

INJURY AND ILLNESS PREVENTION PROGRAM RCOE COVID-19 PREVENTION PLAN

California employers are required to establish and implement an Injury and Illness Prevention Program (IIPP) to protect employees from all worksite hazards, including infectious diseases.

It is the policy of the Riverside County Office of Education to ensure a safe and healthy environment for employees, students, volunteers, and visitors. Communicable and infectious diseases are minimized by providing prevention, education, identification through examination, surveillance, immunization, treatment and follow-up, isolation, and reporting.

This COVID-19 Prevention Plan (CPP) is a framework applicable during the current COVID-19 public health environment. The protocols that are outlined in this document are a phased approach and will be modified based on the ongoing and updated guidance from the CDC, state and local public health agencies, and organizational operations.

Cal/OSHA's regulations require protection for workers exposed to airborne infectious diseases such as the 2019 novel coronavirus disease (COVID-19). This guidance provides employers and workers with information for preventing exposure to the coronavirus (SARS-CoV-2), the virus that causes COVID-19. Employers and employees should review their own health and safety procedures as well as the recommendations and standards detailed below to ensure workers are protected.

Authority and Responsibility

The Program Administrators for the Riverside County Office of Education are: Dana Ruvalcaba, Director I, Benefits & Risk Management Services and Rhonda Nodal, Administrator, Risk Management.

The Program Administrators have the authority and the responsibility for implementing and maintaining this CPP for the Riverside County Office of Education. Site administrators, department managers, and supervisors are responsible for implementing the Program in their work areas and for answering worker questions about the Program. A copy of this Program has been placed on the RCOE website under the Risk Management Department's webpage.

All employees are responsible for using safe work practices, following all directives, policies and procedures, and assisting in maintaining a safe work environment.

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.

Definitions

"COVID-19" - Means coronavirus disease, an infectious disease caused by the severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2).

"COVID-19 Case" - Means a person who:

1. Has a positive COVID-19 test; or
2. Has a positive COVID-19 diagnosis from a licensed health care provider; or
3. Is subject to a COVID-19-related order to isolate issued by a local or state health official; or
4. Has died due to COVID-19, in the determination of a local health department or per inclusion in the COVID-19 statistics of a county.

"Close Contact" - Means the following, unless otherwise defined by regulation or order of the California Department of Public Health (CDPH), in which case the CDPH definition shall apply:

1. In indoor spaces of 400,000 or fewer cubic feet per floor, a close contact is sharing the same indoor airspace as a COVID-19 case for a cumulative total of 15 minutes or more in a 24-hour period during the COVID-19 case's infectious period as defined by this section. This definition applies regardless of the use of face coverings.
2. In indoor spaces of greater than 400,000 cubic feet per floor, a close contact is defined as being within six feet of the COVID-19 case for a cumulative total of 15 minutes or more over a 24-hour period during the COVID-19 case's infectious period as defined by this section, regardless of the use of face coverings.
3. Offices, suites, rooms, waiting areas, break or eating areas, bathrooms or other spaces that are separated by floor to ceiling walls shall be considered distinct indoor spaces.

Exception: Employees have not had a close contact if they wore a respirator required by RCOE and used in compliance with Title 8, Section 5144 whenever they would otherwise have had a close contact.

“COVID-19 Hazard” - Means potentially infectious material that may contain SARS-CoV-2, the virus that causes COVID-19. Potentially infectious materials include airborne droplets, small particle aerosols, and airborne droplet nuclei, which most commonly result from a person or persons exhaling, talking or vocalizing, coughing, sneezing, or procedures performed on persons which may aerosolize saliva or respiratory tract fluids.

“COVID-19 Symptoms” - Means

- Shortness of breath or difficulty breathing
 - Cough
 - Fever of 100.4 degrees Fahrenheit or higher
 - Chills
 - Fatigue
 - Muscle or body aches
 - Sore throat
 - New loss of taste or smell
 - Headache
 - Diarrhea
 - Nausea or vomiting
 - Congestion or runny nose
- unless a licensed health care professional determines the person's symptoms were caused by a known condition other than COVID-19.

“COVID-19 Test” – Means a test for SARS-CoV-2 that is:

1. Approved, cleared, or authorized, including in an Emergency Use Authorization (EUA), by the United States Food and Drug Administration (FDA) to detect current infection with the SARS-CoV-2 virus (e.g., a viral test) and;
2. Administered in accordance with the authorized instructions.
3. To meet the return to work criteria set forth in this policy, a COVID-19 test may be both self-administered and self-read only if another means of independent verification of the results can be provided (e.g., a time-stamped photograph of the results).

“Exposed Group” - Means all employees at a work location, working area, or common area at work, within employer-provided transportation, or residing within group employer-provided housing, where an employee COVID-19 case was present at any time during the infectious period, including restrooms, walkways, hallways, aisles, break or eating areas, and waiting areas. The following exceptions apply:

1. For the purpose of determining the exposed group, a place where persons momentarily pass through, without congregating is not a work location, working area, or a common area at work.
2. If the COVID-19 case was part of a distinct group of employees who are not present at the workplace at the same time as other employees, for instance a work crew or shift that does not overlap with another work crew or shift, only employees within that distinct group are part of the exposed group.
3. If the COVID-19 case visited a work location, working area, or a common area at work for less than 15 minutes during the infectious period, and the COVID-19 case was wearing a face covering during the entire visit other people at the work location, working area, or common area are not part of the exposed group.

“Face Covering” - Means a surgical mask, a medical procedure mask, a respirator worn voluntarily, or a tightly woven fabric or non-woven material of at least two layers that completely covers the nose and mouth and is secured to the head with ties, ear loops, or elastic bands that go behind the head. If gaiters are worn, they shall have two layers of fabric or be folded to make two layers. A face covering is a solid piece of material without slits, visible holes or punctures, and must fit snugly over the mouth, nose, and chin with no large gaps on the outside of the face. A face covering does not include a scarf, ski mask, balaclava, bandana, turtleneck, collar, or single layer of fabric.

This definition includes clear fac coverings or cloth face coverings with a clear plastic panel that otherwise meet this definition, and which may used to facilitate communication with people who are deaf or hard-of-hearing or others who need see a speaker’s mouth or facial expressions to understand speech or sign language respectively.

“Infectious Period” - Means the following time period, unless otherwise defined by CDPH regulation or order, in which case the CDP definition shall apply

1. For COVID-19 cases who develop symptoms: from two days before they first develop symptoms until
 - a 10 days have passed after symptoms first appeared, or through day five is testing negative on day five or later; AND
 - b 24 hours have passed with no fever without the use of fever-reducing medications, AND symptoms have improved

For COVID-19 cases who never develop COVID-19 symptoms: from two days before the positive specimen collection date through ten days (or through day five if testing negative on day five or later) after the date on which the specimen for their positive COVID-19 test was collected.

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

“Returned Case” means a COVID-19 case who was excluded from work but returned pursuant to subsection 3205(c)(5)(A) and did not develop any COVID-19 symptoms after returning. A person shall only be considered a returned case for 30 days after the initial onset of COVID-19 symptoms or, if the person never developed COVID-19 symptoms, for 30 days after the first positive test. If a period of other than 30 days is required by a CDPH regulation or order, that period shall apply.

“Worksite” for the limited purposes of this section and the outbreaks section, means the building, store, facility, agricultural field, or other location where a COVID-19 case was present during the infectious period. It does not apply to buildings, floors, or other locations of the employer that a COVID-19 case did not enter.

Communication

Communication between employees and RCOE on matters relating to COVID-19 mitigation and response is an important aspect to ensure employee safety while in the workplace. Therefore, RCOE has a communication system through Risk Management that is intended to accomplish clear and concise exchange of information by providing a single point of contact for administrators and supervisors.

1. All employees and their authorized employee representatives are encouraged to report COVID-19 hazards, mitigation practices, or possible COVID-19 exposure in the workplace to their supervisors or administrators.
2. Administrators and supervisors who, after assessing the report, determine that additional guidance or assistance is required shall contact Risk Management who will triage the report and notify essential RCOE personnel for an appropriate response.
3. Any RCOE employees with medical or other conditions that put them at increased risk of severe COVID-19 illness may contact Risk Management to discuss accommodations.

Essential Infection Prevention Measures/Guidelines:

To the extent possible, RCOE will implement the following guidelines to mitigate employee exposure to the coronavirus disease (COVID-19) in the workplace.

All persons in our workplace are treated as potentially infectious, regardless of symptoms, vaccination status, or negative COVID-19 test results.

COVID-19 is treated as an airborne infectious disease. Applicable State of California and Riverside University Health Systems orders and guidance will be reviewed when determining measures to prevent transmission and identifying and correcting COVID-19 hazards. COVID-19 prevention controls include:

- i. Remote work.
- ii. Physical distancing.
- iii. Reducing population density indoors.
- iv. Moving indoor tasks outside.
- v. Implementing separate shifts and/or break times.
- vi. Restricting access to work areas.

We will also:

1. Encourage sick employees to stay home.
2. If identified at work and upon notification to a supervisor or administrator that an employee is showing symptoms related to COVID-19, send the employee home or to medical care, as needed.
3. To the extent supplies are in stock and readily available for distribution, employees will have access to appropriate hygiene products in the workplace such as handwashing facilities and hand sanitizer (face masks and face shields are available upon request). Hand sanitizer is available for all employees, and dispensing stations have been added in high traffic areas. Use of hand sanitizers with methyl alcohol is prohibited.
4. Critical to ongoing implementation and timely updates to the plan, employees are encouraged to communicate with their supervisor regarding any safety concerns or changes needed to existing COVID-19 prevention controls.

Employee Training

Training and instruction on COVID-19 prevention is provided:

1. When this CPP was first established.
2. To new employees.
3. To employees given a new job assignment involving COVID-19 hazards and they have not been previously trained.
4. Whenever new COVID-19 hazards are introduced.
5. When we are made aware of new or previously unrecognized COVID-19 hazards.
6. For supervisors to familiarize themselves with the COVID-19 hazards to which employees under their immediate direction and control may be exposed.

Records are kept as required and per the recordkeeping section of this plan.

Hand Hygiene

Hand hygiene procedures include the use of alcohol-based hand rubs and 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. If soap and water are not readily available, use an alcohol-based hand sanitizer (containing 60-95% alcohol).

- Hand washing with Soap and Water:
- Wet hands first with water (avoid using hot water)
- Apply soap to hands
- Rub hands vigorously for at least 20 seconds, covering all surfaces of hands and fingers.
- Rinse hands with water and dry thoroughly with paper towel
- Use paper towel to turn off water faucet

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 Alcohol-based Hand Rub (follow manufacturer's directions):

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

Handwashing facilities will be maintained to provide adequate supply of hand washing soap and paper towels.

Face Coverings

Employees will be provided face coverings and required to wear them:

- When required by orders from the CDPH. This includes spaces within vehicles when a CDPH regulation or order requires face coverings indoors.
- During outbreaks and major outbreaks.
- When employees return to work after having COVID-19 until 10 days have passed since the date that COVID-19 symptoms began or, if the person did not have COVID-19 symptoms, from the date of their first positive COVID-19 test, or after a close contact. Please refer to the section in this FAQ on CDPH's Isolation and Quarantine Guidance.

Face coverings will be clean, undamaged, and worn over the nose and mouth.

The following exceptions apply:

1. When an employee is alone in a room or vehicle.
2. While eating or drinking at the workplace, provided employees are at least six feet apart and, if indoors, the supply of outside or filtered air has been maximized to the extent feasible.
3. While employees are wearing respirators required by the employer and used in compliance with CCR, Title 8 section 5144.
4. Employees who cannot wear face coverings due to a medical or mental health condition or disability, or who are hearing-impaired or communicating with a hearing-impaired person. Such employees shall contact Risk Management regarding reasonable accommodations. Accommodations that will be considered may include wearing an effective non-restrictive alternative, such as a face shield with a drape on the bottom, if the condition or disability permits it.
5. During specific tasks which cannot feasibly be performed with a face covering. This exception is limited to the time period in which such tasks are actually being performed.

If an employee is not wearing a face covering due to exceptions (4) and (5), above, the COVID-19 hazards will be assessed, and action taken as necessary. Employees will not be prevented from wearing a face covering, including a respirator, when not required by this section, unless it creates a safety hazard.

Respirators

Respirators will be provided for voluntary use to employees who request them and who are working indoors or in vehicles with more than one person. Employees who request respirators for voluntary use will be:

- Encouraged to use them.
- Provided with a respirator of the correct size.
- Trained on:
 - How to properly wear the respirator provided.
 - How to perform a user seal check according to the manufacturer's instructions each time a respirator is worn.
 - The fact that facial hair interferes with a seal.

The requirements of CCR, Title 8 section 5144(c)(2) will be complied with according to the type of respirator (disposable filtering face piece or elastomeric re-usable) provided to employees.

Ventilation

For our indoor workplaces we will:

- Review CDPH and Cal/OSHA guidance regarding ventilation, including the CDPH **Interim Guidance for Ventilation, Filtration, and Air Quality in Indoor Environments**. Develop, implement, and maintain effective methods to prevent transmission of COVID-19, including one or more of the following actions to improve ventilation:
 - Maximize the supply of outside air to the extent feasible, except when the United States Environmental Protection Agency (EPA) Air Quality Index is greater than 100 for any pollutant or if opening windows or maximizing outdoor air by other means would cause a hazard to employees, for instance from excessive heat or cold.
 - In buildings and structures with mechanical ventilation, filter circulated air through filters at least as protective as Minimum Efficiency Reporting Value (MERV)-13, or the highest level of filtration efficiency compatible with the existing mechanical ventilation system.
 - Use High Efficiency Particulate Air (HEPA) filtration units in accordance with manufacturers' recommendations in indoor areas occupied by employees for extended periods, where ventilation is inadequate to reduce the risk of COVID-19 transmission.
- Determine if our workplace is subject to CCR, Title 8 section 5142 Mechanically Driven Heating, Ventilating and Air Conditioning (HVAC) Systems to Provide Minimum Building Ventilation, or section 5143 General Requirements of Mechanical Ventilation Systems, and comply as required.

In vehicles, we will maximize the supply of outside air to the extent feasible, except when doing so would cause a hazard to employees or expose them to inclement weather.

Employee Responsibility

During this COVID-19 public health environment, employees have a collective responsibility to ensure the protection of all people in the workplace by staying abreast of current public health guidelines to mitigate exposure to the coronavirus disease (COVID-19).

1. Employees should stay home if they are sick, follow public health agency guidelines, and contact Risk Management without fear of reprisal.
2. Employees who test positive for COVID-19 or have been in close contact with someone who tested positive need to contact Risk Management as soon as possible.

RCOE's Response to COVID-19 Cases

Procedures to investigate COVID-19 illnesses at the workplace include:

1. Determining the day and time a COVID-19 case was last present; the date of the positive COVID-19 tests or diagnosis; and the date the COVID-19 case first had one or more COVID-19 symptoms. Appendix B Investigating COVID-19 Cases will be used to document this information.
2. Effectively identifying and responding to persons with COVID-19 symptoms at the workplace.
3. Encouraging employees to report COVID-19 symptoms and to stay home when ill.

Effective procedures for responding to COVID-19 cases at the workplace include:

1. Immediately excluding COVID-19 cases (including employees excluded under CCR, Title 8, section 3205.1) according to the following requirements:
 - i. COVID-19 cases who do not develop COVID-19 symptoms will not return to work during the infectious period.
 - ii. COVID-19 cases who develop COVID-19 symptoms will not return to work during the shorter of either of the following:
 - a. The infectious period.
 - b. Through 10 days after the onset of symptoms and at least 24 hours have passed since a fever of 100.4 degrees Fahrenheit or higher has resolved without the use of fever-reducing medication.
 - iii. Regardless of vaccination status, previous infection, or lack of COVID-19 symptoms, a COVID-19 case must wear a face covering in the workplace until 10 days have passed since the date that COVID-19 symptoms began or, if the person did not have COVID-19 symptoms, from the date of their first positive COVID-19 test.

- iv. Elements i. and ii. apply regardless of whether an employee has been previously excluded or other precautions were taken in response to an employee's close contact or membership in an exposed group.
2. Reviewing current **California Department of Public Health (CDPH)** guidance for persons who had close contacts, including any guidance regarding quarantine or other measures to reduce transmission.
 - b. The following effective policies will be developed, implemented, and maintained to prevent transmission of COVID-19 by persons who had close contacts.
 - c. If an order to isolate, quarantine, or exclude an employee is issued by a local or state health official, the employee will not return to work until the period of isolation or quarantine is completed or the order is lifted.
 - d. If removal of an employee would create undue risk to a community's health, RCOE may submit a request for a waiver to Cal/OSHA in writing to rs@dir.ca.gov to allow employees to return to work if it does not violate local or state health official orders for isolation, quarantine, or exclusion.
 - e. Upon excluding an employee from the workplace based on COVID-19 or a close contact, RCOE will provide excluded employees information regarding COVID-19-related benefits to which the employee may be entitled under applicable federal, state, or local laws. This includes any benefits available under legally mandated sick leave, workers' compensation law, local governmental requirements, and leave policies and leave guaranteed by contract.

Testing of Close Contacts

COVID-19 tests are available at no cost, during paid time, to all of our employees who had a close contact in the workplace. These employees will be provided with the information outlined in paragraph (4)(f), above.

Exceptions are returned cases as defined in CCR, Title 8, section 3205(b)(11).

Notice of COVID-19 cases

Employees and independent contractors who had a close contact, as well as any employer with an employee who had a close contact, will be notified as soon as possible, and in no case longer than the time required to ensure that the exclusion requirements of paragraph (4)(a) above, are met.

When Labor Code section 6409.6 or any successor law is in effect, we will:

- Provide notice of a COVID-19 case, in a form readily understandable to employees. The notice will be given to all employees, employers, and independent contractors at the worksite.
- Provide the notice to the authorized representative, if any of:
 - The COVID-19 case and of any employee who had a close contact.
 - All employees on the premises at the same worksite as the COVID-19 case within the infectious period.

Reporting, Recordkeeping, and Access

RCOE will report information about COVID-19 cases at our workplace to the local health department, RCOE's Third Party Administrator, and/or Cal/OSHA whenever required by law, and provide any related-information requested by these entities.

RCOE will maintain records of the steps taken to implement the IIPP COVID-19 Addendum in accordance with CCR Title 8 section 3203(b). The IIPP COVID-19 Addendum shall be made available at the workplace to employees, authorized employee representatives, and to representatives of Cal/OSHA immediately upon request.

Records to track all COVID-19 cases will be maintained by Risk Management and retained for two years beyond the period in which it is necessary to meet the requirements of CCR, Title 8, sections 3205, 3205.1, 3205.2, and 3205.3. The notices required by subsection 3205(e) will be kept in accordance with Labor Code section 6409.6 or any successor law.

COVID-19 Outbreaks

Applies if three or more employee COVID-19 cases within an exposed group visited the workplace during their infectious period at any time during a seven-day period, unless a CDPH regulation or order defines outbreak using a different number of COVID-19 cases and/or a different time period. Reference CCR, Title 8 section 3205.1 for details.

This addendum will stay in effect until there are one or fewer new COVID-19 cases detected in the exposed group for a seven-day period.

Exclude from Work

All COVID-19 cases, as well as employees who had close contacts but do not take a COVID-19 test, will be excluded from the workplace.

COVID-19 Testing

We immediately provide COVID-19 testing available at no cost to our employees within the exposed group, regardless of vaccination status, during employees' paid time, and continue to make test available to employees at least weekly until there are one or fewer new COVID-19 cases detected in the exposed group for a 14-day period.

Employees who had close contacts and remain at work will be required to take a COVID-19 test within three to five days after the close contact and those who test positive for COVID-19 will be excluded. Those who do not take a COVID-19 test will be excluded until our return-to-work requirements have been met.

Face Coverings

Employees in the exposed group, regardless of vaccination status, will wear face coverings when indoors, or when outdoors and less than six feet from another person, unless one of the exceptions in our CPP applies.

Respirators

Employees will be notified of their right to request and receive a respirator for voluntary use, as stipulated in our CPP.

COVID-19 investigation, review, and hazard correction

RCOE will perform a review of potentially relevant COVID-19 policies, procedures and controls, and implement changes as needed to prevent further spread of COVID-19 when this addendum initially applies and periodically thereafter. The investigation, review, and changes will be documented and include:

- Investigation of new or unabated COVID-19 hazards including:
 - Our leave policies and practices and whether employees are discouraged from remaining home when sick.
 - Our COVID-19 testing policies.
 - Insufficient supply of outdoor air to indoor workplaces.
 - Insufficient air filtration.
 - Insufficient physical distancing.
- Review updated every 30 days that CCR, Title 8 section 3205.1 continues to apply:
 - In response to new information or to new or previously unrecognized COVID-19 hazards.
 - When otherwise necessary.
- Any changes implemented to reduce the transmission of COVID-19 based on the investigation and review, which may include:
 - Moving indoor tasks outdoors or having them performed remotely.
 - Increasing the outdoor air supply when work is done indoors.
 - Improving air filtration.
 - Increasing physical distancing to the extent feasible.
 - Requiring respiratory protection in compliance with CCR, Title 8 section 5144.
 - Other applicable controls.

Ventilation

Buildings or structures with mechanical ventilation will have recirculated air filtered with Minimum Efficiency Reporting Value (MERV)-13 or higher efficiency filters, if compatible with the ventilation system. If MERV-13 or higher filters are not compatible with the ventilation system, filters with the highest compatible filtering efficiency will be used. High Efficiency Particulate Air (HEPA) air filtration units will be used in accordance with manufacturers' recommendations in indoor areas

occupied by employees for extended periods, where ventilation is inadequate to reduce the risk of COVID-19 transmission.

These ventilation requirements will continue to be implemented after the outbreak has passed and CCR, Title 8 section 3205.1 is no longer applicable.

Major Outbreaks

The following will be done while CCR, Title 8 section 3205.1 applies if 20 or more employee COVID-19 cases in an exposed group visited the worksite during their infectious period within a 30-day period:

- Exclude COVID-19 cases as well as employees in the exposed group who do not take a COVID-19 test.
- Immediately ensure that all employees in the exposed group who remain at work are tested for COVID-19 at least twice weekly until there are one or fewer new COVID-19 cases detected in the exposed group for a 14-day period. Employees in the exposed group that do not take the COVID-19 test will be excluded until our return-to-work criteria have been met.
- Report the outbreak to Cal/OSHA.
- Provide respirators for voluntary use to employees in the exposed group, encourage their use, and train employees according to CCR, Title 8 section 5144(c)(2) requirements.
- Any employees in the exposed group who are not wearing respirators as required will be separated from other persons by at least six feet, except where it can be demonstrated that at least six feet of separation is not feasible, and except for momentary exposure while persons are in movement. Methods of physical distancing include:
 - Telework or other remote work arrangements.
 - Reducing the number of persons in an area at one time, including visitors.
 - Visual cues such as signs and floor markings to indicate where employees and others should be located or their direction and path of travel.
 - Staggered arrival, departure, work, and break times.
 - Adjusted work processes or procedures, such as reducing production speed, to allow greater distance between employees.

When it is not feasible to maintain a distance of at least six feet, individuals will be as far apart as feasible.

COVID-19 Prevention in Employer-Provided Transportation

The requirements of our CPP will be complied with within a vehicle, including how a COVID-19 case will be responded to.

Assignment of transportation

To the extent feasible:

- Transportation will be assigned such that cohorts travel and work together, separate from other workers.
- Employees who usually maintain a household together shall travel together.

NOTE: This IIPP COVID-19 Addendum supersedes the IIPP COVID-19 Required Supplement 1/29/21. This CPP supersedes the IIPP COVID-19 Addendum, updated 8/31/23.

