

ADP's
Cal-OSHA-Compliant
COVID-19 Prevention Program (CPP)

COVID-19 Prevention Program (CPP) for ADP

This CPP is designed to control associates' exposures to the SARS-CoV-2 virus (severe acute respiratory syndrome coronavirus 2) that causes COVID-19 (Coronavirus Disease 2019) that may occur in our workplace.

Date: 3/10/2022

Authority and Responsibility

Suzette Tierney, Director Financial Risk Management and Denise Petite, Sr Director of Facilities have the overall authority and responsibility for implementing the provisions of this CPP in our workplace. In addition, all managers and supervisors are responsible for implementing and maintaining the CPP in their assigned work areas and for ensuring associates receive answers to questions about the program in a language they understand.

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

Identification and Evaluation of COVID-19 Hazards

- ADP evaluates associates' potential workplace exposures to all persons at, or who may enter, our workplace.
- ADP will conduct workplace-specific evaluations where COVID-19 could occur
- The ADP Mobile Return to Office (RTO) App documents the vaccination status of our associates, which is maintained as a confidential medical record.
- ADP has developed COVID-19 policies and procedures to respond effectively and immediately to individuals at the workplace who are a COVID-19 case to prevent or reduce the risk of transmission in the workplace. ADP does this by tracing all ADP contacts of an associate who is COVID-19 positive (*an associate is COVID-19 positive when they have taken a test which is confirmed by a laboratory that they have the virus.*) or presumptive positive (*some associates who are symptomatic may be clinically diagnosed by a doctor with COVID-19 based on their symptoms and including despite a negative test result. These associates are categorized as presumptive positive*).
The tracing is designed to find the close contacts because the close contacts could be infectious irrespective as to whether they are symptomatic. The current protocol is that if an associate who is a close contact and Not fully vaccinated is quarantined in their home for 10 days, from the date of their last exposure, unless they are a critical onsite associate (COA). A COA who is asymptomatic may return to the office without quarantine based on strict assessment, prevention, and monitoring protocols. This is applicable regardless of vaccination status. They will be instructed to be tested 5 days post exposure.
- ADP reviews applicable orders and general and industry-specific guidance from the State of California, Cal/ OSHA, and the local health department related to COVID-19 hazards and prevention.
- ADP evaluates existing COVID-19 prevention controls in our workplace and the need for different or additional controls, including but not limited to notification / escalation (COVID Hotline at 678-256-6900) and sanitation of the infected area.
- Together ADP's COVID-19 Response Team and ADP's designated site leaders are responsible for ensuring that policies and procedures are complied with.
- Practice social distancing based on Column D of CA Mitigation Requirements

To maintain a safe work environment and to reduce the potential spread of infection, ADP facilities will establish and coordinate the following measures:

- Clean and disinfect workspaces before opening an office.
- Implement daily cleaning regimen and frequency.
- Determine and obtain supplies necessary to accommodate the number of associates returning to the office (e.g., hand sanitizer, cleaning products that meet the COVID-19 pandemic standards).
- Ensure appropriate air filters and air flow into workspaces to meet the required standards during

the COVID-19 pandemic.

- Implement new procedures for use of the bistros, cafeterias, and markets, including remote ordering.
- Post signage to ensure associates are aware of any limits on use of elevators, conference rooms, and workstations.
- Respond promptly to the direction from ADP's COVID-19 Response Team to isolate an area and provide additional cleaning if exposure to COVID-19 was identified in the workspace Associate participation.

Associate Participation

Associates and their authorized associates' representatives are encouraged to participate in the identification and evaluation of COVID-19 hazards by **sharing any hazards with their manager or HR Business Partner (HRBP). These hazards will be addressed by management in the appropriate departments. (i.e., if additional cleaning is needed this will be directed to facilities).**

An additional resource for associates is the COVID-19 hotline. Managers and associates should be encouraged to utilize these resources when they have questions regarding COVID-19. The Global Health & Wellness COVID-19 Hotline line is (678) 256-6900. This number is active and staffed 24/7.

Caution: This is not an emergency number. If associates have a medical or other emergency, they should call their local emergency response provider.

Associates can call the Covid-19 hotline for the following:

- If they become diagnosed with COVID-19 (via testing or by a Health Care Provider).
- If they are in Close Contact with an Individual who was diagnosed with COVID-19.
- They learned that a co-tenant of a shared ADP facility has a positive case of COVID-19 at their business.
- They wish to speak with a member of ADP's Medical Staff.

Associate screening

We screen our associates and respond to those with COVID-19 symptoms by completing a daily health self-assessment based on California Department of Public Health (CDPH) guidelines before entering the office.

Correction of COVID-19 Hazards

Unsafe or unhealthy work conditions, practices or procedures are reported through the COVID-19 Hotline, local Health and Wellness Center (HWC), HR Staff or through the daily health screen Mobile APP. This will create notification of a hazard that will be reviewed and corrected in a timely manner based on the severity of the hazards, as follows:

- The severity of the hazard will be assessed per the ADP Return to Office Facility Playbook.
- Corrective action identified.
- Responsible individuals are identified for timely correction.
- Follow-up measures are taken to ensure timely correction.

Control of COVID-19 Hazards

Face Coverings

We provide clean, undamaged face coverings and ensure they are properly worn by associates that are not fully vaccinated when they are indoors or in vehicles, and where required by orders from the California Department of Public Health (CDPH). Face covering requirements will be posted at the security desk/front door. Additional posters with face mask requirements will be located throughout the facilities.

Face coverings can be obtained at the guard station or by submission of a work order via the RE Help Desk at 800-551-5052.

Associates required to wear face coverings in our workplace may remove them under the following conditions:

- When an associate is alone in a room or a vehicle.
- While eating or drinking at the workplace, provided associates are at least six feet apart and outside air supply to the area, if indoors, has been maximized to the extent feasible.
- When associates are required to wear respirators in accordance with our respirator program that meets section 5144 requirements.
- Associates 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 associates will wear an effective, non-restrictive alternative, such as a face shield with a drape on the bottom, if their condition permits it. If their condition does not permit it, then the associate will be at least six feet apart from all other persons and either fully vaccinated or tested at least weekly for COVID-19.
- Face shields with a drape at the bottom will be available for those associates who cannot wear masks and can be obtained at the guard station or by submission of a work order via the RE Help Desk at 800-551-5052.
- Specific tasks that cannot feasibly be performed with a face covering. This exception is limited to the time in which such tasks are being performed.

Any associates not wearing a required face covering will be at least six feet apart from all other persons unless the unmasked associate is either fully vaccinated or tested at least weekly for COVID-19.

We will not prevent any associates from wearing a face covering when it is not required unless it would create a safety hazard, such as interfering with the safe operation of equipment.

Face coverings will also be provided to any associate that requests one, regardless of their vaccination status. **Face covering can be obtained at the guard station or by submission of a work order via the RE Help Desk at 800-551-5052.**

Engineering controls

For indoor locations, we identify and evaluate how to maximize, to the extent feasible, ventilation with outdoor air using the highest filtration efficiency compatible with our existing ventilation system, and whether the use of portable or mounted High Efficiency Particulate Air (HEPA) filtration units, or other air cleaning systems, would reduce the risk of transmission.

To maintain appropriate air quality, ADP facilities utilize a heating, ventilation, and air conditioning (HVAC) system to regulate both the temperature and fresh air at the site.

- We are adhering to industry-standard and maximizing outside air intake
- We filter recirculated air 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, we will use filters with the highest compatible filtering efficiency. We will also evaluate whether portable or mounted High Efficiency Particulate Air (HEPA) filtration units or other air cleaning systems would reduce the risk of transmission and, if so, implement their use to the degree feasible.
- Minimal of quarterly replacement of filters
- Minimum of 4 ACH (air changes per hour)

Cleaning and disinfecting

Facilities contracts with a third party to conduct the cleaning and disinfecting. The cleaning company carries out the cleaning and disinfecting according to CDC guidelines on COVID Cleaning.

To maintain a safe work environment and to reduce the potential spread of infection, ADP facilities will establish and coordinate the following measures:

- Clean and disinfect workspaces before opening an office. ADP ensures there are adequate supplies and adequate time for cleaning and disinfecting to be completed properly.
- Implement daily cleaning regimen and frequency, including notification to associates and authorized associate representatives of the frequency and scope of cleaning and disinfection.

- Determine and obtain supplies necessary to accommodate the number of associates returning to the office (e.g., hand sanitizer, cleaning products that meet the COVID-19 pandemic standards).
- Ensure appropriate air filters and air flow into workspaces to meet the required standards during the COVID-19 pandemic.
- Implement procedures for use of the bistros, cafeterias, and markets, including remote ordering
- Post signage to ensure associates are aware of any limits on use of elevators, conference rooms, and workstations.
- Respond promptly to the direction from ADP's COVID-19 Response Team to isolate an area and provide additional cleaning if exposure to COVID-19 was identified in the workspace.

Should we have a COVID-19 case in our workplace, we will implement the following procedures:

Facilities contracts with a third party to conduct the cleaning and disinfecting. The cleaning company carries out the cleaning and disinfecting according to CDC guidelines on COVID Cleaning. Facilities will direct where the cleaning/disinfecting will occur

a. Office Cleaning Procedures

- After the where and when has been determined and corroborated through the interview and badge data review process above, Facilities will be provided the specific location for deep cleaning and a description of the parts of the ADP facility where a hazard is identified. This will include personal work areas, common areas such as break rooms and bathrooms, and entrances. Additional cleaning – go back 2 full days of the Covid report, if associate in an ADP office, cleaning would be ordered: Facilities will also:
- Advise whether the ADP office must be closed for cleaning and the expected reopening date
- Notify the Corporate Crisis Management Team (CCMT) when the facility is cleaned and reopened; documented in CARE (ADP system that tracks COVID exposures)
- Notify the landlord in a shared office building
- Notify the Site and HR Leader
- Other actions:
 1. CCMT will decide whether badges need to be deactivated to facilitate cleaning
 2. GSO will advise onsite security of the facility status

Hand sanitizing

To implement effective hand sanitizing procedures, we encourage associates to wash hands by placing corresponding signage throughout building, including, but not limited to break rooms, restrooms and corridors. We prohibit hand sanitizers that contain methanol (i.e., methyl alcohol.)

In addition to that we have implemented the following hand sanitizing procedures:

- Evaluated handwashing facilities.
- Provided hand free hands-free faucet fixtures and soap dispensers throughout the site including restrooms and breakroom/pantries
- Provide hand sanitizing stations in facility common areas, where soap and water may not be available, including, but not limited to conference rooms, copy stations, etc.
- Encouraging and allowing time for associate handwashing.
- Encouraging associates to wash their hands for at least 20 seconds each time.

Personal protective equipment (PPE) used to control associates' exposure to COVID-19

We evaluate the need for PPE (such as gloves, goggles, and face shields) as required by section 3380, and provide and ensure use of such PPE as needed.

Upon request, we provide respirators for voluntary use to all associates who are not fully vaccinated and who are working indoors or in vehicles with more than one person. **All associates are encouraged to use respirators in compliance with section 5144(c)(2).**

We provide and ensure use of respirators in compliance with section 5144 when deemed necessary by Cal/OSHA. **Respirators can be obtained at the guard station or by submission of a work order via the RE Help Desk at 800-551-5052.**

Testing of symptomatic associates

We make COVID-19 testing available at no cost to all associates who had close contact in the workplace and have COVID-19 symptoms, during associates' paid time.

Investigating and Responding to COVID-19 Cases

We have developed effective procedures to investigate COVID-19 cases that include seeking information from our associates regarding COVID-19 cases, close contacts, test results, and onset of symptoms.

Reporting

An Associate who has tested positive, is presumptively positive, has self-identified as being a close contact of a COVID-19 individual should report this directly to ADP through the COVID-19 Hotline (678 256 6900) (for US only at this time), the Roseland Health and Wellness Center, local medical department, HR Staff or through the daily health screen app. Managers or others who receive reports from an affected associate should report this through the options described above.

Response

The Infection response protocol is initiated upon receipt of the COVID-19 report from the CARE Site, or other means described in the Reporting Section of this guide.

1. Information is reported into CARE by associate or via proxy for associates who are sick or close contacts

The following information is obtained:

- Associate Name
- Associate's Manager Name
- Office Location
- Business Unit
- Last date in ADP or Client office
- Date of Test (if applicable)
- First Date Symptomatic (if applicable)
- If they were in close contact with ADP associate or clients
- For close contacts

2. Infection Response Teams are alerted to new reports and will review the provided information for further actions.

- a) Medical Staff or designee will make the following determinations:
 - i. Is contact tracing necessary
 - ii. What level if any of additional cleaning is necessary (this may also be determined as part of the Contact Tracing Interview)

3. A Member of our Global Security Organization (GSO) may review and complete the following actions:

- a) Review badge history (Badge data-GSO may pull badge data for the sick associate for the period 2 days prior to symptoms to the current date and will be recorded in the CARE system)
 - As applicable, badge data for contact tracing: GSO pulls the badge data to identify both where the associate visited an ADP facility and when the associate visited each facility. GSO compares the dates and locations with the information provided by associate report and identifies any inconsistencies for purposes of contact tracing when necessary.
- b) Review video if necessary

- Video (GSO)-where a sick associate worked within a critical site detailed on the Critical Site List, GSO may retrieve video data to assist the manager, site leader, and facilities identify those specific locations requiring disinfection and those associates who would be included as close contacts. This would normally be done where there is a question as to whether a facility needs to be completely cleaned. Video is used to assist in contact tracing (below)
- c) Temporarily Disable badge, if applicable
 - Temporary Badge deactivation- Once the associate receives one of the three statuses, GSO will deactivate the badge until the associate is medically cleared to return to work as outlined in Return to Work below. This action is documented in the CARE system. Note, vaccination status is taken into consideration for Close Contacts.
- d) Reenable Badge if applicable
 - Upon receipt of an associate's clearance for return to work, GSO will enable the associate's badge for access previously authorized. This action is recorded in the CARE system, with the date of reactivation of the badge.

4. HR or designated entity will review and complete the following actions

- a) Determine criticality of site and associate
 - During the associate interview identified above, HR will identify the associate's worksite during the in-scope contact tracing period and whether the site is listed on the Critical Site List. If the associate works at a Critical Site, this information will be noted in the CARE.
- b) Initiate Contact Tracing (if applicable)
 - Engage Associate's Direct Leader
- c) Inform Site Leader (if impact to office)
- d) Inform close contacts identified
- e) Determine business impact
 - During discussions with the Associate's manager, ADP will determine whether there are any identified business impacts due to the associate's illness.

5. Facilities will carry out activities as directed by HWC or designated entity

- a.) Office Cleaning
 - After the where and when has been determined and corroborated through the interview and badge data review process above, Facilities will be provided the specific location for deep cleaning and a description of the parts of the ADP facility that was used by the sick associate. This will include personal work areas, common areas such as break rooms and bathrooms, and entrances. Additional cleaning – go back 2 full days of the Covid report, if associate in an ADP office, cleaning would be ordered: Facilities will also:
 - Advise whether the ADP office must be closed for cleaning and the expected reopening date
 - Notify the CCMT (Tim Ryan, Ken Glantz, and Ken Mallette) when the facility is cleaned and reopened; documented in CARE
 - Notify the landlord in a shared office building
 - Notify the Site and HR Leader for RTO offices (this is completed by AR)
 - Other actions:
 1. CCMT will decide whether badges need to be deactivated to facilitate cleaning
 2. GSO will advise onsite security of the facility status

6. Communications

- a. CCMT will advise EXCOM of all facility closings
- b. In coordination with the Infectious Response Team, the Comms team will prepare necessary communications for site associates
- c. Both internal and external communication teams will be apprised as to the nature of the situation including anonymized associate information and specific facility impacts. These teams will

decide whether internal and external communications are necessary. Some communications that have been disseminated previously are:

- Office wide email regarding building closures
- External communications to landlords in shared office buildings
- Calls with ADP close contacts (carried out by HR /AR)
- Calls/Notification with Clients (carried out by AR /Manager)

7. Welfare Checks

Covering most locations, ADP has Medical Staff available to speak with Associates to discuss questions related to Covid-19 or who wish to schedule a Tele-Medicine visit. Associates in certain functions including Sales and those in Critical On Site roles will be contacted within a few days of any report of a Covid diagnosis.

All other associates will receive a clearance email along with a reach out (via WebEx or phone), once ten days have passed (since reporting symptoms of Covid) or if no symptoms, 10 days from the date of the test.

8. Infection Response Team Leader

Will determine whether to close site and report to Leadership

System for Communicating

Our goal is to ensure that we have effective two-way communication with our associates, in a form they can readily understand, and that it includes the following information:

- Associates should report COVID-19 symptoms, possible close contacts and hazards to the COVID-19 Hotline (678-256-6900)
- That associates can report symptoms, possible close contacts and hazards without fear of reprisal.
- ADP recognizes that there may be some associates with medical disabilities that require temporary reasonable accommodations under the Americans with Disabilities Act (ADA) because of COVID-19. Associates who believe they have a medical condition that rises to the level of a disability under the ADA should contact ADP's Accommodations Consultants at AR_TLCA@adp.com
- Testing will be provided to associates consistent with CCR Title 8 section 3205. Specifically, testing will be provided at no cost to unvaccinated associates who are symptomatic, regardless of known exposure, and to close contacts of work exposure, regardless of vaccination status. In the event of an outbreak or major outbreak, ADP will offer 1x weekly free COVID-19 testing to all employees identified as working in the worksite or exposed group, at no cost. We will provide this testing on a weekly basis until there are no new COVID-19 cases in the worksite/exposed group for 14 straight calendar day. In the event of a major outbreak, the company will offer twice weekly testing to associates at no cost to all employees in the worksite or exposed group, until there are no new COVID-19 cases in the worksite or exposed group for 14 straight calendar days. ADP will not necessarily offer testing to those who have recovered from COVID-19 in the past 90 days.
- An associate can find information about how ADP is handling their personal data specifically in response to the COVID-19 pandemic and in the context of the RTO transition. Please read the ADP Privacy Statement related to COVID-19 pandemic for Associates and Contingent Workers.

Training and Instruction

Associate instruction has been provided in the form of a memo to all California associates, along with this COVID-19 Prevention Program and a Quick Reference Guide (Infographic) Covering:

- Our COVID-19 policies and procedures to protect associates from COVID-19 hazards, and how to participate in the identification and evaluation of COVID-19 hazards. (See infographic and Prevention



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at a Glance FINAL .p

Program)

- Information regarding COVID-19-related benefits (including mandated sick and vaccination leave) to which the associates may be entitled under applicable federal, state, or local laws.

- The fact that:
 - COVID-19 is an infectious disease that can be spread through the air.
 - COVID-19 may be transmitted when a person touches a contaminated object and then touches their eyes, nose, or mouth.
 - An infectious person may have no symptoms.
- The fact that particles containing the virus can travel more than six feet, especially indoors, so physical distancing, face coverings, increased ventilation indoors, and respiratory protection decrease the spread of COVID-19 and are most effective when used in combination.
- The right of associates that are not fully vaccinated to request a respirator for voluntary use, without fear of retaliation.
- Associates who voluntarily use respirators will make a mandatory consultation with the HWC and will be trained according to how to wear them and perform a seal check according to the manufacturer's instructions. The Global Health & Wellness COVID-19 Hotline line is (678) 256-6900. Following the consultation, the associate must read, complete and sign the Appendix.
Please note that facial hair can interfere with a seal.
- The importance of frequent hand washing with soap and water for at least 20 seconds and using hand sanitizer when associates do not have immediate access to a sink or hand washing facility, and that hand sanitizer does not work if the hands are soiled.
- Proper use of face coverings and the fact that face coverings are not respiratory protective equipment. Since COVID-19 is an airborne disease, N95s and more protective respirators protect the users from airborne disease, while face coverings primarily protect people around the user.
 - The conditions where face coverings must be worn at the workplace.
 - That face coverings are additionally recommended outdoors for people who are not fully vaccinated if six feet of distance cannot be maintained.
 - Associates can request face coverings and can wear them at work regardless of vaccination status and without fear of retaliation.
- COVID-19 symptoms and the importance of obtaining a COVID-19 test and not coming to work if the associate has COVID-19 symptoms.
- Information on our COVID-19 policies and how to access COVID-19 testing and vaccination, and the fact that vaccination is effective at preventing COVID-19, protecting against both transmission and serious illness or death.

Exclusion of COVID-19 Cases and Associates who had a Close Contact

Where we have a COVID-19 case or close contact in our workplace, we limit transmission by:

- Ensuring that COVID-19 cases are excluded from the workplace until our return-to-work requirements are met.

1) Conduct contact tracing to identify close contacts*

Contact tracing is where ADP identifies all ADP related interactions (colleagues and clients) who were within 6 feet of the sick associate for 15 or more cumulative minutes within a 24-hour period. Shorter but repeated contacts that add up to 15 minutes over a 24-hour period are considered criteria as close contacts.

- This is frequently done by interview and badge data to supplement where necessary. Cases to date show that some associates can identify their contacts with a high degree of confidence while others are unable to either because their medical condition precludes an interview, or they incorrectly identify the days they were in the office as revealed through badge data. Additionally, with respect to critical sites such as print operations and data centers, understanding specific locations within these sites has proven critical. In those situations, ADP has used internal badge data and video data to identify locations that needed disinfection and associates who were excluded as close contacts. Finally, the reliability and speed of acquiring and analyzing this data will become even more important as ADP reopens offices. Because most associates were working from home as the initial wave of COVID struck, sick associates were frequently beginning symptoms weeks after leaving the ADP office. This minimized the impact on other ADP associates and facilities. However, with the return of associates into the offices, the impact of a sick associate will be greater. Additionally, with the occurrence of influenza like illness set to increase

during the autumn months and through the winter, this will increase the number of sick associates that will appear to be experiencing COVID like symptoms. Therefore, ADP will need to respond to both an increase in actual COVID cases and cases that appear to be COVID but are not.

Contact Tracer key responsibilities

- 1) To determine if any close contacts
- 2) Inform Close Contacts
- 3) To determine if cleaning is necessary and area to clean (communicate to Facilities and Site Leader)

If determined Contact Tracing is necessary, establish the period for which you will look for any close contacts as follows: **

If symptomatic – go back 48 hours from onset of symptoms – (for both tested positive and presumed positive-diagnosed with COVID by a health care provider)

If asymptomatic and tested positive– go back 48 hours from the date infected person was tested

Return to Work Process

ADP's Health and Wellness Centers (HWC) have created guidelines for previously sick or infected with COVID-19 associates returning to the office, based on CDC interim guidance^[1]. These guidelines and processes will be adapted based on additional guidance from governmental and health agencies.

ADP associates who reported that they tested positive for COVID-19 (COVID Positive) or were diagnosed with COVID-19 but not tested (Presumptive Positive) will be cleared to return to work as follows:

- a) Those who have medical clearance done by a health care provider will notify the Health & Wellness Center team via the Roseland Health & Wellness Center mailbox.
- b) Those who don't have medical clearance from an outside health care provider will obtain the clearance from ADP's HWC.

Details of the in-house clearance by the HWC staff is as follows: (handled generally via email)

Associates Who Previously Tested Positive

1. **Hospitalized and Leave of Absence ADP associates:** may return to work once cleared by their provider.
2. **Home recovery who tested positive for COVID**_ADP will follow the CDC guidelines. Persons who were symptomatic, tested positive for COVID-19, and were directed to care for themselves at home, may discontinue home isolation and return to work under the following conditions
 - a. **Symptom-based strategy for medical clearance**
 - At least 1 day-have passed *since recovery* defined as resolution of fever without the use of fever-reducing medications **and** improvement in respiratory symptoms (e.g., cough, shortness of breath); **and**,
 - At least 10 days have passed *since symptoms first appeared*.
 - b. **Test-based strategy** for medical clearance -This is based on test availability in the state, or region. Any associate should have a negative diagnostic test to be cleared.

Tested positive and is asymptomatic: place on home isolation for 10 days and clear for work if remains asymptomatic.

Associates Who Were Diagnosed but Never Tested (Presumptive)

Home recovery in isolation: we will follow the CDC recommendation for Time Since Illness Onset and Time Since Recovery guidelines.

Persons with COVID-19 who had symptoms and were directed to care for themselves at home may discontinue home isolation and return to work under the following conditions:

- At least **one day** (24hours) have passed since recovery defined as resolution of fever without the use of fever-reducing medications and improvement in respiratory symptoms (e.g., cough, shortness of breath); and
- At least **ten days** have passed since symptoms first appeared.

The ADP Health and Wellness Center will store and maintain the RTW documentation of associates with COVID 19 related illness.

Associates Who Were Close Contacts and Continued to be In Contact with COVID- 19 Positive Individual (Not Vaccinated)

These associates will require clearance to return to the office and will be asked the following questions:

- During the last 10 days, have you had any symptoms associated with COVID-19? If so, when?
 - Have you tested positive or been diagnosed with COVID-19 in the past 10 days?
- If the answer is NO to both questions they may return to work.

Communication of medical clearance

Once medically cleared, HWC will update CARE which will notify the associate and generate notice to GSO to re-activate the associate's badge. A record of this will be stored in the Electronic Medical Records system maintained by the Health and Wellness Center.

Additional CDC Guidance for Critical On-Site Associates/Close Contacts

Return to work safety practices for asymptomatic (not displaying symptoms) critical on-site associates who are close contacts of covid-19 infected individuals. (The associate has been exposed to an individual who has been confirmed by testing, or is presumed to be positive, with COVID-19.)

An associate who is a close contact of a COVID-19 individual, regardless of vaccination status may remain in the workplace provided the following safety measures are followed:

- **Regular Monitoring:** If the associate doesn't have a temperature or symptoms, they should self-monitor under the supervision of their ADP manager.
- **Wear a Mask:** The associate should always wear a well-fitted face mask while in the workplace for 10 days after last exposure.
- **Disinfect and Clean workspaces:** Clean and disinfect all areas such as offices, bathrooms, common areas, shared electronic equipment routinely (desktop, laptop, telephone).

Reporting, Recordkeeping, and Access

It is our policy to:

- Report information about COVID-19 cases and outbreaks at our workplace to the local health department whenever required by law, and provide any related information requested by the local health department.
- Maintain records of the steps taken to implement our written COVID-19 Prevention Program in accordance with section 3203(b).
- Make our written COVID-19 Prevention Program available at the workplace to associates, authorized associate representatives, and to representatives of Cal/OSHA immediately upon request.
- To support the infection response activity described in this guide, ADP developed an application called CARE (COVID-19 Associate Response Environment). The CARE system is an internally ADP developed database that:
 - Tracks sick associates
 - Controls access to personal information and reduces the use of email
 - Supports automation: Creates workflows concerning contact tracing, disinfection, return to

work and reporting

ADDENDUM: Multiple COVID-19 Infections and COVID-19 Outbreaks (3+ associates)

[Please refer to this addendum if 3 or more associates COVID-19 cases within an exposed group visited the workplace during their high-risk exposure period at any time during a 14-day period. Reference section [3205.1](#) for details.]

This addendum will stay in effect until there are no new COVID-19 cases detected in the exposed group for a 14-day period.

COVID-19 testing

We provide COVID-19 testing at no cost to all associates, during paid time, in our exposed group except for:

- Associates who were not present during the relevant 14-day period.
- COVID-19 cases who did not develop symptoms after returning to work pursuant to our return-to-work criteria, no testing is required for 90 days after the initial onset of symptoms or, for COVID-19 cases who never developed symptoms, 90 days after the first positive test.

COVID-19 testing consists of the following:

- All associates in our exposed group are immediately tested and then again one week later. Negative COVID-19 test results of associates with COVID-19 exposure will not impact the duration of any quarantine, isolation, or exclusion period required by, or orders issued by, the local health department.
- After the first two COVID-19 tests, we continue to provide COVID-19 testing once a week of associates in the exposed group who remain at the workplace, or more frequently if recommended by the local health department, until there are no new COVID-19 cases detected in our workplace for a 14-day period.
- We provide additional testing when deemed necessary by Cal/OSHA.

We continue to comply with the applicable elements of our CPP, as well as the following:

1. Associates in the exposed group wear face coverings when indoors, or when outdoors and less than six feet apart (unless one of the face-covering exceptions indicated in our CPP apply).
2. We give notice to associates in the exposed group of their right to request a respirator for voluntary use if they are not fully vaccinated.
3. We evaluate whether to implement physical distancing of at least six feet between persons, or where six feet of physical distancing is not feasible, the need for use of cleanable solid partitions of sufficient size to reduce COVID-19 transmission.

COVID-19 investigation, review, and hazard correction

We immediately perform a review of potentially relevant COVID-19 policies, procedures, and controls and implement changes as needed to prevent further spread of COVID-19.

- Investigation of new or unabated COVID-19 hazards including:
 - Our leave policies and practices and whether associates are discouraged from remaining home when sick.
 - Our COVID-19 testing policies.
 - Insufficient outdoor air.
 - Insufficient air filtration.
 - Lack of physical distancing.

- Implementing changes to reduce the transmission of COVID-19 based on the investigation and review. We consider:
 - Moving indoor tasks outdoors or having them performed remotely.
 - Increasing outdoor air supply when work is done indoors.
 - Improving air filtration.
 - Increasing physical distancing as much as feasible.
 - Requiring respiratory protection in compliance with section 5144.

Buildings or structures with mechanical ventilation

We will filter recirculated air 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, we will use filters with the highest compatible filtering efficiency. We will also evaluate whether portable or mounted High Efficiency Particulate Air (HEPA) filtration units or other air cleaning systems would reduce the risk of transmission and, if so, implement their use to the degree feasible.

ADDENDUM: Major COVID-19 Outbreaks (20 + associates)

[This addendum will be needed if 20 or more associate COVID-19 cases in an exposed group visit your workplace during the high-risk exposure period within a 30-day period. Reference section [3205.2](#) for details.]

This addendum will stay in effect until there are fewer than three COVID-19 cases detected in our exposed group for a 14-day period.

We continue to comply with the Multiple COVID-19 Infections and COVID-19 Outbreak's addendum, except that the COVID-19 testing, regardless of vaccination status, is made available to all associates in the exposed group twice a week, or more frequently if recommended by the local health department.

In addition to complying with our CPP and Multiple COVID-19 Infections and COVID-19 Outbreak's addendum, we also:

- Provide associates in the exposed group with respirators for voluntary use in compliance with section 5144(c)(2) and determine the need for a respiratory protection program or changes to an existing respiratory protection program under section 5144 to address COVID-19 hazards.
- Separate by six feet (except where we can demonstrate that six feet of separation is not feasible and there is momentary exposure while persons are in movement) any associates in the exposed group who are not wearing respirators required by us and used in compliance with section 5144. When it is not feasible to maintain a distance of at least six feet, individuals are as far apart as feasible
- Install cleanable solid partitions that effectively reduce transmission between the associate and other persons at workstations where an associate in the exposed group is assigned to work for an extended period, such as cash registers, desks, and production line stations, and where the physical distancing requirement (described above) is not always maintained.
- Evaluate whether to halt some or all operations at the workplace until COVID-19 hazards have been corrected.
- Implement any other control measures deemed necessary by Cal/OSHA

Appendix: COVID-19 Respirator Training Roster

Appendix D to Sec. 1910.134 (Mandatory) Information for Employees Using Respirators When Not Required Under the Standard

Respirators are an effective method of protection against designated hazards when properly selected and worn. Respirator use is encouraged, even when exposures are below the exposure limit, to provide an additional level of comfort and protection for workers. However, if a respirator is used improperly or not kept clean, the respirator itself can become a hazard to the worker. Sometimes, workers may wear respirators to avoid exposures to hazards, even if the amount of hazardous substance does not exceed the limits set by OSHA standards. If your employer provides respirators for your voluntary use, or if you provide your own respirator, you need to take certain precautions to be sure that the respirator itself does not present a hazard.

You (employee) should do the following:

1. Read and heed all instructions provided by the manufacturer on use, maintenance, cleaning and care, and warnings regarding the respirator's limitations.
2. Choose respirators certified for use to protect against the contaminant of concern. NIOSH, the National Institute for Occupational Safety and Health of the U.S. Department of Health and Human Services, certifies respirators. A label or statement of certification should appear on the respirator or respirator packaging. It will tell you what the respirator is designed for and how much it will protect you.
3. Do not wear your respirator into atmospheres containing contaminants for which your respirator is not designed to protect against. For example, a respirator designed to filter dust particles will not protect you against gases, vapors, or very small solid particles of fumes or smoke.
4. Keep track of your respirator so that you do not mistakenly use someone else's respirator.

Date: **[enter date]**

Person that conducted the training: **[enter name(s)]**

Employee Name	Signature