2021 CAL MARITIME
COVID-19
FALL 2021
SUMMARY AND OUTLINE

• POLICIES AND PROCEDURES FOR PROTECTING EMPLOYEES AND STUDENTS/CADETS
  • FACE COVERING REQUIREMENTS
  • DISTANCING
  • HYGIENE
• EMPLOYEE BENEFITS
• COVID DISEASE DEFINED, HOW SPREAD, AND CONTROLS
• FACE PROTECTION AND HYGIENE
• HEALTH TRACKING, REPORTING, AND FOLLOW UP
• COVID-19 VACCINATIONS AND TESTING
• ATTESTATION
CREATING AND MAINTAINING A SAFE ACADEMY

• SHARED RESPONSIBILITY
  • DAILY HEALTH CHECK REQUIRED FOR ALL EMPLOYEES AND STUDENTS
    • STAY HOME WHEN ILL AND VERIFY ILLNESS IS NOT COVID PRIOR TO RETURNING TO CAMPUS
    • STUDENTS CAN CALL STUDENT HEALTH CENTER FOR SYMPTOM EVALUATION AND CARE
    • EMPLOYEES REQUIRED TO SEE PERSONAL HEALTH PROVIDER OR EHS IF CONTRACTED AT WORK
  • VACCINATION IS BEST PROTECTION FOR YOU AND OTHERS
    • UNVACCINATED ARE AT GREATER RISK OF CONTRACTING COVID AND EXPERIENCING MORE SEVERE ILLNESS
    • IF UNVACCINATED FACE COVERINGS ARE MANDATED ON CAMPUS
EMPLOYEE BENEFITS

- OUTLINE WITH LINKS TO PROGRAM PAGES ON WEBSITE:
  - SUPPLEMENTAL PAID SICK LEAVE (UNIT 3 ONLY)
  - EXPANDED COVID-19 RELATED LEAVE
  - FAMILY MEDICAL LEAVE
  - WORKER’S COMPENSATION
SUPPLEMENTAL PAID SICK LEAVE (UNIT 3 ONLY)

• COVID-19 SUPPLEMENTAL PAID SICK LEAVE (UNIT 3)
  COVERED EMPLOYEES IN THE PUBLIC OR PRIVATE SECTORS WHO WORK FOR EMPLOYERS WITH MORE THAN 25 EMPLOYEES ARE ENTITLED TO UP TO 80 HOURS OF COVID-19 RELATED SICK LEAVE FROM JANUARY 1, 2021 THROUGH SEPTEMBER 30, 2021, IMMEDIATELY UPON AN ORAL OR WRITTEN REQUEST TO THEIR EMPLOYER. IF AN EMPLOYEE TOOK LEAVE FOR THE REASONS BELOW PRIOR TO MARCH 29, 2021, THE EMPLOYEE SHOULD MAKE AN ORAL OR WRITTEN REQUEST TO THE EMPLOYER FOR PAYMENT.

A COVERED EMPLOYEE MAY TAKE LEAVE IF THE EMPLOYEE IS UNABLE TO WORK OR TELEWORK FOR ANY OF THE FOLLOWING REASONS:

• CARING FOR YOURSELF: THE EMPLOYEE IS SUBJECT TO QUARANTINE OR ISOLATION PERIOD RELATED TO COVID-19 AS DEFINED BY AN ORDER OR GUIDELINES OF THE CALIFORNIA DEPARTMENT OF PUBLIC HEALTH, THE FEDERAL CENTERS FOR DISEASE CONTROL AND PREVENTION, OR A LOCAL HEALTH OFFICER WITH JURISDICTION OVER THE WORKPLACE, HAS BEEN ADVISED BY A HEALTHCARE PROVIDER TO QUARANTINE OR IS EXPERIENCING COVID-19 SYMPTOMS AND SEEKING A MEDICAL DIAGNOSIS.

• CARING FOR A FAMILY MEMBER: THE COVERED EMPLOYEE IS CARING FOR A FAMILY MEMBER WHO IS SUBJECT TO A COVID-19 QUARANTINE OR ISOLATION PERIOD OR HAS BEEN ADVISED BY A HEALTHCARE PROVIDER TO QUARANTINE DUE TO COVID-19, OR IS CARING FOR A CHILD WHOSE SCHOOL OR PLACE OF CARE IS CLOSED OR UNAVAILABLE DUE TO COVID-19 ON THE PREMISES.

• VACCINE-RELATED: THE COVERED EMPLOYEE IS ATTENDING A VACCINE APPOINTMENT OR CANNOT WORK OR TELEWORK DUE TO VACCINE-RELATED SYMPTOMS.
EMPLOYEE BENEFITS CONT’D

• PAID LEAVE FOR COVERED EMPLOYEES
  80 HOURS FOR THOSE CONSIDERED FULL-TIME EMPLOYEES. FULL-TIME FIREFIGHTERS MAY BE ENTITLED TO MORE THAN 80 HOURS, CAPS BELOW APPLY.
  • FOR PART-TIME EMPLOYEES WITH A REGULAR WEEKLY SCHEDULE, THE NUMBER OF HOURS THE EMPLOYEE IS NORMALLY SCHEDULED TO WORK OVER TWO WEEKS.
  • FOR PART-TIME EMPLOYEES WITH VARIABLE SCHEDULES, 14 TIMES THE AVERAGE NUMBER OF HOURS WORKED PER DAY OVER THE PAST 6 MONTHS.

• RATE OF PAY FOR COVID-19 SUPPLEMENTAL PAID SICK LEAVE: NON-EXEMPT EMPLOYEES MUST BE PAID THE HIGHEST OF THE FOLLOWING FOR EACH HOUR OF LEAVE:
  • REGULAR RATE OF PAY FOR THE WORKWEEK IN WHICH LEAVE IS TAKEN
  • STATE MINIMUM WAGE
  • LOCAL MINIMUM WAGE

• AVERAGE HOURLY PAY FOR PRECEDING 90 DAYS (NOT INCLUDING OVERTIME PAY)

• EXEMPT EMPLOYEES MUST BE PAID THE SAME RATE OF PAY AS WAGES CALCULATED FOR OTHER PAID LEAVE TIME.

• ACCESS THE SPSL/ECRL REQUEST FORM HERE

• SUPPLEMENTAL PAID SICK LEAVE(SB-95) POSTER
EMPLOYEE BENEFITS CONT’D

• EXPANDED COVID-19 RELATED LEAVE
  - The California State University System is offering an enhancement to SB 95’s supplemental paid sick leave. Paid leave up to 128 hours (16 days) has been granted effective January 1, 2021 through December 31, 2021 for eligible employees unable to work due to COVID-19-related reasons as outlined in Senate Bill 95 which was signed by the Governor on March 19, 2021.

• ELIGIBILITY
  - Unit 1 (UAPD), Units 2, 5, 7, 9 (CSUEU), Unit 4 (APC), Unit 8 (SUPA), Unit 10 (IUOE), Unit 11 (UAW), represented employees and non-represented employees eligible for ECRL include the following:
    Most employees, including exempt and non-exempt, are eligible for ECRL. Retired annuitants are ineligible as they are excluded by law from receiving any leave benefits. There is no waiting period to become eligible for this leave, and new employees hired after the effective date are considered eligible upon hire.

• QUALIFYING REASONS FOR LEAVE
  - ECRL can be used for the following reasons when employees are unable to work on site or telework:
    • Employee is subject to a quarantine or isolation period related to COVID-19 as defined by federal, state, or local orders or guidelines.
    • Employee is advised by a health care provider to self-quarantine due to concerns related to COVID-19.
    • Employee is attending an appointment to receive a COVID-19 vaccine.
    • Employee is experiencing symptoms related to a COVID-19 vaccine.
    • Employee is experiencing COVID-19 symptoms and seeking a medical diagnosis.
    • Employee is caring for a family member who is subject to a quarantine or isolation order or guideline or who has been advised to self-quarantine by a health care provider due to concerns related to COVID-19.
    • Employee is caring for a child whose school or place of care is closed or otherwise unavailable for reasons related to COVID-19 on the premises.

• NOTE: The quarantine or isolation period related to COVID-19 is the period defined by an order or guidelines of the California Department of Public Health, the Federal Centers for Disease Control and Prevention, or a local health officer with jurisdiction over the workplace.
EMPLOYEE BENEFITS CONT’D

- EXPANDED COVID-19 RELATED LEAVE
  - FULL TIME EMPLOYEES
    EMPLOYEES RECEIVE 128 HOURS IF FULLTIME, TIME BASE IS 1.0 (FTE) OR, ON AVERAGE, THEY WORKED OR WERE SCHEDULED TO WORK AT LEAST 40 HOURS PER WEEK IN THE TWO WEEKS PRECEDING THE DATE THEY TOOK LEAVE.
    • EXEMPT EMPLOYEES – UNDER THE FAIR LABOR STANDARDS ACT (FLSA), EXEMPT EMPLOYEES MUST USE PAID LEAVE IN FULL DAY INCREMENTS UNLESS THE LEAVE IS DESIGNATED UNDER QUALIFIED MEDICAL AND FAMILY REASONS COVERED BY CSU FAMILY AND MEDICAL LEAVE (FML).
    • NON-EXEMPT EMPLOYEES - UNDER THE FAIR LABOR STANDARDS ACT (FLSA), NON-EXEMPT EMPLOYEES MAY USE TIME IN LESS THAN FULL DAY INCREMENTS.
  - LESS THAN FULL TIME EMPLOYEES
    THE NUMBER OF HOURS (OR DAYS, IF EXEMPT) FOR EMPLOYEES WHO WORK LESS THAN FULL-TIME SHALL BE PRORATED ACCORDING TO THE PERCENT OR TIME BASE OF THE APPOINTMENT (HOURS NORMALLY SCHEDULED TO WORK).
  - RETROACTIVE CORRECTIONS
    ECRL IS EFFECTIVE ON MARCH 29, 2021 AND RETROACTIVE TO JANUARY 1, 2021. CAMPUSES ARE NOT REQUIRED TO PROACTIVELY PROCESS RETROACTIVE CORRECTIONS FOR EMPLOYEES WHO MAY HAVE USED THEIR OWN LEAVE BALANCES OR WERE DOCKED PAY FOR REASONS THAT QUALIFY FOR ECRL BETWEEN JANUARY 1, 2021 AND MARCH 29, 2021. EMPLOYEES MUST REQUEST A RETROACTIVE CORRECTION VERBALLY OR IN WRITING. THE CAMPUS REQUIRES AN EMPLOYEE REQUESTING A RETROACTIVE CORRECTION TO SUBMIT AN ECRL REQUEST FORM.
• **FAMILY MEDICAL LEAVE**
  
  IF COVID-19 RELATED LEAVE HAS BEEN EXHAUSTED, EMPLOYEES MAY BE ELIGIBLE FOR ADDITIONAL LEAVE UNDER **FAMILY MEDICAL LEAVE**.

•  

• UNDER THE CSU FAMILY MEDICAL LEAVE POLICY (FML), YOU MAY TAKE UP TO 12 WEEKS OF UNPAID LEAVE, TO CARE FOR A NEW CHILD, OR CARE FOR A SERIOUSLY ILL SPOUSE, DOMESTIC PARTNER, CHILD OR PARENT, OR IF YOU SUFFER A SERIOUS HEALTH PROBLEM. YOU MUST USE YOUR SICK LEAVE AND VACATION DAYS FIRST, AS APPROVED, BEFORE GOING ON UNPAID LEAVE. **LEAVE OF ABSENCE FORM**
EMPLOYEE BENEFITS CONT’D

• **WORKER’S COMPENSATION**

If you believe you contracted a COVID-19-related illness as a result of your university employment, you may be entitled to workers' compensation benefits through the university. This may include hospital, surgical, and medical treatment, disability indemnity, and death benefits. For more information, visit [https://www.csun.edu/hr/workplace-safety/workers-compensation.html](https://www.csun.edu/hr/workplace-safety/workers-compensation.html)
WHAT IS COVID-19

- COVID-19 IS A RESPIRATORY DISEASE CAUSED BY SARS-COV-2, A NEW CORONAVIRUS DISCOVERED IN 2019. THE VIRUS IS THOUGHT TO SPREAD MAINLY FROM PERSON TO PERSON THROUGH RESPIRATORY DROPLETS PRODUCED WHEN AN INFECTED PERSON COUGHS, SNEEZES, OR TALKS. SOME PEOPLE WHO ARE INFECTED MAY NOT HAVE SYMPTOMS. FOR PEOPLE WHO HAVE SYMPTOMS, ILLNESS CAN RANGE FROM MILD TO SEVERE. ADULTS 65 YEARS AND OLDER AND PEOPLE OF ANY AGE WITH UNDERLYING MEDICAL CONDITIONS ARE AT HIGHER RISK FOR SEVERE ILLNESS. FOR MORE DETAILS VISIT HTTPS://WWW.CDC.GOV/DOTW/COVID-19/INDEX.HTML
COVID-19: HOW IT SPREADS

PERSON-TO-PERSON

• BETWEEN PEOPLE WHO ARE LESS THAN ABOUT 6 FEET APART (THE GREATER THE DISTANCE THE LESS RISK)
• THROUGH RESPIRATORY DROPLETS FROM COUGHING, SNEEZING, SPITTEE, OR EVEN JUST BREATHING:
  DROPLETS CAN LAND IN THE MOUTHS, NOSE, EYES, OR BE INHALED DIRECTLY INTO RESPIRATORY SYSTEM
DROPLETS ALSO LAND ON SURFACES SO.. IF A COVID POSITIVE PERSON TOUCHES THEIR FACE THEY THEN CAN TRANSFER THE VIRUS TO SURFACES. SPREAD BY TOUCHING A CONTAMINATED SURFACE IS LESS LIKELY, BUT STILL POSSIBLE FOR HOURS TO DAYS AFTER CONTAMINATION

NOW - TOUCH A CONTAMINATED SURFACE OR OBJECT
AND THEN TOUCHING YOUR OWN MOUTH, NOSE, OR EYES

SANITIZE, SANITIZE, SANITIZE AND DON’T TOUCH YOUR MASK OR FACE
SYMPTOMS

MAY APPEAR 2-14 DAYS AFTER EXPOSURE TO THE VIRUS. PEOPLE WITH THESE SYMPTOMS MAY HAVE COVID-19:

• FEVER OR CHILLS
• COUGH
• SHORTNESS OF BREATH
• DIFFICULTY BREATHING
• FATIGUE
• MUSCLE OR BODY ACHES

• HEADACHE
• NEW LOSS OF TASTE OR SMELL
• SORE THROAT
• CONGESTION OR RUNNY NOSE
• NAUSEA OR VOMITING
• DIARRHEA

OR SYMPTOMS may MIMIC EXISTING ALLERGIES OR ASTHMA, etc so people DISMISS THEM – DON’T DISMISS ANY SYMPTOMS
CAMPUS CONTROLS AT MARITIME

• INCREASED BUILDING VENTILATION AND HIGHER EFFICIENCY AIR FILTERS
  • BUILDINGS WITH ENERGY EFFICIENT RECIRCULATION HAVE BEEN LOCKED OUT SO ONLY OUTSIDE AIR BROUGHT IN AND IS NOT RECIRCULATED.
  • BUILDINGS WITH OPERABLE WINDOWS CAN BE USED TO AUGMENT FRESH AIR
  • HIGHER RATED FILTERS AND PREFILTERS HAVE BEEN INSTALLED. EVEN THOUGH NOT RECIRCULATING THIS WILL HELP WHEN POOR AIR QUALITY IS EXPERIENCED.

• DAILY HEALTH CHECKS STILL REQUIRED TO ENSURE ILL PEOPLE STAY OFF CAMPUS. EVEN IF YOU LIVE ON CAMPUS. ILL PERSON MUST STAY IN DORM AND CALL STUDENT HEALTH

• ALL SYSTEMS ALREADY IN PLACE TO INVESTIGATE POSSIBLE POSITIVE COVID CASES AND CLOSE CONTACTS
CAMPUS CONTROLS AT MARITIME CONT’D

• PHYSICAL DISTANCING IS NO LONGER REQUIRED, AND FURNITURE HAS BEEN RETURNED TO PRE-COVID CONFIGURATIONS

• FACE COVERINGS, DISINFECTANTS, AND SANITIZER WILL REMAIN ACCESSIBLE THROUGHOUT CAMPUS

• INCREASED CLEANING AND DISINFECTING WILL CONTINUE IN CLASSROOMS AND PUBLIC SPACES
  • INDIVIDUAL OFFICES, LAB SPACES, PUBLICLY ACCESSIBLE EQUIPMENT - INDIVIDUALS MUST CONTINUE TO “CLEAN AT HELLO” AND “CLEAN AT GOODBYE”. EACH INDIVIDUAL PERFORMING THIS PROCESS ONLY SPENDS A MOMENT TO HELP SAFEGUARD THEMSELVES AND THE COMMUNITY

It’s simple…be a good SHIPMATE for the rest of us!
EVERY PERSON’S RESPONSIBILITIES

• COMPLETE DAILY HEALTH CHECK HONESTLY
  • IF ILL OR HAVE SYMPTOMS GET CLEARED BY YOUR PERSONAL PHYSICIAN BEFORE RETURNING TO CAMPUS
  • FOR STUDENTS

CALL FIRST OUR STUDENT HEALTH CENTER

(707) 654-1170
8:30 AM-5:30 PM MON – FRI
(CLOSED 1:00 PM – 2:00 PM FOR LUNCH)

FOR AFTER-HOURS URGENT MEDICAL OR PSYCHOLOGICAL CONCERNS/SYMPTOMS, CALL:

(707) 654-1170 AND SELECT OPTION 1
TO BE CONNECTED TO AN ADVICE NURSE.
AVAILABLE 24/7

https://www.csum.edu/web/health-services/
EVERY PERSON’S RESPONSIBILITIES CONT’D

- **WASH HANDS FREQUENTLY WITH SOAP AND WATER OR HAND SANITIZER IF WATER IS UNAVAILABLE**

1. **WET** your hands and apply soap.
2. **LATHER** the backs of your hands, between your fingers, under your nails.
4. **RINSE** your hands.
5. **DRY** your hands using a clean towel or air dry them.
6. **KEEP CLEAN** if in a public restroom use towel to open door to exit.
EVERY PERSON’S RESPONSIBILITIES CONT’D

• WHEN SHOULD I WASH HANDS WITH SOAP AND WATER OR HAND SANITIZER IF WATER IS UNAVAILABLE

ALL THE TIME!! ESPECIALLY...

BEFORE
• TOUCHING YOUR EYES, NOSE, OR MOUTH
• DONNING FACE COVERING
• DONNING GLOVES
• DURING, AND AFTER PREPARING FOOD
• EATING FOOD

AFTER
• Touching face or face covering
• Doffing gloves
• Blowing your nose, coughing, or sneezing
• Touching shared objects or surfaces
• Using the toilet
• Handling garbage
FULLY VACCINATED PERSON’S BENEFITS

• IF YOU ARE FULLY VACCINATED
  • YOUR CHANCE OF BECOMING EXTREMELY ILL OR DYING FROM COVID IS DRAMATICALLY REDUCED
  • ATTEST TO BEING FULLY VACCINATED AT THE END OF THIS TRAINING TO BE APPROVED TO REMOVE FACE COVERING ON THE CAMPUS
  • ANYONE MAY STILL CHOOSE TO WEAR A FACE COVERING AS DESIRED WITHOUT FEAR OF RETALIATION
  • IF YOU ARE IDENTIFIED AS A “CLOSE CONTACT” TO A COVID POSITIVE INDIVIDUAL YOU ARE NO LONGER REQUIRED TO QUARANTINE

“FULLY VACCINATED” MEANS THE PERSON RECEIVED, AT LEAST 14 DAYS PRIOR, EITHER THE SECOND DOSE IN A TWO-DOSE COVID-19 VACCINE SERIES OR A SINGLE-DOSE COVID-19 VACCINE. VACCINES MUST BE FDA APPROVED; HAVE AN EMERGENCY USE AUTHORIZATION FROM THE FDA; OR, FOR PERSONS FULLY VACCINATED OUTSIDE THE UNITED STATES, BE LISTED FOR EMERGENCY USE BY THE WORLD HEALTH ORGANIZATION (WHO).
UNVACCINATED PERSON’S RESPONSIBILITIES

• IF YOU ARE UNVACCINATED OR NOT FULLY VACCINATED
  • YOUR PERSONAL RISK FOR SEVERE ILLNESS REMAINS HIGH, BUT YOU ARE A REDUCED RISK TO FULLY VACCINATED INDIVIDUALS.
  • YOU MUST CONTINUE TO WEAR A FACE COVERING AROUND OTHERS ON CAMPUS OR WHILE ATTENDING CAMPUS EVENTS
  • IF YOU ARE IDENTIFIED AS A “CLOSE CONTACT” TO A COVID POSITIVE INDIVIDUAL YOU WILL BE REQUIRED TO QUARANTINE FOR UP TO 14 DAYS

• COVID-19 VACCINATIONS ARE READILY AVAILABLE TO ALL OVER 12 YEARS OF AGE. PLEASE PROTECT YOURSELF AND OTHERS AND GET VACCINATED HTTPS://WWW.VACCINES.GOV/SEARCH/
• Don’t put the covering around your neck or up on your forehead
• Don’t let it fall beneath your nose
• Don’t touch the face covering, and, if you do, wash or sanitize your hands FIRST
• Inspect and Wash cloth face coverings can be laundered with other clothes. Ensure elastic straps do not lose elasticity
CONCLUSION AND CERTIFICATION

• I ATTEST TO UNDERSTANDING ALL REQUIREMENTS OUTLINED IN THIS COVID-19 TRAINING. I FURTHER ATTEST THAT I WILL FOLLOW ALL REQUIREMENTS BASED ON MY PARTICULAR VACCINATION STATUS AND WILL CONTINUE TO WEAR A FACE COVERING ON CAMPUS AND DURING CAMPUS HOSTED EVENTS. FAILURE TO FOLLOW REQUIREMENTS OR MISREPRESENTING VACCINATION STATUS MAY RESULT IN DISCIPLINARY ACTION, EXPULSION OR TERMINATION.

• IF YOU HAVE ANY QUESTIONS OR REQUIRE ANY FOLLOW-UP STUDENTS SHOULD CONTACT THE STUDENT HEALTH CENTER AT 707-654-1170 AND EMPLOYEES SHOULD CONTACT ENVIRONMENTAL HEALTH & SAFETY AT 707-654-1176. IF YOU WOULD LIKE THIS COURSE PRESENTED IN PERSON ALSO CONTACT ENVIRONMENTAL HEALTH & SAFETY