

**AGENDA
REGULAR MEETING
YECA GOVERNING BOARD
December 2, 2020
2:00 P.M. Public Session**

Woodland Police Department, 1000 Lincoln Ave, “Community Room,” Woodland, CA 95695

NOTE: This meeting is being agendaized to allow Board Members, staff, and the public to participate in the meeting via teleconference, pursuant to the Governor’s Executive Order N-29-20 (March 17, 2020), available at the following link:

Teleconference Options to join Zoom meeting:

By PC: <https://us02web.zoom.us/j/84256097223>

Meeting ID: 842 5609 7223

Or

By Phone: (669) 900-6833

Meeting ID: 842 5609 7223

ALL ITEMS ARE FOR ACTION UNLESS OTHERWISE NOTED WITH AN ASTERISK (*)

1. Call to Order (2:00 PM)

2. Approval of the Agenda

3. Announcements

- a. The City Council of Winters has appointed John P. Miller, Chief of Police as primary and Brad L. Lopez, Fire Chief as alternate to the YECA Board of Directors, adopted August 18, 2020
- b. Resolution:
 - i. Eloise Austin retirement effective Dec 28, 2020, after serving 17-years with YECA
- c. Promotions:
 - i. Laura Swink – Dispatch Supervisor
 - ii. Amanda Garrison – Dispatcher III (Lead)

4. Public Comment

Speakers must state their name and city of residence for the record and limit their remarks to three minutes. Members of the public audience may address the Governing Board on any item not on today’s agenda. No response is required and no action can be taken, however, the Governing Board may add the item to the agenda of a future meeting.

5. Consent Agenda

Consent Agenda items are considered to be routine and will be considered for adoption by one motion. There will be no separate discussion of these items unless a member of the Governing Board, member of the audience, or staff requests that the Governing Board remove an item. If an item is removed, it will be discussed in the order in which it appears on the Agenda.

- a. Approval of the Minutes from the October 7, 2020, Regular Meeting
- b. Operations Division Report
- c. Current Year Budget Status Update
- d. 2020 3rd Quarter – Dispatch to Que
- e. Administrative Holiday Closure
- f. Yolo County Dispatchers Association Side Letter - MOU Extension
- g. YECA Injury & Illness Program Including Covid-19 Supplement

6. After Hours YECA Call Outs for County/City Departments – *Voted Item

- a. Staff summary memorializing the hours Dispatch is responsible for handling call outs for various County/City Departments

7. Disaster Recovery Project Update – Info Only

- a. Staff update regarding the completion status of this project

8. YECA Intranet Website Demo – Info Only

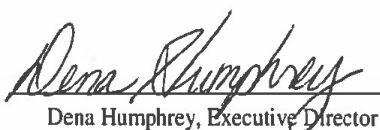
- a. Demo of YECA’s new intranet site for staff internal use

9. Next Scheduled JPA Board Meeting –TBD

10. Items for Future Agenda

11. Adjournment

I declare under penalty of perjury that the foregoing agenda was available for public review and posted on/or before November 27, 2020 on the bulletin board outside of the Yolo County, Erwin Meier Administration Center, 625 Court St., Woodland, California and on the agency website:



Dena Humphrey, Executive Director

PUBLIC PARTICIPATION INSTRUCTIONS:

Based on guidance from the California Department of Public Health and the California Governor's Office, in order to minimize the spread of the COVID 19 virus, please do the following:

1. You are strongly encouraged to observe the live stream of the meeting at <https://us02web.zoom.us/j/84256097223>, Meeting ID: 842 5609 7223 or by phone at (669) 900-6833 Meeting ID: 842 5609 7223.
2. If you are joining the meeting via zoom and wish to make a comment on an item, press the "raise a hand" button. If you are joining the meeting by phone, press *9 to indicate a desire to make comment. The chair will call you by name or phone number when it is your turn to comment. Speakers will be limited to 3:00 minutes.
3. If you choose not to observe the meeting but wish to make a comment on a specific agenda item, please submit your comment via email by 5:00 p.m. on the Monday prior to the meeting. Please submit your comment to the Dena Humphrey at dhumphrey@yolo911.org. Your comment will be placed into the record at the Board meeting.
4. If you are watching/listening to the live stream of the meeting and wish to make either a general public comment or to comment on a specific agenda item as it is being heard, you may also submit your comment, limited to 250 words or less, to the Dena Humphrey at dhumphrey@yolo911.org noting in the subject line: For Public Comment. Every effort will be made to read your comment into the record, but some comments may not be read due to time limitations. Comments received after an agenda item will be made part of the record if received prior to the end of the meeting.

If you are a person with a disability and you need disability related accommodations to attend the meeting, please contact Corina Macias at (530) 666-8919 or (530) 666-8909 (fax). Requests for accommodations must be made at least two full business days before the start of the meeting.

**YOLO EMERGENCY COMMUNICATIONS AGENCY (YECA)
GOVERNING BOARD**

**October 7, 2020
2:00 P.M. Public Session**

The YECA Governing Board met on Wednesday October 7, 2020 at the Woodland Police Department 1000 Lincoln Ave – Community Room, Woodland. Chair Derrek Kaff called the meeting to order at 2:02 p.m. This meeting was formatted to allow Board Members, staff, and the public to participate in the meeting via teleconference, pursuant to the Governor’s Executive Order N-29-20 (March 17, 2020), was available at the following link:

Teleconference Options to join Zoom meeting:

By PC: <https://us02web.zoom.us/j/82508885682>

Meeting ID: 825 0888 56825; By Phone: (669) 900-6833 Meeting ID: 825 0888 5682

PRESENT: Primary Board Members: Derrek Kaff, City of Woodland, Rebecca Ramirez, Yocha Dehe Wintun Nation, Dena Humphrey YECA Executive Director,

Joined via ZOOM: Tom Lopez, Yolo County, Steve Binns, City of West Sacramento, John Miller, City of Winters.

Entry No.2

Minute Order No. 2020-22

Approval of the Agenda - [Approved as presented](#)

MOTION: Ramirez SECOND: Binns AYES: Kaff, Miller, Lopez, Binns, Ramirez

Entry No. 3

Minute Order NO. 2020-23

Announcements –

- a. Recent Passing of AB1945 Reclassifies CA Dispatchers to First Responders
Chair Kaff congratulated Yolo911 Public Safety Dispatchers in the recent signing of AB1945 by Governor Newsom. Chair Kaff commented “Dispatchers are First Responders and the lifeline to the community in an emergency”
- b. Proclamation “Yolo911 Public Safety Telecommunications Week Oct. 11th – 17th “
Chair Derrek Kaff recognized “Yolo 911 Public Safety Telecommunications Week” by releasing an official proclamation.

Entry No. 4

Public Comment – None

Entry No. 5

Minute Order No. 2020-24; Approval of Consent Agenda - [Approved](#)

- a. Approval of the Minutes from the August 5, 2020, Regular Meeting
- b. Operations Division Report
- c. Current Year Budget Status Update

MOTION: Lopez SECOND: Ramirez AYES: Kaff, Miller, Binns, Ramirez, Lopez,

Entry No. 6

Old Business - Informational only – Dena Humphrey, Executive Director presented.

- a. General discussion on YECA Building
– No additional information. Due to uncertainties and economic fiscal impact Board advised to revisit after January 2021.

Entry No. 7

General Discussion for Dispatch Appreciation Week Oct 11th – 17th – Informational only

Dena Humphrey presented – Provided a brief summary of Dispatch Appreciation Week and extended an invite to Board Members to join in on the celebration.

Entry No. 8

Minute Order NO. 2020-25 Closed Session @ 2:17 p.m.

- a. Conference with Labor Negotiator (CG54957.6)

Agency Representative: Gregory Ramirez

Employee Organization: Yolo Communications Dispatchers Association (YCDA)

Resumed meeting @ 2:30 p.m. – No Action Taken

Entry No. 9

Next Scheduled JPA Board Meeting –Next meeting December 2, 2020

Entry No. 10 Items for Future Agenda –

Rumsey Repeater – Options to override limitations

Entry No. 11 Meeting Adjourned at 2:35 p.m.

Minutes submitted by Eloise Austin

STAFF REPORT

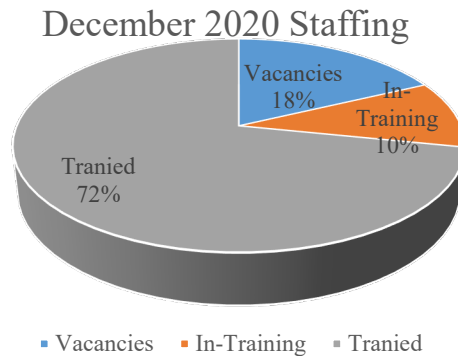
Agenda Item: 5.b.

Date: December 2, 2020
To: YECA Governing Board
Thru: Dena Humphrey, Executive Director
From: Leah Goodwin, Operations Manager
Subject: September & October 2020 Combined Operations Division Report
Recommendation: No action required; information only.
Summary: Operations staff is currently engaged in the following:

Staffing:

1. Out of 39 funded operations positions:

Classification	Filled	Funded	Vacant
Supervisor	4	4	0
Dispatcher III	3	4	1
Dispatcher I/II	21	26	5
Dispatch Assistant	4	5	1
TOTAL	32	39	7



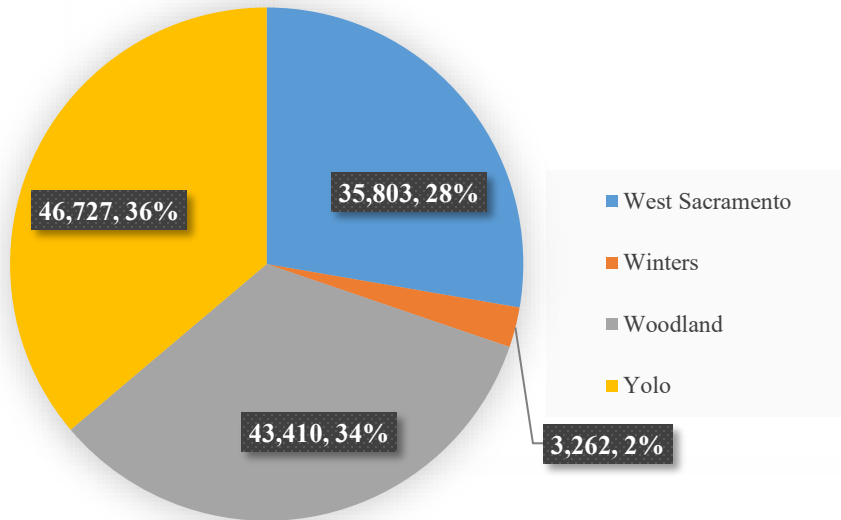
- a. Michelle Pineda has completed training on the WSP radio and has begun training on the Fire Radio (3rd console).
 - b. Naiya Johnson has completed training on the YSO/WNP radio and has begun training on the Fire Radio (3rd console).
 - c. Karina Zainasheff has completed training on the Fire Radio (1st console) and is scheduled to begin training on the YSO/WNP radio on December 1, 2020.
 - d. Brittany Bray has completed the call-taking phase of training and has begun training on the West Sacramento Police Radio (1st console).
 - e. Bailey Clemons has completed the call-taking phase of training.
2. Four applicants are in the background phase of the selection process for an early 2021 start date.
 3. Recruitment is in progress for a 2nd 2021 Academy, estimated May 2021.
 4. Laura Swink has been promoted to Dispatch Supervisor.
 5. Amanda Garrison has been promoted to Dispatcher III.

Statistical Information:

Monthly Phone Statistics:

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	YTD
9-1-1	3,923	4,320	4,432	4,536	4,843	5,473	5,215	5,285	5,131	5,142	48,300
7-Digit Emergency	784	876	789	741	923	1,139	1,095	1,036	1,014	1,001	9,398
AMR	108	96	96	67	80	80	76	90	71	134	898
West Sacramento	3,240	3,253	3,597	3,399	3,396	4,102	3,578	3,751	3,745	3,742	35,803
Winters	234	224	332	300	369	400	380	409	288	326	3,262
Woodland	3,850	3,928	4,215	4,162	4,536	4,790	4,765	4,486	4,126	4,552	43,410
Yolo	4,749	5,082	4,854	4,432	4,886	4,026	5,047	4,946	4,250	4,455	46,727
Outgoing	5,563	5,768	5,020	5,105	5,858	7,154	5,699	6,262	5,803	5,460	57,692
TOTAL	22,451	23,547	23,335	22,742	24,891	27,164	25,855	26,265	24,428	24,812	245,490

**2020 YTD
Incoming Non-Emergency Lines**

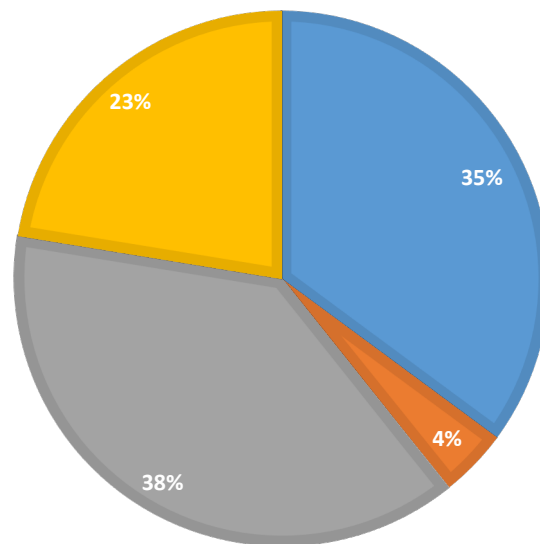


Monthly CAD Events:

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	YTD
West Sacramento											
TOTAL	5,618	5,582	5,362	5,201	5,173	5,719	6,003	5,999	5,906	5,773	56,336
Winters											
TOTAL	795	690	669	627	681	682	640	601	559	637	6,581
Woodland											
TOTAL	5,959	5,990	5,536	5,425	6,374	6,380	6,287	6,295	6,651	6,531	61,428
Yolo											
TOTAL	4,058	4,098	3,493	3,800	3,791	3,452	3,577	3,380	3,250	3,068	35,967
Yocha Dehe											
TOTAL	37	26	19	4	9	32	31	25	26	21	230
Arbuckle											
TOTAL	24	29	24	19	40	63	61	29	26	45	360
Outside Agency/non-geo validated											
TOTAL	76	62	52	60	73	59	82	89	116	138	807
UCD											
TOTAL	126	137	102	45	62	71	67	72	81	111	874
GRAND TOTAL	16,693	16,614	15,257	15,181	16,203	16,458	16,748	16,490	16,615	16,324	162,583

2020 YTD CAD EVENTS

■ West Sacramento ■ Winters ■ Woodland ■ Yolo



Fire CAD Events:

2020 Fire Events

Operations Monthly Division Report Sept & Oct 2020 p3

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	YTD
West Sacramento											
Fire	325	318	384	286	335	439	446	460	461	428	3,882
Medical	506	501	511	462	488	436	503	509	511	530	4,957
TOTAL	831	819	895	748	823	875	949	969	972	958	8,839
Winters											
Fire	72	85	82	60	64	60	50	69	37	39	618
Medical	33	36	31	28	33	35	39	46	31	44	356
TOTAL	105	121	113	88	97	95	89	115	68	83	974
Woodland											
Fire	378	355	347	305	346	388	399	397	401	362	3,678
Medical	410	401	375	305	384	372	388	393	357	418	3,803
TOTAL	788	756	722	610	730	760	787	790	758	780	7,481
Yolo											
Fire	614	880	882	771	622	481	542	311	229	265	5,597
Medical	79	82	70	83	69	74	77	99	81	76	790
TOTAL	693	962	952	854	691	555	619	410	310	341	6,387
Yocha Dehe											
Fire	11	12	9	4	5	10	15	11	13	12	102
Medical	26	26	10	0	4	22	16	14	13	9	140
TOTAL	37	38	19	4	9	32	31	25	26	21	242
Arbuckle											
Fire	14	18	13	11	25	22	40	19	12	31	205
Medical	10	11	11	8	15	41	21	10	14	14	155
TOTAL	24	29	24	19	40	63	61	29	26	45	360
UCD											
Fire	81	87	65	35	49	62	58	63	60	77	637
Medical	45	50	37	10	13	9	9	9	21	34	237
TOTAL	126	137	102	45	62	71	67	72	81	111	874
ALL											
Fire	1,495	1,755	1,782	1,472	1,446	1,462	1,550	1,330	1,183	1,183	14,658
Medical	1,109	1,104	1,045	896	1,006	989	1,053	1,080	1,023	1,123	10,428
TOTAL	2,604	2,859	2,827	2,368	2,452	2,451	2,603	2,410	2,206	2,306	25,086

CLETS Inquiries/Returns:

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	YTD
Inquiries	36,531	38,102	29,557	29,405	34,033	28,326	40,321	33,384	38,280	35,984	343,923
Returns	59,039	61,578	47,768	47,523	55,002	45,779	65,164	53,953	61,866	58,155	555,828

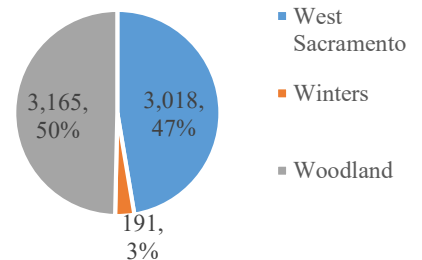
Confidential Records Requests (Audio & CAD Print out):

Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	YTD
143	112	145	73	103	117	94	134	58	91	1,070

After-Hours Records Entries:

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	YTD
West											
Sacramento	336	343	281	167	270	225	267	381	361	387	3018
Winters	16	23	34	11	18	21	24	10	18	16	191
Woodland	424	401	364	170	212	234	267	399	369	325	3165
TOTAL	776	767	679	348	500	480	558	790	748	728	6,374

2020 YTD Records Entries



Text to 9-1-1:

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Total YTD
TOTAL	<u>25</u>	<u>9</u>	<u>22</u>	<u>16</u>	<u>15</u>	<u>30</u>	<u>28</u>	<u>19</u>	<u>14</u>	<u>7</u>	185

IROC Orders/Entries:

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	YTD
IROC	0	1	0	0	0	9	8	28	7	0	53

Projects:

1. Promotions:
 - a. Dispatch Supervisor Vanesa Hoyt promoted (June, 2020)– in training
 - b. Dispatcher Supervisor Laura Swink (October, 2020) – in training
 - c. Lead Dispatcher Amanda Garrison (November 2020) – in training
2. EMD-QA
3. Policy Manual Revisions
4. Disaster Recovery Plan
5. Recruitment – in progress
6. Succession Planning
7. 2021 In-Service Training Plan
8. 2021 Vacation Bids
9. CalOES GIS Pilot Project
10. Next Gen 9-1-1 Equipment Installations



Quarter 3, 2020 Law Call Statistics

Call Processing Time - All Calls

Average Seconds from First Keystroke to Pending Queue Entry										
PRIORITY	WDP		WNP		WSP		YSO		Total	
	Average	# of Calls	Average	# of Calls	Average	# of Calls	Average	# of Calls	Average	# of Calls
1	87	226	105	13	82	364	91	171	86	774
2	126	1849	120	140	123	1,929	105	607	122	4,525

Queue Entry to First Unit Dispatched - Units Available

Average Seconds from Pending Queue Entry to First Unit Dispatched										
PRIORITY	WDP		WNP		WSP		YSO		Total	
	Average	# of Calls	Average	# of Calls	Average	# of Calls	Average	# of Calls	Average	# of Calls
1	102	204	49	12	101	334	61	169	91	719
2	184	1,580	130	134	174	1,651	150	597	173	3,962

Queue Entry to Law Supervisor Notified - No Units Available

Average Seconds from Pending Queue Entry to the Law Supervisor Notification of No Units Available										
PRIORITY	WDP		WNP		WSP		YSO		Total	
	Average	# of Calls	Average	# of Calls	Average	# of Calls	Average	# of Calls	Average	# of Calls
1	807	8	69	1	117	30	60	2	248	41
2	225	17	157	6	313	278	150	10	300	311

Queue Entry to First Unit Dispatched After Law Supervisor Notification - No Units Available

Average Seconds from Pending Queue Entry to First Unit Dispatched after Law Supervisor Notification has Occurred										
PRIORITY	WDP		WNP		WSP		YSO		Total	
	Average	# of Calls	Average	# of Calls	Average	# of Calls	Average	# of Calls	Average	# of Calls
1	706	8	170	1	568	30	83	2	561	41
2	1032	17	883	6	1094	278	1620	10	1104	311

Queue Entry to First Unit Dispatched - All Calls - Including Available and Unavailable Units

Average Seconds from Pending Queue Entry to First Unit Dispatched										
PRIORITY	WDP		WNP		WSP		YSO		Total	
	Average	# of Calls	Average	# of Calls	Average	# of Calls	Average	# of Calls	Average	# of Calls
1	161	226	58	13	140	364	61	171	127	774
2	308	1849	162	140	307	1,929	174	607	285	4,525



Quarter 3, 2020 Fire Call Statistics

Call Processing Time - All Fire Calls

Average Seconds from First Keystroke to Pending Queue Entry												
PRIORITY	WDL		WNF		WSF		YDF		County		Total	
	Average	# of Calls	Average	# of Calls	Average	# of Calls	Average	# of Calls	Average	# of Calls	Average	# of Calls
Code 2	45	533	55	37	49	647	47	8	67	125	49	1,350
Code 3	61	1,460	72	196	62	2,077	46	70	66	829	63	4,632

Queue Entry to First Unit Dispatched - All Fire Calls

Average Seconds from Pending Queue Entry to First Unit Dispatched												
PRIORITY	WDL		WNF		WSF		YDF		County		Total	
	Average	# of Calls	Average	# of Calls	Average	# of Calls	Average	# of Calls	Average	# of Calls	Average	# of Calls
Code 2	19	533	25	37	21	647	20	8	22	125	20	1,350
Code 3	20	1,460	21	196	22	2,077	25	70	26	829	22	4,632

Call Processing Time - Fire and Medical

Average Seconds from First Keystroke to Pending Queue Entry													
Call Type	PRIORITY	WDL		WNF		WSF		YDF		County		Total	
		Average	# of Calls	Average	# of Calls	Average	# of Calls	Average	# of Calls	Average	# of Calls	Average	# of Calls
Fire Call Types	Code 2	38	300	74	17	36	268	47	4	77	63	42	652
	Code 3	63	411	93	93	66	729	57	30	65	526	66	1,789
Medical Aid Call Types	Code 2	55	233	39	20	58	379	47	4	57	62	56	698
	Code 3	60	1,049	54	103	59	1,348	37	40	67	303	60	2,843

Queue Entry to First Unit Dispatched - Fire and Medical

Average Seconds from Pending Queue Entry to First Unit Dispatched													
Call Type	PRIORITY	WDL		WNF		WSF		YDF		County		Total	
		Average	# of Calls	Average	# of Calls	Average	# of Calls	Average	# of Calls	Average	# of Calls	Average	# of Calls
Fire Call Types	Code 2	20	300	32	17	23	268	24	4	26	63	22	652
	Code 3	25	411	23	93	25	729	36	30	29	526	26	1,789
Medical Aid Call Types	Code 2	18	233	19	20	20	379	17	4	18	62	19	698
	Code 3	18	1,049	19	103	20	1,348	18	40	21	303	19	2,843

STAFF REPORT

Agenda Item: 5.e

Date: December 2, 2020
To: YECA Governing Board
From: Dena Humphrey, Executive Director
Subject: Administration Holiday Closure Schedule

Recommendation: To approve the closure of administrative staffing for two days during the upcoming Holiday season

Summary:

Each year the agency minimally staffs the front office during the holiday season. This year Christmas and New Year's Day falls on a Friday. As most public agencies within the county close down administrative functions for one to two weeks during the holiday season, the agency requests to close down the two Thursday's on Christmas eve & New Year's eve for administrative functions only. Administrative staff would be required to use personal leave for these two days and IT would remain on-call for support services.

Proposed Closure Dates for Administrative Functions:

- Thursday, December 24, 2020
- Thursday, December 31, 2020

STAFF REPORT

Agenda Item: 5.f

Date: December 2, 2020
To: YECA Governing Board
From: Dena Humphrey, Executive Director
Subject: Adoption of MOU Side Letter

Recommendation: To adopted the signed side letter extending the Yolo County Dispatchers Association (YCDA) Memorandum of Understanding (MOU) by 1-year

Summary:

The current YCDA MOU is set to expire June 30, 2021. Given the economic uncertainties this side letter provides an extension to the existing MOU. This one-year extension would bring the end term date to June 30, 2022, with no financial enhancements. This side letter also allows each party to reopen the MOU by notice to the other party no later than sixty (60) days prior to the expiration date of the MOU.

Side Letter of Agreement

ORIGINAL

I. Parties

The Parties to this Side Letter of Agreement (herein after "Side Letter") are the Yolo Emergency Communications Agency, hereinafter referred to as "Agency" or "Employer" and the Yolo County Dispatchers' Association, hereinafter referred to as "Association".

II. Background

The Parties are the signatories to a Memorandum of Understanding (hereinafter referred to as the "MOU") setting forth terms and conditions of employment for certain Agency employees within what is commonly referred to as the "Dispatchers' Unit", hereinafter referred to as "Dispatchers". The terms set forth below amend the existing MOU. The Parties agree as follows:

III. MOU Amendments

- A. For Purposes of the MOU amendments set forth below, language that is overstruck (e.g. ~~overstruck~~) will be omitted from the MOU. Language that is *italicized* and **boldfaced** will be added to the MOU as indicated. The existing MOU and current side letters will, in all other respects, remain in effect without change through the new term specified below.
- B. Article 23. TERM of the MOU is hereby amended to read as follows:

This Memorandum of Understanding will be in full force and effect from July 1, 2018 through June 30, ~~2024~~**2022**. Either party may reopen this Memorandum of Understanding by notice to the other party no later than sixty (60) days prior to the expiration date of the MOU. The Side Letters attached hereto as Appendix B and C will remain in effect for the terms specified therein.


IV. General Provisions


- A. Upon adoption of this Side Letter of Agreement by the Agency Board, the Parties' respective duty to meet and confer over terms and conditions of employment shall be deemed to have been exhausted and concluded.
- B. This Side Letter will take effect immediately upon approval by the Yolo Emergency Communications Agency Board.
- C. The written terms herein embody the entire Side Letter of Agreement between the Parties.

In witness hereof, this Side Letter of Agreement was ratified and adopted by a vote of the Yolo Emergency Communications Agency Board on _____, 2020.

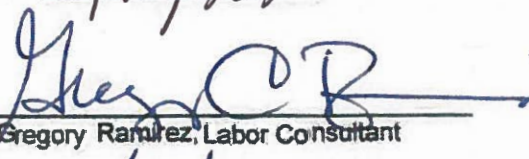
YOLO COUNTY DISPATCHERS' ASSOCIATION

YOLO EMERGENCY COMMUNICATIONS AGENCY

By: 
Stephanie Taylor, President
Date: 11/13/20

By: 
Dena Humphrey, Executive Director
Date: 11/13/2020

By: 
Chuck Flesher, Labor Consultant
Date: 10-29-2020

By: 
Gregory Ramirez, Labor Consultant
Date: 11/2/2020

STAFF REPORT

Agenda Item: 5.g

Date: December 2, 2020
To: YECA Governing Board
From: Dena Humphrey, Executive Director
Subject: Implementation of YECA Illness & Injury Program (IIPP)

Recommendation: Approve YECA's Injury & Illness Program Including Covid-19 Supplement

This IIPP establishes YECA's prevention program for the agency and provides a Response Plan for COVID-19 within the workplace. As a result of COVID-19, Cal-OSHA requires all employers to have a COVID-19 IIPP Supplement in place to guide employees through the pandemic in relation to worker safety.

YECA is a member of the Yolo County Public Agency Risk Management Insurance Authority (YCPARMIA), a Joint Powers Authority that provides workers compensation coverage and risk control services to the agency. Among the value-added services provided by the risk control program are risk control consulting services designed to assess risk exposures, identify internal processes to control risks and maintain a safety culture.



**Injury and Illness
Prevention Program**

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Appendices

- A. Hazardous/Unsafe Condition Report
- B. Accident Investigation Report
- C. Safety Inspection Report
- D. Employee Safety Training Matrix

Policy

Yolo Emergency Communications Agency (YECA) has established this written Injury and Illness Prevention Program (IIPP) in accordance with Title 8, California Code of Regulations, Section 3203, of the General Industry Safety Orders.

To be successful our program must include proper attitudes toward injury and illness prevention on the part of managers, supervisors, and employees. It also requires cooperation in all safety and health matters, not only between supervisor and employee, but also between co-workers. Only through such a cooperative effort can a safety program in the best interest of all be established and preserved.

All employees are required to comply with our safety and health policies and practices. This includes employees at every level and in all positions.

This IIPP includes the following elements:

- Responsibility and Authority
- Compliance
- Communication
- Hazard Assessment
- Accident Investigation
- Hazard Correction
- Training and Instruction
- Record Keeping

Responsibility and Authority

The Executive Director is the designated IIPP Administrator and has the authority and responsibility for implementing and maintaining this IIPP.

Managers and supervisors are responsible for implementing and maintaining the IIPP in their work areas and for answering employee questions about the IIPP. Employees are responsible for understanding and following the requirements of the IIPP and for asking questions when direction is unclear.

A copy of our IIPP is available for review on the agency's intranet site under policies.

Compliance

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

The system to ensure all employees comply with these practices includes the following:

- Informing employees of the requirements within our IIPP in a readily understandable language;
- Training all employees on general safety policies, rules, and work practices;
- Positively recognizing employees who perform safe and healthful work practices;
- Providing additional training to employees whose safety performance is deficient; and

Communication

All managers and supervisors are responsible for communicating with all employees about occupational safety and health in a form readily understandable by all employees. Our communication system encourages all employees to inform their managers and supervisors about workplace hazards without fear of reprisal. Employees can report workplace hazards directly, or anonymously, to their immediate Supervisor, Manager, or Executive Director.

Our communication system includes:

- New employee orientation including a discussion of safety and health policies and procedures
- Review of our IIPP
- Safety training programs
- Provide ergonomic evaluations of workstations upon request
- Posted on the HR/Safety Board or emailed safety information including anonymous safety notifications.
- Anonymous Safety Notification using YCPARMIA's website under "Anonymous Reporting Tool" <http://www.ycparmia.org/suggestions.htm>
- Access to the Employee Assistance Program (EAP)

Hazard Assessment

The hazard assessment is an ongoing process and will be revised periodically by each division.

Periodic Inspection Procedures

Periodic facility inspections will be conducted to evaluate physical hazards, use of hazardous materials, and safe work practices. The inspections may be performed by employees or management personnel. Results will be submitted to the Executive Director.

Periodic inspections to identify and evaluate workplace hazards will be performed according to the following schedule:

- When the IIPP is established;
- When new substances, processes, procedures or equipment which present potential new hazards are introduced into our workplace;
- When new, previously unidentified hazards are recognized;
- When occupational injuries and illnesses occur; and
- Whenever workplace conditions warrant an inspection.

Hazard Correction

When unsafe or unhealthy work conditions, practices, or procedures are observed or discovered, they will be corrected in a timely manner based on the severity of the hazards. When an imminent hazard exists that cannot be immediately corrected, the exposed employees will be removed from the immediate hazard except those needed to correct the condition and to address security issues. Employees who are required to correct the hazardous condition will be provided with the necessary protection.

Accident/Incident Investigation

Yolo Emergency Communications Agency will conduct accident investigations for all workplace injuries and illnesses, regardless of their severity. These investigations will be performed by the Executive Director, Manager and/or assigned management personnel. Procedures for investigating workplace accidents and hazardous substance exposures include:

- Interviewing injured employees and witnesses;
- Examining the workplace for factors associated with the accident/exposure;
- Complete the attached Accident Investigation Report as well as the EMPLOYER'S REPORT OF OCCUPATIONAL INJURY OR ILLNESS Form 5020;
- Determining the cause of the accident/exposure;
- Taking corrective action to prevent the accident/exposure from reoccurring; and
- Recording the findings and actions taken.

Training and Instruction

All employees will participate in safety training on general and job-specific hazards and safe work practices. Each supervisor and manager will be trained on all health and safety hazards to which employees under their immediate direction and control are exposed.

In addition to hazard-specific safety training, training will be provided when:

- The IIPP is first established
- New employees are hired
- Employees are reassigned to a new area or task with no prior training
- New substances, operations, or equipment are introduced

General and job specific training requirements are identified in the Employee Safety Training Matrices (Attachment D).

Record Keeping

The following IIPP documentation is located in the Human Resources Department and will be maintained a minimum of two years:

- Safety training for each employee, including the employee's name, training dates, type of training;
- Inspections, including the person(s) conducting the inspection; the unsafe conditions and work practices identified; corrective action, and follow up;
- Hazard/Unsafe Condition reports; and
- Annual program reviews.

Code of Safe Practices

1. All employees are required to follow this Code of Safe Practice and report all unsafe conditions or practices.
2. Anyone known to be under the influence of drugs or intoxicating substances that impair the employee's ability to safely perform the assigned duties will not be allowed on the job.
3. Horseplay, scuffling, and other acts that tend to have an adverse influence on the safety or well-being of the employees is prohibited.

4. Work shall be well planned and supervised to prevent injuries in the handling of materials and in working together with equipment.
5. No one will knowingly be permitted or required to work while the employee's ability or alertness is so impaired by fatigue, illness, or other causes that it might unnecessarily expose the employee or others to injury.
6. Employees will not handle or tamper with any electrical equipment, machinery, air or water lines in a manner not within the scope of their duties, unless they have received specific instructions.
7. All injuries will be reported promptly to their Supervisor so that arrangements can be made for medical or first aid treatment.

Emergency Medical Services

- We will attempt to maintain a suitable number of trained persons to render first aid onsite
- We will maintain at least one first-aid kit in a weatherproof container on site. The kit will be inspected regularly to ensure that it remains properly stocked
- In the event emergency medical services are necessary YECA is in a unique position to summon assistance to 35 N. Cottonwood, Woodland, California
- If emergency medical services are not available the injured worker should be taken to

Woodland Memorial Hospital
1325 Cottonwood St.
Woodland CA
(530) 662-3961

Attachment A - Hazardous/Unsafe Condition Report

Person conducting inspection: _____ Date:

Area(s) inspected:

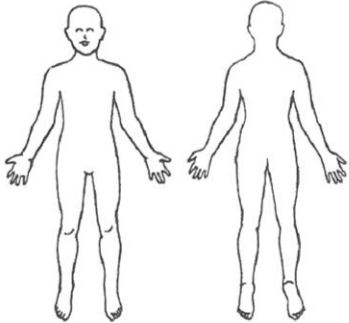
Were any unsafe conditions or work practices identified? Yes No

If yes, please describe:

What action(s) have been taken to correct the unsafe conditions or work practices identified?

Attachment B – ACCIDENT INVESTIGATION REPORT

ACCIDENT INVESTIGATION REPORT

1. Name of employer:	2. Name of supervisor:	3. Department:
3. Employee's name:		4. Job title or position :
4. Date and time of event:	5. Location or address where event occurred:	5a. On employer property? <input type="checkbox"/> Yes <input type="checkbox"/> No
6. Date of knowledge of the event:	7. Name and title of person to whom the event was reported:	
7. If the event was not reported immediately, why not?		
8. Was employee given a claim form (DWC-1)? <input type="checkbox"/> Yes (date: _____) <input type="checkbox"/> No	9. Did employee sign and return the claim form (DWC-1)? <input type="checkbox"/> Yes (date: _____) <input type="checkbox"/> No	
10. Type of medical treatment required: <input type="checkbox"/> No treatment needed <input type="checkbox"/> Paramedics or EMT <input type="checkbox"/> Emergency room <input type="checkbox"/> Hospitalized overnight <input type="checkbox"/> Medical treatment <input type="checkbox"/> First aid <input type="checkbox"/> Clinic refused		11. Medical treatment provider: (include name and address of facility) <input type="checkbox"/> Check if this is pre-designated provider
12. What was the employee doing at the time of the event? (Attach separate sheet if necessary) _____ _____ _____		
13. Describe how the event occurred: (Attach separate sheet if necessary) _____ _____ _____		
14. Type of Injury: <input checked="" type="checkbox"/> Amputation/severance <input checked="" type="checkbox"/> Bite/sting <input checked="" type="checkbox"/> Burn <input checked="" type="checkbox"/> Cancer <input checked="" type="checkbox"/> Contusion, blunt trauma <input checked="" type="checkbox"/> Crush <input checked="" type="checkbox"/> Dermatitis <input checked="" type="checkbox"/> Dislocation <input checked="" type="checkbox"/> Fracture <input checked="" type="checkbox"/> Inflammation <input checked="" type="checkbox"/> Internal <input checked="" type="checkbox"/> Puncture, penetrating trauma <input checked="" type="checkbox"/> Repetitive motion injury <input checked="" type="checkbox"/> Sprain/strain <input checked="" type="checkbox"/> Tendonitis/synovitis <input checked="" type="checkbox"/> Other: _____	15. Cause of Injury: <input checked="" type="checkbox"/> Absorption, ingestion, inhalation <input checked="" type="checkbox"/> Animal or insect <input checked="" type="checkbox"/> Burn, scald, temperature extreme <input checked="" type="checkbox"/> Caught in or between <input checked="" type="checkbox"/> Cumulative trauma <input checked="" type="checkbox"/> Cut, puncture or scrape <input checked="" type="checkbox"/> Electrical current <input checked="" type="checkbox"/> Equipment, tools, machinery <input checked="" type="checkbox"/> Explosion <input checked="" type="checkbox"/> Foreign body <input checked="" type="checkbox"/> Lifting <input checked="" type="checkbox"/> Motor vehicle <input checked="" type="checkbox"/> Pushing, pulling <input checked="" type="checkbox"/> Repetitive motion <input checked="" type="checkbox"/> Rubbed or abraded <input checked="" type="checkbox"/> Slip, trip or fall <input checked="" type="checkbox"/> Struck against, by <input checked="" type="checkbox"/> Miscellaneous causes <input checked="" type="checkbox"/> Other: _____	16. Mark affected area(s) on diagram: 
17. Did employee lose time from work? <input type="checkbox"/> No <input type="checkbox"/> Yes – First day of lost time: _____		
18. Has employee returned to work? <input type="checkbox"/> No <input type="checkbox"/> Yes – Date returned: _____ <input type="checkbox"/> Full duty <input type="checkbox"/> Modified duty – Describe: _____		

18. Was the event witnessed? No Yes – List witnesses (Attach separate sheet if necessary)

Name: _____
Address: _____
City, State, Zip: _____
Telephone: _____

Name: _____
Address: _____
City, State, Zip: _____
Telephone: _____

19. Check all conditions or actions that apply:

EQUIPMENT

- Defective machine
- Machine guards not in place
- Machine guards missing – need to be installed
- Improper tools
- Defective tools
- Improper protective equipment
- Defective protective equipment
- Inadequate protective equipment
- Other: _____

ENVIRONMENT

- Arrangement of equipment, work flow, tools
- Poor housekeeping – cleanliness and organization
- Inadequate lighting
- Inadequate ventilation
- Signs – inadequate signs or other forms of warning
- Walking surface
- Other: _____

PROCEDURE

- Unsafe procedures
- Procedures missing
- Procedures inadequate
- Other: _____

TRAINING

- Associate(s) lacks training
- Associate(s) needs retraining
- Other: _____

SUPERVISION

- Procedures not enforced
- Use of protective equipment not enforced
- Use of machine guards not enforced
- Other: _____

WORKER

- Horseplay, unsafe behavior
- Short cuts, carelessness
- Distracted, inattentive
- Other: _____

20. Describe the steps recommended or taken to prevent a recurrence:

21. List any employer property that was damaged and describe the damage:

22. Was the event caused by, or involve, a third party? No Yes – complete below:

- Auto accident
 - Rented or leased equipment
 - Off-site activity
 - Conference or seminar
 - Construction area
- Name and address of third party: _____
Description of involvement: _____

23. Other information:

- Photographs taken? No Yes – by whom: _____
- Police or fire called to event? No Yes – Agency: _____
- Cal/OSHA contacted? No Yes – by whom: _____
- Evidence preserved (contact Risk Management for guidance)? No Yes – by whom: _____

24. Comments: (Attach separate sheet if necessary)

Completed by (print name): _____ Date: _____
Signature: _____ Phone #: _____

Attachment C - SAFETY INSPECTION REPORT

CONFIDENTIAL - INTENDED FOR INTERNAL DISTRIBUTION ONLY

Housing Authority Name	Department/Location	Date of Inspection
Person(s) Performing Safety Inspection		
Name	Department	
Name	Department	
Name	Department	
The objective of the safety inspection is to (1) Identify and correct unsafe work practices performed by employees, and (2) eliminate hazardous physical conditions for employees and residents. Management is responsible to correct deficiencies in a timely manner.		

GENERAL CONDITIONS	GENERAL CONDITIONS	GENERAL CONDITIONS	GENERAL CONDITIONS	COMMENTS
Employee work areas clean and orderly.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	_____
Mats placed in areas where slip/falls may occur (entrances, sinks, refrigerators).	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	_____
Floors free from trip/fall hazards, such as cords, boxes, debris, missing tiles, or material defects.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	_____
Wet or slippery floor conditions cleaned up quickly.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	_____
Large and heavy items and materials stored on middle shelves to help reduce lifting injuries.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	_____
Employees lifting boxes and materials properly.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	_____
Desk and file draws closed when not in use.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	_____
Tool and equipment safety devices and machinery guards operational.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	_____
Proper ladders or step stools being used and in good working condition.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	_____
Storage cabinets and shelving over 5' tall secured to wall to prevent them from tipping.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	_____

CHEMICALS	CHEMICALS	CHEMICALS	CHEMICALS	COMMENTS
Chemical containers capped or sealed, except when in use.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	_____
Chemical containers properly labeled.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	_____
Employees using appropriate PPE as required when using chemicals.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	_____
MSDSs current and readily accessible in the workplace for review by employees.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	_____

OFFICE ERGONOMICS	OFFICE ERGONOMICS	OFFICE ERGONOMICS	OFFICE ERGONOMICS	COMMENTS
Computer keyboards aligned with computer monitors.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	_____
Employees holding the phone to their ear or using headsets (not cradling phone on neck).	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	_____
Employees' chairs adjusted properly.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	_____
Employee's desks kept free of clutter with adequate room under the desk for legs and feet.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	_____
Computer monitors adjusted to the proper height.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	_____

FIRST AID & PERSONAL PROTECTION EQUIPMENT (PPE)	FIRST AID & PERSONAL PROTECTION EQUIPMENT (PPE)	FIRST AID & PERSONAL PROTECTION EQUIPMENT (PPE)	FIRST AID & PERSONAL PROTECTION EQUIPMENT (PPE)	COMMENTS
First-aid kits mounted, accessible, and adequately stocked.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	_____
Emergency eyewash stations accessible and operational.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	_____
Employee's wearing appropriate PPE in the correct manner when it is required.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	_____
PPE is in good working condition.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	_____

FIRE AND ELECTRICAL SAFETY	FIRE AND ELECTRICAL SAFETY	FIRE AND ELECTRICAL SAFETY	FIRE AND ELECTRICAL SAFETY	COMMENTS
Power cords secured underneath desks or alongside baseboards to prevent tripping hazards.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	_____
Portable electric heaters equipped with a tip-over switch and located 18" from combustibles.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	_____
Electrical cords and plugs in good condition with proper grounding.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	_____
Electrical cords, outlets, and junction boxes free of exposed wiring.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	_____
Extension cords only being used to power temporary equipment.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	_____
Emergency exits, aisles and walkways clear of storage, obstacles, and obstructions.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	_____
Flammable and combustible liquids stored in an approved storage cabinet.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	_____
36" clearance maintained in front of all electrical panels.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	_____
Fire extinguishers mounted, accessible, and fully charged.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	_____
Monthly inspections being performed and documented on fire extinguishers.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	_____

OTHER UNSAFE WORK PRACTICES OR CONDITIONS OBSERVED:

Attachment D: EMPLOYEE SAFETY TRAINING MATRIX

Yolo Emergency Communications Agency Employee Safety Training Matrix	Training Frequency	Cal/OSHA Section Reference	Job Classification
Injury & Illness Prevention Program	I/PU	3203	All Employees
Emergency Response & Fire Safety	I/PU	3220-3221	All Employees

Emergency Action Plan	I/PU	3220(a)	Impacted Employees
Ergonomics	I	5110(b)(3)	All Employees
Fall Prevention	I	167.1	All Employees
Fire Extinguisher	I/A	6151(g)(1)	Assigned Employees
First Aid/CPR	I/2Yrs	3400	Assigned Employees
Hazard Communication (General)	I/PU	5194	All Employees
Portable Ladder	I	3276	All Employees
Supervisor Safety Training	I/PU	3203	Supervisor
Office Safety & General Housekeeping	I/PU	3203	All Employees
New Employee Safety Orientation	I	3203	All Employees

IIPP - COVID-19 Supplement – December 2, 2020

COVID-19 Response Plan

Your safety is our top priority. The following guidelines are designed to prevent workplace exposures to acute respiratory illnesses, including COVID-19.

Updates are available on CDC's web page at www.cdc.gov/coronavirus/covid19.

Watch for symptoms

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

- Fever or chills
- Cough
- Shortness of breath or difficulty breathing
- Fatigue
- Muscle or body aches
- Headache
- New loss of taste or smell
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea

This list does not include all possible symptoms. CDC will continue to update this list as we learn more about COVID-19.

When to Seek Emergency Medical Attention

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

- Trouble breathing
- Persistent pain or pressure in the chest
- New confusion
- Inability to wake or stay awake
- Bluish lips or face

This list is not all possible symptoms. Please call your medical provider for any other symptoms that are severe or concerning to you.

Infection Controls Measures

Prior to coming to work, employees are encouraged to perform a self-health check which includes evaluating any symptoms such as cough, body aches, respiratory symptoms and taking your temperature to identify if you are running a fever.

Self-identifying if you have had any contact with or exposure to anyone with COVID-19. If you have been notified that you have been exposed to someone with COVID-19, you will be asked to complete COVID-19 testing, monitor any symptoms, and may be required to be self-quarantined for up to 14 days from the date/time of exposure.

Employees will be immediately sent home or to medical care, as needed, if they have a frequent cough, fever, difficulty breathing, chills, muscle pain, headache, sore throat, or recent loss of taste or smell.

Employees who are out ill with fever or acute respiratory symptoms are not allowed to return to work until both of the following occur:

- At least 24 hours with no fever (without the use of fever-reducing medications) and no acute respiratory illness symptoms; and
- At least 10 days pass since the symptoms first appeared; and
- Employees who return to work following an illness are required to report any recurrence of symptoms.

Employees planning and scheduling non-essential personal travel outside the jurisdiction are encouraged to continuously review travel information provided on the CDC website at:

<https://www.cdc.gov/coronavirus/2019-ncov/travelers/index.html>

International travel may require a 14-day quarantine upon return depending on the CDC guidelines. Employees are encouraged to consider testing to rule out any exposure during the quarantine period.

Entrance to the YECA Building

Although screening for symptoms will not identify asymptomatic or pre-symptomatic individuals with SARS-CoV-2 infection, symptom screening remains an important strategy to identify those who could have COVID-19 and require prompt assessment and response. Visitors should be restricted from entering the facility other than a business necessity.

- **Screening**
 - All employees and visitors (i.e., anyone entering the facility) for [symptoms](#) consistent with COVID-19 and exposure to others with SARS-CoV-2 infection.
 - Screen employees at the start of each shift and visitors
 - Self-check-in at main and rear entrance of building, employees must read temperature and confirm absence of symptoms consistent with COVID-19. Fever is either measured temperature $\geq 100.4^{\circ}\text{F}$ or subjective fever.
 - COVID-19 questionnaire will be assessed in a computer base platform near the entrances of the building to confirm absence of symptoms consistent with COVID-19.
 - Promptly manage anyone with symptoms of COVID-19 or who has been advised to self-quarantine:
 - Personnel should don a facemask if not already wearing one, return home, and notify occupational health services to arrange for further evaluation

- **Hand Sanitizing:**
While entering and exiting the building, employees shall clean their hands by either of the two methods below:
 - Wash your hands with soap and water for at least 20 seconds.
 - Use an alcohol-based hand sanitizer that contains at least 60% alcohol if soap and water are not available.

Working in the Building

Safety has been identified as the priority for our agency, which includes an obligation to provide safeguards and taking precautionary steps to stop the spread of the virus.

- **Social Distancing**
Social distancing involves minimizing exposure by adhering to spacing requirements in the workplace and following proper personal hygiene practices. Employees will use social distancing to limit exposure. The following strategies are social distancing:
 - Always try to maintain at least 6 feet between yourself and other people
 - Use e-mail, telephone calls, and video conferencing to conduct necessary business
 - Avoid sharing equipment
 - If a face-to-face meeting is unavoidable, minimize the meeting time, choose a large meeting room, sit at least 6 feet from one another other, use plexi-glass barriers
 - Avoid person-to-person contact such as shaking hands
 - Staff are encouraged to stay in their work areas/private offices as much as possible
- **Face Coverings**
When social distance cannot be maintained employees will be required to wear face coverings. While entering and moving around within the building in common areas e.g., hallways, bathrooms, breakrooms, don a mask.
 - A face covering covers the nose and mouth. It can be secured to the head with ties or straps or simply wrapped around the lower face. It can be made of a variety of materials, such as cotton, silk, or linen. A cloth face covering may be factory-made or sewn by hand.
 - Face coverings will be replaced when they become difficult to breathe through, become soiled, become moist, or have an odor.
 - Hands should be washed before putting on a face covering
 - Put it over the nose and mouth and secure it under your chin
 - Try to fit it snugly against the sides of the face
 - Handle face coverings only by the ear loops or ties
 - Disinfect them after each use with a standard washing machine using detergent
 - Don't touch the face covering, if you do, wash your hands
- **Perform Routine Environmental Cleaning:**
 - Agency will provide soap, water, alcohol-based hand sanitizers, tissues and no-touch disposal receptacles for use by employees.
 - Employees are instructed to clean their hands often with an alcohol-based hand sanitizer that contains at least 60-95% alcohol for at least 30 seconds, or wash their hands with soap and water for at least 20 seconds.
 - Employees will routinely clean all frequently touched surfaces, in between shifts such as keyboards, phones, countertops, and door handles. Use the cleaning agents provided by the Agency and follow the directions on the label.

- Custodial cleaning services will take extra care in sanitizing public and common areas. These services focus on cleaning of visibly dirty surfaces followed by disinfection is a best practice measure for prevention of COVID-19 and other viral respiratory illnesses in the workplace.

Sick/Symptomatic Employees:

Symptoms compatible with COVID-19, include subjective or measured fever, cough, difficulty breathing, runny nose, nausea, and diarrhea.

- Employees who have symptoms of acute respiratory illness are recommended to stay home and not come to work until they are free of fever (100.4° F [37.8° C] or greater using an oral thermometer), signs of a fever, and any other symptoms for at least 24 hours, without the use of fever-reducing or other symptom-altering medicines (e.g. cough suppressants). Employees must notify their supervisor and stay home if they are sick.
- Sick leave policies will be flexible and consistent with public health guidance and approved by the YECA Board May 6, 2020 for Emergency Paid Sick Leave following Families First Coronavirus Relief Act.
- Any employees who appear to have acute respiratory illness symptoms upon arrival to work or become sick during the day will be separated from other employees will and be sent home immediately. Sick employees should cover with a mask.
- In the case of an employee that test positive for COVID-19; the Agency is to be notified. The Agency will then follow protocols and direction as determined by the County Health Department. No such employee will be allowed to return to the workplace until the Agency has medical evidence demonstrating that they are fit to return to work. The Agency reserves the right to send an employee to a fitness for duty evaluation in order to return to work.
- Employees who believe they may have possibly been exposed to the virus at work should immediately inform their supervisor and seek medical attention directly. A situation of work-site exposure would likely qualify as a Workers Compensation claim.

Confirmed Cases of Employee Exposure to COVID-19

If an employee is confirmed to have COVID-19 infection, the following measures will take place:

- Inform employees of their possible exposure to COVID-19 in the workplace, but maintain confidentiality as required by the Americans with Disabilities Act (ADA) and the California Department of Fair Employment and Housing.
- Temporarily close the general area where the infected employee worked until cleaning is completed.
- Conduct deep cleaning of the entire general area where the infected employee worked and may have been, including breakrooms, restrooms and travel areas, with a cleaning agent approved for use by the EPA against coronavirus. Ideally, the deep cleaning should be performed by a professional cleaning service.

- Any person cleaning the area will be equipped with the proper PPE for COVID-19 disinfection (disposable gown, gloves, eye protection, mask, or respirator if required) in addition to PPE required for cleaning products.

Positive Test Result and When to Return to Work

Individuals who test positive for SARS-CoV-2, the virus that causes COVID-19, and who have had symptoms, may return to work or school when:

- At least 10 days have passed since symptoms first appeared, AND
- At least 24 hours have passed with no fever (without use of fever-reducing medications),
- Other symptoms have improved

CDC COVID-19 Training Video

https://www.youtube.com/watch?v=QaRiYddhHkc&feature=emb_logo

What is the difference between Influenza (Flu) and COVID-19?

Influenza (Flu) and COVID-19 are both contagious respiratory illnesses, but they are caused by different viruses. COVID-19 is caused by infection with a new coronavirus (called SARS-CoV-2) and flu is caused by infection with [influenza viruses](#).

There are some key differences between flu and COVID-19. COVID-19 seems to spread more easily than flu and causes more serious illnesses in some people. It can also take longer before people show symptoms and people can be contagious for longer. Another important difference is there is a vaccine to protect against flu. There is currently no vaccine to prevent COVID-19. The best way to prevent infection is to avoid being exposed to the virus. More information about differences between flu and COVID-19 is available in the different sections below.

Because some of the symptoms of flu and COVID-19 are similar, it may be hard to tell the difference between them based on symptoms alone, and [testing](#) may be needed to help confirm a diagnosis. Flu and COVID-19 share many characteristics, but there are some key differences between the two.

While more is learned every day, there is still a lot that is unknown about COVID-19 and the virus that causes it.

STAFF REPORT

Agenda Item: 6.a

Date: December 2, 2020
To: YECA Governing Board
From: Dena Humphrey, Executive Director
Subject: YECA After Hours Call-outs Standard Scheduled Hours

Recommendation: To standardize the provided hours YECA handles after hours call outs for City/County Departments

YECA handles after hour functions for several city/county departments throughout the county. This request is similar to when the YECA Board standardized After-Hour Records for three of its Law Members. At times, requests are made to handle additional calls outside the listed timeframes below. The list below would set standard hours YECA would be responsible for providing this service.

City of Woodland	Days & Times
Public Works	M-F 1600-0700, plus Sat/Sun & Holidays

City of W. Sacramento	Days & Times
Public Works	M-F 1630-0800, plus Sat/Sun & Holidays

City of Winters	Days & Times
Public Works	M-F 1700-0800, plus Sat/Sun & Holidays

Yolo County Department	Days & Times
Yolo Public Works	M-F 1630-0700, plus Sat/Sun & Holidays
Adult Protective Services	M-F 1600-0800, plus Sat/Sun & Holidays
Child Protective Services	M-F 1600-0800, plus Sat/Sun & Holidays
Public Guardian	M-F 1700-0800, plus Sat/Sun & Holidays
County Maintenance	M-F 1700-0800, plus Sat/Sun & Holidays
Coroner's Office	M-F 1700-0800, plus Sat/Sun & Holidays
Animal Services	M-F 1600-0800, plus Sat/Sun & Holidays
YEH Public Health Officer	M-F 1700-0800, plus Sat/Sun & Holidays
YEH Hazmat	M-F 1700-0800, plus Sat/Sun & Holidays

Standard Holidays

New Year's Day
Martin Luther King Day
Presidents Day
Memorial Day
Independence Day

Labor Day
Veterans Day
Thanksgiving Day & After
Christmas Day