germs on surfaces after cleaning, that can further lower the risk of spreading infection. Employees will need to follow the district's approved disinfecting products. Use products that are registered with the EPA for use against the virus that causes COVID-19 and comply with the manufacturer's instructions for all cleaning and disinfection products (e.g., safety requirements, PPE, concentration, contact time.) procedures when using disinfectants.

Evaluate the workplace to determine what kinds of surfaces and materials make up that area. Surfaces and objects that are not frequently touched should be cleaned and do not require additional disinfection.

Frequently touched surfaces and high-risk areas in school will need to be cleaned and then disinfected **daily** to further reduce the risk of germs on surfaces and objects.

Common high-touch surfaces in schools - There are surfaces that are frequently touched by a variety of hands. These areas include but are not limited to:

- A shared computer mouse and keyboard
- Shared musical keyboards and instruments
- Shared desks
- Doorknobs, elevator buttons, light switches, door push bars, handrails
- Faucet handles, toilet handles, toilet stall door locks, towel dispensers, hand driers, trash receptacles
- School bus doors and railings
- Refrigerator doors, cafeteria trays and tables

Common high-risk areas in schools - Some areas of a school building are of greater concern for possible transmission of disease because there is an increased likelihood of skin-to-skin, object-to-mouth, or fecal-to-oral contact. High-risk areas also include any location where food is prepared, sick or preschool children are cared for, or special incidents (such as those involving blood, feces, and vomit) have occurred. High-risk areas include but are not limited to:

- Athletic departments – gym mats, exercise equipment, and shower and locker rooms

- Bathrooms, kitchens, and lunchrooms
- Nurses' offices
- Childcare and preschool centers
- School buses

Outdoor Areas - Outdoor areas generally require normal routine cleaning and do not require disinfection. The existing cleaning and hygiene practices should be maintained for outdoor areas including outdoor playground equipment. Spraying disinfectant on outdoor playgrounds is not an efficient use of disinfectant supplies and has not been proven to reduce the risk of COVID-19 to the public. If practical, high touch surfaces made of plastic or metal, such as grab bars and railings, should be cleaned routinely. Cleaning and disinfection of wooden surfaces (e.g., play structures, benches, tables) or groundcovers (e.g., mulch, sand) is not recommended.

Cleaning and disinfection of surfaces:

- First clean surfaces and objects that are visibly soiled. If surfaces are dirty to sight or touch, they should be cleaned using a detergent or soap and water prior to disinfection.
- Uniformly apply the disinfectant to a microfiber cloth (with a pump spray bottle or squirt bottle) and wipe the surface with the saturated cloth or apply the disinfectant directly to the surface (with a squirt bottle).
- Ensure that the surface stays wet for the length of the dwell time recommended on the label.
- Rinse or wipe surfaces (if required) after dwell time has elapsed.
- Clean and disinfect surfaces as soon as possible in areas where a person with respiratory symptoms (e.g., coughing, sneezing) was present.
- Use an EPA-registered disinfectant for use against the novel coronavirus.
- The following products are effective for disinfection of hard, non-porous surfaces:
 - A 10% diluted bleach solution, an alcohol solution with at least 70% alcohol, and/or an EPA-registered disinfectant for use against COVID19.
 - Prepare a 10% diluted bleach solution by doing the following:
 - ✓ Mix five tablespoons of bleach per gallon of water.
 - ✓ After application, allow 2 minutes of contact time before wiping, or allow to air dry (without wiping).
- For soft (porous) surfaces such as carpeted floor, rugs, and drapes:
 - Remove visible contamination (if present) and clean with appropriate cleaners indicated for use on these surfaces.
 - After cleaning, launder items (as appropriate) in accordance with the manufacturer's instructions. If possible, launder items using the warmest appropriate water setting for the items and dry items completely.

Electronics

Consult manufacturer recommendations on cleaning products appropriate for electronics, such as tablets, touch screens, keyboards, remote controls, and ATM machines. If no guidance is available, consider the use of alcohol-based wipes or spray containing at least 70% alcohol. Use of alcohol-based products may reduce

risk of damage to sensitive machine components. Whenever possible, consider using wipeable covers for electronics. Dry surfaces thoroughly to avoid pooling of liquids.

Cleaning and Disinfecting Building or Facility if Someone Suspected/Confirmed to Have COVID-19 Have Been in the Facility:

- Close off areas used by the ill person.
- Open outside doors and windows to increase air circulation in the area.
 - Wait 24 hours before you clean or disinfect.
 - If 24 hours is not feasible, wait as long as possible.
- Clean and disinfect all areas and surfaces used by the ill person, such as offices, bathrooms, common areas, shared electronic equipment like tablets, touch screens, keyboards, remote controls.
- Always wash hands immediately after removing gloves and after contact with an ill person.
- If more than 7 days since the ill person visited or used the facility, additional cleaning and disinfection is not necessary.
- Continue routine cleaning and disinfection.

Ventilation

Ensure ventilation systems operate properly and increase circulation of outdoor air as much as possible by opening windows and doors, using fans, or other methods. Please note that open windows and doors should be closed if they pose a safety or health risk (e.g., allowing smoke or pollen in or exacerbating asthma symptoms) to children using the facility, or to protect privacy and confidentiality. Check HVAC systems and ensure filters are routinely changed according to manufacturer standards.

Disinfectant Products use guidelines

- Special considerations should be made for students and people with asthma, they should not be present when cleaning and disinfecting is happening as this can trigger asthma exacerbations. To learn more about reducing asthma triggers: https://www.cdc.gov/asthma/reduce_triggers.html
- Staff must be trained on the proper use and storage of disinfectants and on the Hazard Communication Law, which will help them interpret the product management and health and safety information provided in the product's MSDS. Provide copies of the MSDS in case of an accident in the School Office.
- Use only unscented disinfectant products as scented products can also trigger asthma and allergy episodes.
- Follow the manufacturer's instructions for safe and effective use of all cleaning and disinfection products (e.g., dilution concentration, application method and contact time, required ventilation, and use of personal protective equipment). The disinfectant concentrations and contact time are critical for effective surfaces disinfection. Ensure that disinfectants are prepared in well-ventilated areas and handled safely, wearing the appropriate PPE to avoid chemical exposures. Review the [COVID-19 Chemical Disinfectant Safety Information](#) guide to potential health hazards and the recommended protective measures for common active disinfectant agents.
- Provide chemically resistant gloves as specified on the product's MSDS or label.

- Ensure that the products are stored properly in a secure area, away from students and with other compatible chemicals. Check the product's MSDS to determine how to safely store the disinfectant.

VII. Reopening School Facilities/Buildings

There are many public health considerations, not just COVID-19 related, when reopening buildings and classrooms that have been closed for extended periods. For example, take measures to ensure the safety of the building water system. Stagnant water may lead to Legionnaires' disease, so you will want to make sure the water is thoroughly flushed through. It is not necessary to clean ventilation systems, other than routine maintenance, as part of reducing risk of coronaviruses.

An Indoor area - has been unoccupied for the last 7 days - If the workplace has been unoccupied for 7 days or more, it will only need the normal routine cleaning to reopen the area. This is because the virus that causes COVID-19 has not been shown to survive on surfaces longer than this time.

VIII. Visitors

Limit visitors to individuals that are essential. Visitors must be screened using a symptom checker form. Provide a visible marker (i.e.; paper wristband or visitor badge sticker), indicating proof of screening. Visitors must sign a form attesting to being symptom free for the past 5 days and not being recently exposed to anyone known with COVID-19. Encourage routine handwashing, for example between classes or activities or when visitors are working with children or supplies.

IX. Mechanical Barriers

Consider using physical barriers such as a plastic/plexiglass barrier to maintain physical distancing in high-traffic areas, these include but are not limited to the following:

- Office
- Dining hall
- Library
- Reception Desk
- Attendance Office
- Health Office

X. Personal Protective Equipment (PPE)

While engineering and administrative controls are considered more effective in minimizing exposure to COVID-19, PPE may also be needed to prevent certain exposures. While correctly using PPE can help prevent some exposures, it should not take the place of other prevention strategies. Using Personal Protective Equipment (PPE) is based upon several precautionary factors including local health officer/department guidance, level of COVID-19 contagion in the community and role and the responsibility of the individual. Specific training will be offered in order to teach proper donning and doffing of PPE. Inappropriate procedures for donning and doffing will increase the risk of contamination. The use of personal protective equipment will vary depending on the role or situation in the educational setting and may include using:

- Masks (Cloth, surgical or N-95)

- Face shields
- Gloves
- Gowns
- Shoe covering

During an outbreak of an infectious disease, such as COVID-19, recommendations for PPE specific to occupations or job tasks may change depending on geographic location, updated risk assessments for workers, and information on PPE effectiveness in preventing the spread of COVID-19.

XI. Face Coverings/Masks

The updated protocols for SJCOE office worksites regarding face coverings are as follows:

- SJCOE office employees are required to wear face coverings when:
 - Interacting in-person with any member of the public;
 - Working in any space visited by the public, regardless whether anyone from the public is present at the time;
 - Working in any space where food is prepared or packaged for sale or distribution to others;
 - Working in or walking through common areas, such as hallways, stairways, elevators, restrooms and parking facilities;
 - In any room or enclosed area where other people are present when unable to physically distance;
 - While outdoors in public spaces when maintaining a physical distance of 6 feet from others is not feasible.
- Members of the public in SJCOE offices are required to wear face coverings in SJCOE office buildings. Members of the public are also required to wear face coverings in outdoor public spaces when maintaining a physical distance of 6 feet is not feasible.

XII. Employee Training

SJCOE will provide training for employees on the following topics:

- What is COVID-19 and how is it spread
- Signs and symptoms of COVID-19
- When to seek medical attention if not feeling well
- Prevention of the spread of COVID-19 if you are sick
- Physical and social distancing guidelines
- Importance of washing hands with soap and water or use of hand sanitizer if soap and water are not readily available.
- Reminders and methods to avoid touching eyes, nose and mouth
- Coughing and sneezing etiquette
- Safely using cleansers and disinfectants

Compliance

This addendum will be reviewed regularly and according to federal, state and local requirements. These guidelines and written addendum are subject to change as information is received and the situation evolves.

SOCIAL DISTANCING PROTOCOL

Four Mandatory Steps We Must All Take to Help Stop the Spread of COVID-19



1. AVOID ENTERING THE FACILITY IF YOU HAVE SYMPTOMS

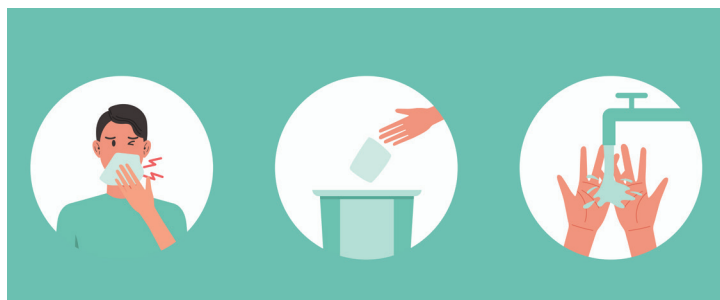
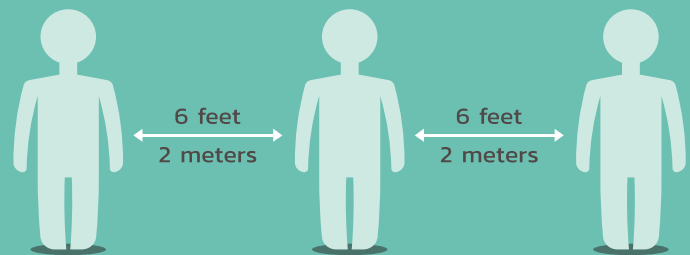
Employees must self-check for symptoms at home before coming to work. Employees must stay home, contact their supervisor, and call their health care provider if they have COVID-19 symptoms, including:

- Fever of 100.4°F or higher
- Cough
- Chills
- Repeated shaking with chills
- Tiredness
- Sore throat
- Difficulty breathing
- Shortness of breath
- Headache
- Nausea
- Vomiting
- Diarrhea
- Muscle pain
- New loss of taste or smell

Employees who have known exposure to someone with COVID-19 must stay home until they are symptom-free for 14 days and inform their supervisor immediately.

2. MAINTAIN A DISTANCE OF 6 FEET FROM OTHERS

Employees must stay 6 feet apart from each other and visitors. This includes keeping desks and workspaces 6 feet apart.

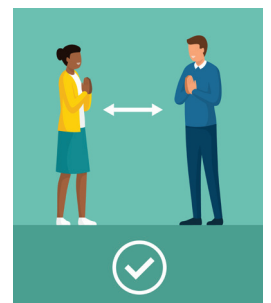
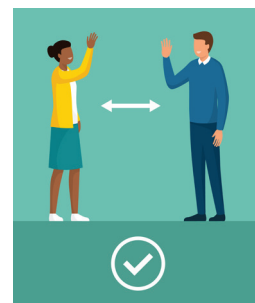


3. COVER YOUR COUGH OR SNEEZE WITH A TISSUE

Then throw the tissue in the trash and wash your hands. If a tissue is not available, cough or sneeze into the crease of your elbow.

4. AVOID PHYSICAL CONTACT WITH OTHERS

Do not engage in unnecessary physical contact. Find other ways to greet others without shaking hands or touching, such as waving.



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FACE COVERING REQUIRED

ATTENTION EMPLOYEES AND VISITORS:

The California Department of Public Health requires the use of cloth face coverings by the general public statewide when outside the home, with limited exceptions.

Californians must wear face coverings when they are in the situations listed below:

- Inside of, or in line to enter, any indoor public space;
- Obtaining services from the healthcare sector in settings including, but not limited to, a hospital, pharmacy, medical clinic, laboratory, physician or dental office, veterinary clinic, or blood bank;
- Waiting for or riding on public transportation or paratransit or while in a taxi, private car service, or ride-sharing vehicle;
- Engaged in work, whether at the workplace or performing work off-site, when:
 - Interacting in-person with any member of the public;
 - Working in any space visited by members of the public, regardless of whether anyone from the public is present at the time;
 - Working in any space where food is prepared or packaged for sale or distribution to others;
 - Working in or walking through common areas, such as hallways, stairways, elevators, and parking facilities;
 - In any room or enclosed area where other people (except for members of the person's own household or residence) are present when unable to physically distance.
- Driving or operating any public transportation or paratransit vehicle, taxi, or private car service or ride-sharing vehicle when passengers are present. When no passengers are present, face coverings are strongly recommended.
- While outdoors in public spaces when maintaining a physical distance of six feet from persons who are not members of the same household or residence is not feasible.

The following individuals are exempt from wearing a face covering:

- Children aged two and under;
- Persons with a medical, mental health, or developmental disability that prevents wearing a face covering;
- Persons who are hearing impaired, or communicating with a person who is hearing impaired, where the ability to see the mouth is essential for communication;
- Persons for whom wearing a face covering would create a risk to the person related to their work, as determined by local, state, or federal regulators or workplace safety guidelines.
- Persons who are obtaining a service involving the nose or face for which temporary removal of the face covering is necessary to perform the service;
- Persons who are seated at a restaurant or other establishment that offers food or beverage service, while they are eating or drinking, provided that they are able to maintain a distance of at least six feet away from persons who are not members of the same household or residence;
- Persons who are engaged in outdoor work or recreation such as swimming, walking, hiking, bicycling, or running, when alone or with household members, and when they are able to maintain a distance of at least six feet from others;
- Persons who are incarcerated. Prisons and jails, as part of their mitigation plans, will have specific guidance on the wearing of face coverings of masks for both inmates and staff.

Note: Persons exempted from wearing a face covering due to a medical condition who are employed in a job involving regular contact with others should wear a non-restrictive alternative, such as a face shield with a drape on the bottom edge, as long as their condition permits it.

To learn more, visit the California Department of Public Health website at covid19.ca.gov.

Thank you for complying and helping to ensure your health and safety and the health and safety of those who work at the SJCOE!



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Learn more about the statewide
mandate and limited exceptions at
covid19.ca.gov.



FACE COVERING REQUIRED

The California Department of Public Health requires that face coverings be worn in any indoor public space. Employees and visitors must comply by wearing a face covering prior to entering and while in this facility.

Thank you for complying and helping to ensure your health and safety and the health and safety of those who work at the SJCOE!