

FALL 2020 REOPENING PLAN



Under review by the State Council of Higher Education for Virginia (July 2, 2020)

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GUIDING PRINCIPLES

Central Virginia Community College has remained compliant with the Commonwealth of Virginia's Orders of Public Health and Executive Orders Due to Novel Coronavirus (COVID-19), recommendations of the Centers for Disease Control (CDC) guidance, and the Virginia Department of Health (VDH) Guidelines. Per Order of Public Health Six, and Executive Order #65, Central Virginia Community College (CVCC) plans to continue remote learning where practical, and begin offering in-person classes and instruction, including labs and related practical training, that comply with all applicable requirements under the "Higher Education Reopening Guidance (June 11, 2020)". Because CVCC serves a region that has limited access to affordable, reliable broadband/internet services, the college plans to open a computer lab with internet access to support student success for students who lack those resources, assuming that environmental factors permit the safe use of such a facility. As such, the fall 2020 reopening for CVCC will include the following considerations. These considerations will also be applied to spring 2021 as appropriate based on the guidance in place at the time of planning and return to campus in January 2021:

A. REPOPULATION OF THE CAMPUS

1. Establishment of a COVID-19 coordinator/campus team

CVCC has established a COVID-19 team charged with safely reopening campus under local, state, and federal guidance. The team functions under the oversight of the president and the president's cabinet. Contributors include:

- a) Director of Strategic Initiatives, Chair
- b) Vice President for Academic and Student Affairs
- c) Vice President for Finance and Administration
- d) Vice President for Institutional Advancement
- e) Vice President for Information Technology
- f) Director of Human Resources
- g) Campus Police Chief
- h) Associate Vice President for Arts and Sciences
- i) Associate Vice President for Professional and Career Studies, including Workforce
- j) Dean, Enrollment Management
- k) Dean, Student Success
- l) Dean, Institutional Effectiveness
- m) Distance Education Director
- n) Facilities Director
- o) Facilities Management Administrative and Office Supervisor

2. Contact information and procedures for reaching the local health department.

Contact: Dr. Kerry Gateley, MD, Health Director, Central Virginia Health District, 1900 Thomson Drive, Lynchburg, VA 24501, (434) 947-6777; Kerry.gateley@vdh.virginia.gov

Consistent with CVCC's Emergency Operations Plan, the Central Virginia Health District is a supporting agency. The CVCC Vice President for Finance and Administration and the Police Chief will initiate contact with the local health department to seek support and guidance as needed.

3. Students' initial return to campus (such as initial screening, move-in)

Before their first trip to campus:

Students returning to campus must complete a Student Health Safety Agreement (**Appendix A**) that will be provided by their instructor and available on the CVCC website, acknowledging they understand and will follow the college's COVID-19 safety protocols. The requirements outlined on the form include protocols for face coverings/masks, social distancing, the conditions under which they should not come to campus, self-assessments, and other college guidance.

Once the initial form is completed:

For subsequent trips to college and before they arrive on campus, students should perform a self-assessment by asking themselves the following questions:

- Am I sick?
- Do I have symptoms consistent with COVID-19?
- Have I been tested for COVID-19 and are awaiting test results?
- Have I recently tested positive for COVID-19?
- Have I been exposed to someone who has tested positive for COVID-19?
- Have I returned from international travel within the last 14 days?

If any of the above questions can be answered with "yes", the student should not come to campus or should leave if already on site.

Class attendance rosters and sign-in sheets will be maintained for contact tracing purposes, should they be required. The Campus Police Chief will be responsible for coordinating communication with the local health department in the event of a reported case. The Vice President for Academic and Student Affairs will serve as the primary contact for CVCC community COVID-19 related questions. CVCC does not have campus housing or health services on campus.

4. Education/training of students: consider COVID-19 prevention education as part of student orientation. (hand washing, staying home if ill, etc.)

In fall 2020, the majority of courses will continue to be delivered remotely with the exception of courses and programs that dictate the need to host students on campus such as courses that must have an in-person component or those who lack adequate internet and computing resources will be allowed back on campus. Conditions for the return to in-person campus instruction are specific to programs and services and will be communicated by each faculty member by email/Canvas prior to return, and face to face when students arrive on campus. Signage is posted on campus to promote appropriate social distancing, handwashing, face coverings and personal hygiene (**Appendix D**).

5. Physical distancing, according to CDC guidance:

- a) Strategies to allow physical distancing in classrooms/learning environments. (e.g. Occupancy, staggered schedules, classroom layouts, workspace distancing, etc.)

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Course schedules for required in-person sessions are staggered to minimize contact. Classrooms and work spaces have been arranged to facilitate a socially distant environment that reduces student density in classrooms, labs, and computer labs to maintain 6 feet of separation. In labs or clinical settings, where more direct contact is possible, students will be required to wear masks in the event of incidental contact.

b) Social distancing considerations outside the classroom (e.g. Limiting visitors, changes to dining services, extracurricular activities, sorority/fraternity life, etc.)

No unscheduled visitors to campus will be allowed during fall 2020 (**Appendix E**), no dining services will be provided, and there will be no in-person extracurricular activities offered. No extracurricular activities/gatherings are currently planned and any requests for such will be limited and approved on a case-by-case basis at the discretion of the COVID-19 Task Force and will strictly following the reopening guidelines. Access to campus buildings by currently enrolled students who require internet access and in-person coursework will be monitored and recorded by a faculty or staff member. Access will be restricted to only necessary locations on campus for students and employees. Traffic in common areas such as hallways and restrooms will be intentional, directing a limited number of students/employees by staggering and with directional signage, appropriate social distancing, handwashing, and 'avoid the spread of germs signage' is posted in restrooms (**Appendix F**).

c) Restrict occupancy/stagger use of communal, shared spaces such as lounges, exercise rooms, dining halls, etc. To ensure physical distancing. Occupancy must be consistent with any active executive orders.

Effective fall 2020, no communal areas will be open. Traffic will be limited to scheduled, in-person courses only. Buildings will remain locked and closed to the public, exercise and dining facilities are closed. Other than the option for computer/internet access, student support services will be delivered remotely. Entrance into campus buildings by pre-screened visitors for in-person courses will be granted by the supervising instructor or staff member.

d) Limitations on size of gatherings and/or strict physical distancing to be in place during gatherings.

Effective fall 2020, there will be no gatherings permitted outside of the in-person courses which are scheduled using social distancing recommendations. Any gathering will not exceed the number indicated by the appropriate CDC/VDH guidance that is in place at the time. No extracurricular activities/gatherings are currently planned and any requests for such will be limited and approved on a case-by-case basis at the discretion of the COVID-19 Task Force and will strictly following the reopening guidelines.

e) Strategies for food/dining services should be consistent with plans to optimize physical distancing. Plans regarding dining services should consider strategies such as requirements for face coverings, policies to encourage staff to stay home if ill, ensuring adequate hand hygiene, routine cleaning/disinfection, and health screenings for staff. Implement engineering controls including: limiting the number of diners or other methods of crowd control, appropriate spacing between tables, eliminating buffet-style or self-serve food, and take out/delivery options.

Effective fall 2020, no food/dining services will be offered at CVCC or at any off-site center. Vending machines are available, and they will be cleaned/sanitized within the cleaning/disinfecting protocols.

6. HYGIENE PRACTICES AND CLEANING/DISINFECTING PROTOCOLS.

a) Cleaning and disinfection protocols to include frequently touched surfaces; transport vehicles; schedules for increased cleaning, routine cleaning, and disinfection; ensuring adequate cleaning supplies and correct use/storage

CVCC facilities will follow the COVID-19 Protocol for Cleaning Spaces as outlined in the CVCC Cleaning Protocol 2020 (**Appendix G**).

b) Provisions for hand sanitizer/handwashing stations

CVCC has purchased and will maintain a supply of hand sanitizer and soap for hand-washing stations for continuous availability in support of any in-person courses/labs. Locations are provided for employees and students to wash hands with soap and water, and alcohol-based hand sanitizers containing at least 60% alcohol are available in each scheduled classroom and in various walkways around campus.

c) Minimize shared objects and ensure adequate supplies to minimize sharing to the extent possible (e.g. dedicated student supplies, lab equipment, computers, etc.).

To the extent tools or equipment must be shared in classrooms/labs, materials and instructions will be provided to students and employees to use the EPA-approved disinfectant to clean items before and after use. Shared objects will be minimized to the maximum extent possible. Adequate supplies and equipment are available to minimize sharing to the extent possible. When this is not possible the 'attending college employee' (faculty, lab proctor etc.) will ensure that the object is properly disinfected.

7. Housing: It is difficult to maintain physical distancing in on-campus housing, even with modifications. Plans should consider strategies to decrease the risk such as requirements for face coverings in shared spaces, reminders of proper hand hygiene, enhanced cleaning, training for residential advisors/live in staff, restrictions on events/social activities in housing facilities, establishment of occupancy limits, restrictions on building access, etc. IHEs may want to require training and document training of certain staff.

N/A – CVCC is a non-residential campus.

8. Consideration of vulnerable individuals (e.g. 65 years or older, underlying health conditions):

a) Policy options to support those at higher risk for severe illness to mitigate their exposure risk (e.g. telework, modified job duties, virtual learning opportunities).

CVCC will continue to promote telework for eligible employees and remote education for students. When a course or program requires in-person instruction on campus, participation is voluntary, and participants are advised that the college cannot guarantee anyone's safety. Students and employees who do not feel comfortable returning to campus will be addressed on a case-by-case basis, and an alternative plan will be developed for work or course completion.

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b) Implement flexible sick leave policies and practices that enable faculty, staff and students to stay home or self-isolate when they are sick or have been exposed.

Flexible leave policies will remain in effect per DHRM/VCCS guidance.

c) Develop policies for return to class/work after COVID-19 illness.

If a student or employee is diagnosed with COVID-19, they are not permitted to come to campus. They should quarantine at home but advise their supervisor/instructor immediately, so he/she is aware of the diagnosis. Students/employees will not be approved to return to class until a doctor/health professional verifies that they have fully recovered. The student or employee will contact Dr. Muriel Mickles, Vice President for Academic and Student Affairs (students) or the Human Resources Office (employees) before returning.

9. International student considerations (e.g. COVID-19 travel health risks, CDC returning travelers guidelines, travel registry, etc.)

The considerations for international students are the same as other students/employees. Completion of the Student Health Safety Agreement (**Appendix A**) is required for international students. They are advised not to come to campus if they have been exposed to someone with COVID-19 or traveled to an area with a high incidence COVID-19. They should stay home and quarantine per CDC guidelines. They should not come back to class until they have quarantined 14 days. They should contact their instructor/supervisor so that he/she is aware and can make instructional accommodations if necessary. They should stay in touch with your instructor/supervisor.

10. Partnership and communication/information sharing with the local community, health systems and other stakeholders.

CVCC provides updates and remains in regular contact with Centra Health, the region's major healthcare provider, and the Central Virginia Health District. Planning and implementation for in-person experiences are communicated with the appropriate community partners including regional school divisions for dual enrollment and city and county government officials in Amherst, Appomattox, Bedford, and Campbell counties and the City of Lynchburg.

11. Face coverings.

a) Plans submitted by each institution should include information on how it intends to teach/reinforce use of face coverings among students, faculty and staff.

Face coverings will be required in compliance with the Commonwealth of Virginia's Executive Order #63 or with any subsequent orders or guidelines that apply to face covering used in higher education in Virginia. The use of personally acquired, cloth, face coverings is encouraged, but disposable face coverings will be provided in all facilities where in-person instruction will be taking place. The disposable face coverings will also be provided to students who meet for regularly and consistently scheduled on campus classroom activities. Additionally, a supply of cloth face coverings has been acquired and will be provided each CVCC employ. Signage is posted at entrances and in classrooms specific to face covering requirements in Virginia (**Appendix H**)

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b) For faculty cloth face coverings should be worn in times when at least six feet physical distancing cannot be maintained. For example, an instructor standing in a classroom seven feet from students could teach without a face covering. During meetings or gatherings or in narrow hallways or other settings where physical distancing may not be easy to maintain, a face covering would be prudent to wear. Other considerations such as speaking loudly, singing, etc. should be considered and may require additional distance.

Faculty who are delivering in-person instruction will be encouraged to wear appropriate face-coverings except when a six feet physical distance can be maintained. Faculty and employees will be advised in communication plans and by email and in CVCC specific guidance about the use of face coverings, and signage is placed around campus and in spaces scheduled for use for in-person instruction.

c) Students should be encouraged to wear cloth face coverings in times when at least six feet of physical distance cannot be maintained.

Students will be informed of the guidelines requiring the use of face coverings when at least six feet of physical distancing cannot be maintained. Instruction and reinforcement of the use of face coverings among students will be delivered in communication plans and by email, syllabus, and using the Canvas Learning Management System (LMS). When students arrive on campus, reinforcement will be delivered through signage and instructor requirements related to required personal protective equipment including face coverings, which may vary by discipline.

D) Institutions should consider adopting relevant business-sector guidance for staff regarding the use of face coverings (e.g. fitness center, dining, student services, etc.). Face coverings should be worn in public facing areas and in office spaces where six feet of physical distance cannot be maintained.

CVCC staff who are eligible will continue to telework. Staff who do come to campus have been informed that the use of face coverings is encouraged in public facing areas and in office spaces where six feet of physical distance cannot be maintained. The fitness facility and dining facilities will remain closed, and student and academic support services will continue to be delivered remotely. Staff responsible for oversight of computer labs made available for students without adequate computer and internet resources will follow appropriate guidance for face coverings.

12. Student Health Services (SHS):

NOT APPLICABLE. CVCC is a non-residential campus and does not provide student health services. Symptomatic individuals will be directed to contact the local health department or hospital for evaluation and treatment.

- a) Assurance of provision of medical-grade PPE for health services staff
- b) Maintenance of typical (non-COVID-19) health services
- c) Mental health services
- d) SHS facility considerations such as waiting areas, signage, environmental management/cleaning, IT considerations, etc.

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e) SHS administrative/staff considerations such as PPE, employee health program protocols, education/training of staff, billing/charges, staff scheduling, etc.

f) SHS patient care considerations such as online appointments, strategies to limit shared objects (e.g. pens, keypads), triage protocols, screening forms, patient screening procedures (e.g. for symptoms/temperature checks before entering the clinic).

13. Large events, including athletic events, and others such as ceremonies or performances

Under the current guidelines, CVCC will not host any large events, including athletic events and other such ceremonies or performances until further notice. If current guidance permits, by spring 2021 CVCC will explore options for conducting a safe ceremony to recognize graduates.

14. Communications strategy

CVCC will follow a communication plan established for reopening (**Appendix I**). Ken Bunch, media specialist and public relations officer, and Chris Bryant, Vice President of Institutional Advancement are responsible for communications activities.

CVCC will communicate important information related to COVID-19, including but not limited to:

- Information about COVID-19, including symptoms; how to protect oneself and others; and COVID-19 resources, including important CDC and VDH web links
- Information on when to stay off campus/remain at home and who to contact with questions
- The college's response to the pandemic, including information about class formats; how to access student support services; and safety requirements and practices on campus
- Information about a COVID-19 illness on campus, should one be reported
- Changes to campus access, academic calendar, class schedule, student services, student activities, or college COVID-19 protocols if Virginia moves to a different phase of the Governor's Forward Virginia Blueprint

CVCC uses multiple communications channels to disseminate information, including:

- Mass emails
- Targeted emails
- CVCC's <https://centralvirginia.edu/COVID-19> web page
- CVCC's social media sites
- Signage
- Indoor electronic bulletin boards
- Class syllabi
- Canvas messages (online learning management system)
- Verbal reminders and conversations
- Phone calls
- Meetings
- CVCC's Emergency Alert System, E2Campus and the college's public address system (used in instances when urgent information needs to be disseminated immediately) Information is shared, as frequently as needed, using the communication channel (or channels) most appropriate for the stakeholder the college is trying to reach.

Information is shared, as frequently as needed, using the communication channel (or channels) most appropriate for the stakeholder the college is trying to reach. New information is added and existing information is updated on the college's COVID-19 web page as needed, so the web page can be an ongoing resource for students, employees, and all stakeholders.

15. Orientation and education/training. Including anti-stigma training.

The communication packages and student orientation sessions will include materials on reducing stigma related to COVID-19. (Appendix J)

B. MONITORING HEALTH CONDITIONS TO DETECT INFECTION

1. Daily health screening questions and/or other health monitoring approaches that can be used to monitor health of the campus population.

Employees returning to campus will complete the VCCS Faculty and Staff Health and Safety Agreement (**Appendix K**) which requires that faculty and staff attest to the VDH COVID-19 Travel and Health Screening Questions. Anyone attending workforce training or in-person instruction on campus will be required to attest to the same screening questions and affirm them. An initial acknowledgement will be received and maintained in the form or a signed document or a sign-in roster of attendance. Students enrolled in courses that require an in-person experience for fall 2020 will be required to provide a signed copy of the “CVCC COVID-19 In-Person Class Student Guidelines” (**Appendix A**). Signage, course syllabus attachments, instructors and staff will provide daily reminders with reference to self-screening tools such as the CDC/Apple App (<https://www.apple.com/covid19/>), the CDC Self-Check Questionnaire (<https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html>), and the VDH COVIDCheck (<https://www.vdh.virginia.gov/coronavirus/covidcheck/>). Other tools will be recommended and implemented as they become available.

2. Campus level syndromic (disease) surveillance using electronic health record data or other disease surveillance methods as feasible.

CVCC does not provide health services to its students. Should any student or staff member contract COVID-19, the college will inform the local VDH office for support. CVCC’s Human Resources and Vice President for Academic and Student Services will maintain records of employee and student positive COVID-19 cases reported to the college.

3. Establishment of a testing strategy. Testing strategies should consider testing for all students, faculty or staff with symptoms and access to testing for close contacts of cases as recommended by public health. Institutions may consult with their local health department, local health systems and other relevant partners.

Symptomatic individuals will be directed to contact the local health department or hospital for evaluation and treatment.

C. CONTAINMENT TO PREVENT SPREAD OF THE DISEASE WHEN DETECTED

1. Partnership with VDH for contact tracing

The CVCC Police Chief is the primary contact with VDH and will coordinate any necessary contact tracing should it be necessary.

2. Quarantining and isolating (provision of housing, basic needs, medical case management)

As a non-residential campus, symptomatic individuals will be directed to contact the local health department or hospital for evaluation and treatment. Quarantining and isolation will be required as outlined in CDC/VDH Guidance.

3. Campus outbreak management

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Consistent with DHRM Policy 4.52, Public Health Emergency Leave and VCCS Policy 6.0.8.1, Contagious Diseases Policy, CVCC has updated this contagious disease policy (**Appendix L**). If there is an outbreak of COVID-19 that impacts the campus, the COVID-19 Task Force will manage the outbreak under the guidance of the CDC, VDH, Central Virginia Health District, Centra Health, and other regional health partners. Managing an outbreak could result in the discontinuance of the delivery of in-person courses and closure of computer labs.

4. Partnership with local health systems to assure care for symptomatic individuals as needed. (e.g. a local health system representative could serve on the COVID-19 team).

CVCC maintains regular contact with the Centra Health and the Central Virginia Health District within the regional health care system.

D. SHUTDOWN CONSIDERATIONS IF NECESSITATED BY SEVERE CONDITIONS AND/OR PUBLIC HEALTH GUIDANCE

1. Plans regarding the criteria and process for campus dismissals or shutdowns. Decisions regarding dismissals and shutdowns should be made in consultation with local and state public health officials.

CVCC will close or restrict access to its campuses if the Governor of Virginia orders the Commonwealth to move back to a previous phase.

In the event of a confirmed COVID-19 case on campus, CVCC will close campus buildings or entire campuses after consulting with the VDH, so campus facilities may be disinfected, and public health officials can perform contact tracing.

Should CVCC have to close or restrict campus access, impacted classes will be rescheduled or moved to remote formats; student services will be offered remotely; and all non-essential employees will move to telework.

2. Nature of reduced campus activity in the event of severe conditions/public health direction or guidance.

In the event CVCC has to close its campuses, the college will remain open and its operations, classes, and student support services will continue.

- Only essential personnel will be allowed on campus, and all other college employees will move to telework
- Classes will move to remote formats
- Student support services will be offered in remote formats
- Student Activities will offer online activities
- Meetings will be moved to remote formats
- Technology assets, e.g. laptops, will be loaned to students with a financial need on a first-come, first-serve basis
- If conditions warrant, and depending on what phase Virginia is in and the Governor's orders, some faculty and students may be allowed on campus to conduct performance-based learning in skills labs to allow for completion of courses

3. Considerations regarding student health and safety on campus versus returning home.

NOT APPLICABLE – CVCC is a non-residential campus.

4. Communications plan for dismissals/shutdowns.

CVCC follows a Continuity of Operation Plan (COOP) that addresses communication during dismissal/shutdowns. That plan will be followed in the event of a dismissal/shutdown. Students and employees are advised to sign up for e2Campus Alerts to receive emergency notification. Emergency notifications are also posted on the website and broadcast through local media outlets.

Student Health Safety Agreement



The health and well-being of our students, instructors and staff is a top priority. With the current and uncertain future of the COVID-19 Pandemic outbreak, it is important that we follow very specific guidelines until the pandemic ends.

This document provides guidelines for keeping students, instructors, and college staff safe during the current COVID-19 pandemic **for all in-person classes**. As a condition for your return to class, you will be expected to practice and follow these guidelines consistently for the safety of not only yourself, but for others you will encounter at the college.

For my safety, the College will do the following:

- Maintain a commitment to keeping educational interruptions to a minimum and helping students stay on track to complete their programs of study,
- Initiate steps to reduce the risk of transmission of COVID-19, including thorough cleaning and disinfecting of classroom/lab areas at the conclusion of classes.
- Provide regular cleaning/disinfecting of common areas such as water fountains and restrooms,
- Quickly respond to student concerns and/or questions as they may arise, and
- Adapt, adjust, or change procedures or policies to adhere to CDC, state, or federal policy/guidelines.

Student Expectations:

As a student, I agree to the following conditions to return to class:

1. **I will not come to class sick or stay if I feel sick**, regardless of symptoms. I will contact my instructor so that he/she is aware and can make instructional accommodations if necessary. I will stay in touch regularly with my instructor until I return to class. If he/she has not provided me with contact information, I will ask or contact the Vice President of Academic and Student Affairs office at mmickles@centralvirginia.edu or (434) 832-7656 or (434) 832-7642.
2. **I will not come to class if I have been exposed to someone with COVID 19** or traveled to an area with a high incidence COVID 19. I will quarantine per CDC guidelines. I will not come back to class until I have quarantined for a minimum of 14 days. I will contact my instructor so that he/she is aware and may make instructional accommodations if appropriate, until I return to class.
3. **If after attending a class, I find out that I was exposed to someone with COVID 19 outside of class, I will contact my instructor immediately** and quarantine per CDC guidelines. I will not come back to class until I have quarantined for at least 14 days. My instructor may make instructional accommodations if appropriate. I will stay in touch with my instructor until I return to class.
4. **If I am diagnosed with COVID 19, I will not come to class. If I recently attended class, I will advise my instructor immediately of my diagnosis.** I will stay in touch with my instructor as I am able. I will not return to class until (1) a doctor/health professional verifies I have fully recovered OR I am 14-days post-diagnosis and symptom-free and (2) contact the Vice President for Academic and Student Affairs Office and submit documentation prior to returning to mmickles@centralvirginia.edu.
5. **I will practice Social/Physical Distancing and will not congregate** before, during, and after class, as well as during breaks. I will not loiter or socialize on campus and will leave the campus when not engaged in active course-related activity.
6. **I will wear a protective face covering (mask) to all in-person classes.** This will be required for class admission until such time as I am directed to discontinue. Other Personal Protective Equipment (PPE) may be required by the college or by my instructor. Failure to wear a face covering and required PPE while on campus may result in being asked to leave as well as possible dismissal from class.
7. **I will be prepared if this in-person class is moved online.** In the event of a new outbreak or change in state guidelines, I understand it is possible my class may be moved online, in full or partially. I understand that if my class is moved online, I will need access to technology and internet with as little as 24 hours' notice; and,
8. RECOMMENDATION: **I should sign up for the CVCC e2Campus Alerts** so that I will receive school-wide bulletins and update TEXTS/EMAILS not only about closing, but other emergency information I should know. For the latest emergency closing information, please sign up for CVCC e2Campus Alerts by going to the Campus Life section of the CVCC website and follow the link to e2Campus Alerts or visit <https://cvcc.omnilert.net/subscriber.php>.

Instructor Return to Class Guidelines



The health and well-being of our students, instructors and staff is our top priority.

The purpose of this document is to give you guidelines and directions for your class as we return to campus under very unusual circumstances. With the current and uncertain future of the COVID 19 pandemic outbreak, it is important that we follow very specific guidelines until the pandemic ends. With that in mind, you must do the following:

Prepare for your First Class back on Campus:

- Distribute the Student Health Safety Agreement to all students electronically before their return to campus and have available as they arrive/enter the classroom.**
 - Ask that they please familiarize themselves with the agreement while they are waiting for class to start.
- Take class attendance.**
- Review your contact information with your class**, even if you have already given them information electronically prior to the first class meeting. We do not want students to have any reason not to stay in touch if they must miss class or need direction.
- Review the Student Health Safety Agreement with the class before beginning any class activity.**
 - **Review line-by-line and, cover all 8 points of the Student Expectations.** You must explain how you prefer to stay in contact (telephone, text, email, etc.) with them if they need to communicate with you.
 - **Emphasize:**
 - **Stay home if they have ANY SYMPTOM of illness** or any illness.
 - **Importance of maintaining social/physical distancing** whenever possible and particularly on breaks.
 - **Wearing face coverings (masks)** until such time as it is no longer required nor recommended by the state and CDC.
 - **Ask them to sign up for the CVCC e2Campus Alerts** that will be used anytime there is important information to share with students. They can opt to receive texts or emails depending on their method of signing up.
 - **Explain that failure to abide by this agreement** may result in dismissal and loss of tuition.
 - **Ask students** if they are clear on the expectations.
 - **Have students print their name on the agreements, then sign and date them.** Please compare your roster to be certain you have an agreement from all students.
 - If a student is absent, make sure you cover this with them when they return and have them sign and date.
 - **Place the agreements in an envelope once you have forms from all students** and return to the Division Office.
 - Unless otherwise directed, if you have a student who has not returned after two class meetings, please reach out to the student to determine their status. If they are returning to the next class, wait and get their form and then return all forms to the Vice President for Academic and Student Affairs office; and,
 - If a student is not returning, please advise your Associate Vice President and the Vice President for Academic and Student Affairs office.

Instructor Return to Class Guidelines



At all Subsequent Classes:

- Ensure that PPE is consistently worn, social distancing is practiced as appropriate, and lead by example.**
- If you have students who will not follow these guidelines**, please approach them and reemphasize the importance of compliance and the fact that if students don't comply, they risk infection, removal from the class, and loss of tuition. Most importantly, they jeopardize the health of classmates.
- If you have any issues or concerns or the students do**, please contact your Associate Vice President and/or the Vice President for Academic and Student Affairs office; and,
- Immediately report any positive or suspected cases of COVID** to your Associate Vice President and the Vice President of Academic and Student Affairs office.

6/23/20

DRAFT



NOTICE

Central Virginia Community College

COVID-19 Campus Access

CVCC strives to make the campus safe but cannot guarantee anyone's safety.

BEFORE VISITING CAMPUS YOU MUST MEET THE BELOW LISTED CONDITIONS

Before being granted entry to any Central Virginia Community College location, you must attest to the following statements:

- I have not been exposed to any individuals who have been ill with respiratory illness within the preceding 14 days, who are under investigation for COVID-19, or who have tested positive for COVID-19.
- I have not traveled to or been in close contact with individuals who recently returned from a country where the CDC has issued a Level 3 travel health notice.
- I am not experiencing any of the following symptoms: Fever, Cough, Shortness of Breath.

By signing in, you are attesting that the statements above reflect your current health condition and, further, that you believe your entry to this facility will not create any COVID-19 health risks or possibility of contamination to any Central Virginia Community College campus. A roster of your attendance will be used for contact tracing should there be any cases of COVID-19 reported.

Date:

Time:

Location(s):

Sign in here:

Responsible Employee: (Instructor, supervisor, etc.)		
Print Name	Signature	Phone Number

By signing in, you are attesting that the statements above reflect your current health condition and, further, that you believe your entry to this facility will not create any COVID-19 health risks or possibility of contamination to any Central Virginia Community College campus.

In the event there is a report of a positive COVID-19 contact on the day of your visit to the campus, your phone number will be utilized for notification and Contact Tracing purposes.

Stop the Spread of Germs

Help prevent the spread of respiratory diseases like COVID-19.



6 ft

Stay at least 6 feet (about 2 arms' length) from other people.



Cover your cough or sneeze with a tissue, then throw the tissue in the trash and wash your hands.



When in public, wear a cloth face covering over your nose and mouth.



Do not touch your eyes, nose, and mouth.



Clean and disinfect frequently touched objects and surfaces.



Stay home when you are sick, except to get medical care.

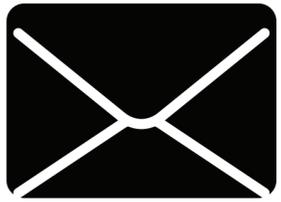


Wash your hands often with soap and water for at least 20 seconds.



cdc.gov/coronavirus

Sorry We Missed You!



The safety of our community is our number one priority.

To reach a counselor
Call (434)- 832-7800. Mon-Fri 8-5

Email us at:
counselingdept@centralvirginia.edu

Find us online at
www.centralvirginia.edu

REMEMBER:

Fall enrollment now open!

Classes begin August 24th!!



We're Practicing *Social Distancing*

Closed Temporarily

Central VA Community College – Coronavirus/ Covid-19 Hygiene practices and cleaning/disinfecting protocols

Central Virginia Community College cares about the safety of its staff and students and is following guidelines and resources provided by the CDC, VDH and EPA so that campus areas are properly cleaned, and disinfected, and appropriate hygiene is practiced.

Cleaning and Disinfecting Work Areas

Facilities Management has an inventory of supplies used for cleaning and disinfecting spaces including – gloves, spray bottles, EPA recommended disinfectants proven effective against COVID-19, soap, paper towels, alcohol-based wipes for electronics, and disinfectant wipes for hard (non-porous) surfaces. Supply inventories are appropriately stored in a climate-controlled storage warehouse within the Facilities Management Department. Each work area and classroom that will be utilized will receive the necessary products to begin classes. Supervisory staff who are responsible for work areas and classrooms should replenish these supplies as they are consumed by completing an order in the 'School Dude' system.

- *Cleaning* refers to the removal of dirt and impurities, including germs, from surfaces. Cleaning alone does not kill germs. But by removing the germs, it decreases their number and therefore any risk of spreading infection. This cleaning is performed using detergents (soap and water) prior to disinfection.
- *Disinfecting* works by using chemicals, for example EPA-registered disinfectants, to kill germs on surfaces. This process does not necessarily clean dirty surfaces or remove germs. But killing germs remaining on a surface after cleaning further reduces any risk of spreading infection.

General Cleaning and Disinfecting

Cleaning and **Disinfecting** are an important part of our strategy against the threats of Covid-19. **Cleaning** removes existing dirt and germs, while **Disinfecting** kills most germs when using the proper EPA recommended disinfectants found here:

<https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2-covid-19>

Employees will keep work areas clean and disinfected with materials provided by Facilities Management that includes ready-to-use sprays, concentrates, and wipes. While cleaning, staff will use face coverings, gloves, and eye protection where applicable. They will also make sure there is proper ventilation and keep their hands away from their faces. They will wash their hands thoroughly when finished and use approved EPA cleaning disinfectants.

https://www.cdc.gov/coronavirus/2019-ncov/about/prevention.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fabout%2Fprevention-treatment.html

CDC Website at: <https://www.cdc.gov/coronavirus/2019-ncov/index.html>

To Clean or Disinfect a Hard Surface:

If a surface is dirty, it is recommended to use a mild soap and water solution to clean the surface before disinfecting. To disinfect, it is recommended to use an alcohol-based wipe or similar cleaning solution approved by the EPA.

To Clean or Disinfect a Soft Surface:

For soft surfaces, such as carpeted floors, rugs, drapes, and chair backs and seats staff will wipe down or clean using approved alcohol-based wipes or spray cleaner to remove possible contamination.

* Instructors will wipe down all frequently touched targeted areas before, in between and after all classes, within their instructional space as listed below in addition to other cleaning protocols further detailed below. A minimum cleaning/disinfecting is recommended every two hours if there are long periods between classes. Here are some of the recommended areas to be cleaned/disinfected:

- Doorknobs and handles
- Stair rails
- Classroom tables, desks, and chairs
- Cafe tables and chairs
- Countertops
- Handrails
- Light switches
- Push buttons on vending machines and elevators
- Shared remote controls
- Shared telephones
- Computers: keyboards or Touchscreens *
- Shared tools or Equipment
- Trashcans
- Worksurfaces
- Restrooms – Toilets, Faucets, Sinks
- Water Fountains

**It is recommended that touchscreens, shared keyboards, or other electronics, be provided with a wipeable cover, and if that is not available, that they be wiped off using alcohol-based wipes only by the employees assigned that responsibility within the work area.*

<https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2-covid-19>

Contract Cleaning and Disinfection

CVCC maintains a contract with an excellent national janitorial services and facilities management contractor that performs what is traditionally an overnight cleaning as well as daytime cleaning and disinfecting. This vendor stays abreast of the industry, specifically as it applies to the appropriate cleaning and disinfecting products and techniques that can be employed. Further, they have the capability to offer advanced services such as applying disinfecting mists for enhanced and widespread disinfection or in response to any specific outbreak if it should occur. The contractor has staff at many colleges within Virginia and the Southeast and maintains effective employee training programs specific to effective cleaning and disinfection.

While our cleaning and disinfection protocols have traditionally been scheduled in the evenings after classes are complete, the vendor has been proactive and changed many of its shifts to be 'on-site' during the day. We are operating mostly on-line, but they are cleaning and disinfecting any spaces that are used during operating hours concentrating on "high touched areas" while classes are in session and performing a complete and thorough cleaning at night. In summary, cleaning is occurring as spaces are used throughout operating hours with complete cleaning occurring each night. Spaces are professionally cleaned multiple times each day.

While the current daily cleaning regimens are more than adequate, we do plan to complete a thorough professional cleaning of the campus utilizing a concentration of CDC-approved disinfectants before fall 2020 courses begin as an added measure. We have completed this already at the completion of the spring 20 term, and rooms have been marked for restricted entry after the cleaning occurred. Protocol was set in place so that each time a room was entered, both Security and Facilities were notified so that additional cleaning and disinfection could be re-administered as another layer of protection.

Specific Areas

Classrooms, Laboratories, and Computers Labs. While most course offerings will be online for the fall 2020 term, there are portions of courses that need to visit campus for courses that have a 'skills' component or other needs. Facilities Management has a schedule of all courses that will visit campus and will schedule cleaning by our third-party vendor after each usage of the classroom. This schedule is coordinated daily with the cleaning contract manager.

As stated earlier, cleaning and approved disinfecting solutions and materials will be provided to each classroom and work area. Each classroom is equipped with disposable gloves and face coverings. Instructors have been asked to use a combination of soaps and waters, disinfecting wipes and sprays to clean surfaces before, during and after classes. Additional, professional cleaning is provided after each class by the third-party vendor. Each night, areas are also cleaned and disinfected as they are used by the vendor's staff who are assigned to night operations. Instructional spaces are cleaned continually, throughout the day as they are used, and will follow all CDC and VDH guidelines, and records are maintained of this activity. Enhanced training on cleaning and disinfection will continue to be provided to college staff who work in these areas, and vendor staff receive continuous training as well. Shared objects will be minimized to the maximum extent

possible. We are ensuring adequate supplies and equipment to minimize sharing to the extent possible. When this is not possible the 'attending college employee' (faculty, lab proctor etc.) will ensure that the object is properly disinfected. All "High Touch" areas in classrooms or common areas are cleaned and disinfected by the instructors and the cleaning crew before, in-between and after classes.

Office work areas will be provided with appropriate cleaning and approved disinfecting solutions and materials. While a complete daily cleaning is provided by the janitorial vendor and custodial staff, supervisors will schedule supplemental cleaning and disinfection during working hours. The supervisor of each office will create a schedule for each office to ensure that cleaning duties are assigned, and cleaning is occurring throughout each day.

- Each morning, someone from the office will be designated to make sure supplies are available and submit a work order in 'School Dude' to secure additional supplies if necessary.
- Approximately every hour, the scheduled employee will inspect the protective barriers in place. If surfaces are visibly dirty, the hard (non-porous) surfaces will be cleaned using the soap and water solution prior to disinfection. Nitrile gloves are available and will be worn for all tasks described under these conditions. Face-coverings are required in all buildings. In cases where medical conditions prevent employees from being around cleaning products, the employees will notify their supervisors of any concerns so that reasonable accommodations can be arranged.
- Next, all hard (non-porous) surfaces in the area where employees and students may have touched will be disinfected by using disinfectant spray and paper towels, or disinfectant wipes. These surfaces may include tables, doorknobs, light switches, countertops, handles, desks, faucets, sinks, etc.
- For electronics, such as tablets, touch screens, keyboards, and remote controls, we will follow manufacturer's instructions for cleaning and disinfecting. If no guidance is available, we will use alcohol-based wipes or sprays containing at least 70% alcohol. If sprays are used, lightly spray the alcohol and dry thoroughly.
- Employees should be sure to wash their hands immediately after removing gloves and follow the posted CDC hand washing guidelines.

Common Areas - Most student service areas will operate on-line during the fall 2020 term and are closed to in-person student visits. This includes the Learning Commons, Tutoring Centers, Student Centers, and the Fitness Area. These areas will continue to receive daily vendor cleaning and disinfection from our vendor. Additionally, there are three dedicated full-time positions, and a part-time position (as needed) that are responsible for cleaning and disinfecting common use areas. Restrooms are cleaned and sanitized daily by vendor staff throughout the operating schedule. The college day staff frequently clean and disinfect these areas as well throughout the hours of operation. Trash cans have been added near restroom doors where possible. Signage has been posted on campus and in restrooms regarding social distancing, handwashing procedures and stopping the spread of germs.

State vehicles – Currently out-of-state travel is prohibited, and any in-state travel is very minimal in state cars. Requests will be coordinated with the CVCC Covid-19 team and compared to DHRM vehicle use guidance. If an allowable need arises, the employee using the car will be provided with nitrile gloves and disinfecting wipes upon return of the car keys

for disinfection of the car interior. A facility employee will perform a follow-up cleaning and disinfection. The college does have access to vehicle cleaning contracts that can be used for general cleaning purposes as well.

<https://www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html>

Handwashing and Sanitizing

CVCC has provided and will continue to provide wall mounted battery-operated touchless hand sanitizer dispensers throughout campus in hallways, outside restrooms etc. This is supplemented by other sanitizer dispensers as needed. All restrooms have hand-washing stations with appropriate antimicrobial soaps and multiple functioning sinks.

<https://www.cdc.gov/handwashing/when-how-handwashing.html>

Practice Safe Distancing. Students shall stay at least 6 feet apart from each other when standing and should sit in every other chair while in class. The student seating will be staggered so that the students are not sitting directly beside, in front or behind each other. The spaces between students will be clearly marked so students will not sit in those spots. Signage will be posted announcing safe-distancing practices are in place.

Class participants should wash their hands before and after class with soap and water for at least 20 seconds. If soap and water are not present, they should use an alcohol-based hand sanitizer. They should also avoid touching their eyes, nose, or mouth.

For more information on Protecting Yourself and Others, visit the CDC Website here:

https://www.cdc.gov/coronavirus/2019-ncov/about/prevention.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fabout%2Fprevention-treatment.html

For Everyone's Protection

FACE COVERINGS REQUIRED FOR ENTRY

FOR ALL PERSONS AGED 10 AND OVER

Face coverings should cover mouth and nose



The requirement to wear a face covering does not apply to the following:

1. While eating or drinking.
2. Individuals exercising or using exercise equipment.
3. Any person who has trouble breathing, or is unconscious, incapacitated, or otherwise unable to remove the face covering without assistance.
4. Any person seeking to communicate with the deaf or hard of hearing and for which the mouth needs to be visible.
5. When temporary removal of the face covering is necessary to secure government or medical services.
6. Persons with health conditions that prohibit wearing a face covering.
Nothing in this Order shall require the use of a face covering by any person for whom doing so would be contrary to his or her health or safety because of a medical condition.



Executive Order 63 (2020)

Thank You

CVCC FALL 2020 REOPENING COMMUNICATION PLAN

CVCC has faithfully delivered quality education without pause for the past 52 years and remains eager to continue to execute the very best educational and job skills training available in the Central Virginia region. We have delivered online courses since 1999 and recently complemented that instruction with synchronous, “virtual real-time” teaching, utilizing all available technologies. We endeavor to remain relevant to the needs of our students and stakeholders and are prepared to offer both on-line and virtual real-time instruction this fall. We will offer limited labs and hands-on training, and in-person testing for workforce and skills appropriate classes.

Fall communications plan: The following is a framework for communicating the instruction and operation plan for CVCC’s fall semester to various constituencies. CVCC will adhere to each directive from the Governor’s office and will operate with consultation from the Virginia Community College System, Virginia Department of Health, and the Center for Disease Control.

Goal: Communications with all stakeholder constituencies

Students (Immediate and on-going)

- Dean of Enrollment Management, in coordination with Dean of Student Success and Vice President of Academic and Student Affairs, will serve as a main point(s) of contact with currently enrolled students. The Dean of Enrollment Management and his peers will communicate primarily through email and will also use text messaging, Communique, and direct phone calls to students.

Faculty and Staff (Immediate and on-going)

- The College President will deliver community news and updates on a regular basis through the “everyone email” mode to all faculty and staff.
- The Vice President of Academic Affairs will approve and coordinate all faculty and staff emails concerning instruction, conduct, and student services.
- The Vice President of Finance & Administration will send periodic communications on economic and fiscal importance, as well as on facilities-related needs and concerns. Satellite centers, as well as all vendors and contractors, will operate under the direction VP of Finance & Administration.
- Human Resources Director will make announcements pertaining to all health and safety when messages are needed.
- Associate Vice Presidents will communicate with department heads, faculty, and staff with regular updates.
- Instructors will email students on a weekly basis to communicate expectations and when there is a change in instruction or delivery.

Email will be the primary mode of communication. The college has been utilizing Microsoft Teams for much of our recent internal connections. Such virtual meetings will continue to be the preferred choice of meetings for the fall, as they will conserve staff time and resources, and will help reduce

extensive cleaning efforts. Periodically, there will be necessary in-person meetings that will meet all appropriate health and safety standards that apply at that time. Convocation will be held as planned to coordinate faculty and staff for the fall semester and to train employees on new protocols and existing procedures and expectations. Staff are also receiving summer incentives to take informational classes in preparation for a better virtual class experience.

Potential Students

- **Marketing for Potential students (July 1st through September 1st)**
 - Media buys will directly address our intention for online and remote instruction.
 - **TV** – cable and local media schedule targeted to all demographics.
 - **radio** – both broadcast and Internet radio schedules.
 - **billboards, signs, banners, posters, bus advertisements** – all branded for the “Right Choice – Right Now” image and text (minimal in nature).
 - **social media** – Facebook ads and boosted postings – also posting online events, as well as posting class related contributions from dept. heads and faculty. Use social media for student and potential student demographics.
 - **direct mail** – direct mail cards to city and the four-counties “all household” addresses.
 - Website – Continuing with best practice of single point of entry for potential students by having one enrollment landing page.
 - Virtual Open Houses – continue with virtual information sessions (April – Sept).
 - Addition of Hootsuite to connect all social media platforms.
 - Building more robust platform of informational and instructional videos on CVCC YouTube Channel.
- **Dual enrollment and Early College**
 - The Vice President of Academic Affairs and Student Services will coordinate all area school districts. Her staff will provide information directly to local High school Superintendents for logistical and academic processes.
- **Community, Public, Industry Leaders, and Government leaders (Immediate and on-going)**
 - Direct Press releases.
 - Leadership editorial stories, either free or paid op/ed print ads.
 - Invitations to special virtual events: town hall meetings, career fairs, graduations, achievement celebrations, veterans’ events, pinning ceremonies, etc...

The CVCC Website has become the focal point and “face” of the organization. Before Covid-19, our website had minimal influence on our college community. Now, we have doubled efforts to make our website a relevant tool for all four constituent groups, with a massive focus on student services and successes. We have added additional banners, text box messages, direct links, instructional videos, and most recently, a staff monitored “live chat” feature that automatically connects with a website user within 12 seconds of their site visit.



Coronavirus Disease 2019 (COVID-19)

Reducing Stigma

Stigma is discrimination against an identifiable group of people, a place, or a nation. Stigma is associated with a lack of knowledge about how COVID-19 spreads, a need to blame someone, fears about disease and death, and gossip that spreads rumors and myths.

No single person or group of people are more likely than others to spread COVID-19. Public health emergencies, such as this pandemic, are stressful times for people and communities. Fear and anxiety about a disease can lead to social stigma, which is negative attitudes and beliefs toward people, places, or things. Stigma can lead to labeling, stereotyping, [discrimination](#) , and other negative behaviors toward others. For example, stigma and discrimination can occur when people link a disease, such as COVID-19, with a population, community, or nationality. Stigma can also happen after a person has recovered from COVID-19 or been released from home isolation or quarantine.

Some groups of people who may experience stigma during the COVID-19 pandemic include:

- Certain racial and ethnic minority groups, including Asian Americans, Pacific Islanders, and black or African Americans;
- People who tested positive for COVID-19, have recovered from being sick with COVID-19, or were released from COVID-19 quarantine;
- Emergency responders or healthcare providers;
- Other frontline workers, such as grocery store clerks, delivery drivers, or farm and food processing plant workers;
- [People who have disabilities](#) or [developmental or behavioral disorders](#) who may have difficulty following recommendations;
- People who have underlying health conditions that cause a cough;
- People living in congregate (group) settings, such as people experiencing homelessness.

Stigma hurts everyone by creating more fear or anger toward ordinary people instead of focusing on the disease that is causing the problem. Stigma can also make people more likely to hide symptoms or illness, keep them from seeking health care immediately, and prevent individuals from adopting healthy behaviors. This means that stigma can make it more difficult to control the spread of an outbreak.

Groups who experience stigma may also experience discrimination. This discrimination can take the form of:

- Other people avoiding or rejecting them;
- Getting denied healthcare, education, housing, or employment;
- Verbal abuse; or
- Physical violence.

Stigma can negatively affect the emotional, [mental](#), and physical health of stigmatized groups and the communities they live in. Stigmatized individuals may experience isolation, depression, anxiety, or public embarrassment. Stopping stigma is important to making *a*ll communities and community members safer and healthier. Everyone can help stop stigma related to COVID-19 by [knowing the facts](#) and sharing them with others in their communities.

Appendix J

Community leaders and public health officials can help prevent stigma by:

- Maintaining the privacy and confidentiality of those seeking healthcare and those who may be part of any contact investigation.
- Quickly communicating the risk, or lack of risk, from contact with products, people, and places.
- Correcting negative language that can cause stigma by sharing accurate information about how the virus spreads.
- Speaking out against negative behaviors and statements, including those on social media.
- Making sure that images used in communications show diverse communities and do not reinforce stereotypes.
- Using media channels, including news media and social media, to speak out against stereotyping groups of people who experience stigma because of COVID-19.
- Thanking healthcare workers, responders, and others working on the front lines.
- Suggesting virtual resources for [mental health](#) or other social support services for people who have experienced stigma or discrimination.

More information

[A guide to preventing and addressing social stigma associated with COVID-19](#)  

[Protect Yourself and Your Loved Ones During a Disaster](#)

[Pandemic Preparedness Resources](#)

[Frequently Asked Questions on COVID-19](#)

Page last reviewed: June 11, 2020

Content source: [National Center for Immunization and Respiratory Diseases \(NCIRD\), Division of Viral Diseases](#)

Social Stigma associated with COVID-19



A guide to preventing and addressing social stigma¹

Target audience: Government, media and local organisations working on the new coronavirus disease (COVID-19).

WHAT IS SOCIAL STIGMA?

Social stigma in the context of health is the negative association between a person or group of people who share certain characteristics and a specific disease. In an outbreak, this may mean people are labelled, stereotyped, discriminated against, treated separately, and/or experience loss of status because of a perceived link with a disease.

Such treatment can negatively affect those with the disease, as well as their caregivers, family, friends and communities. People who don't have the disease but share other characteristics with this group may also suffer from stigma.

The current COVID-19 outbreak has provoked social stigma and discriminatory behaviours against people of certain ethnic backgrounds as well as anyone perceived to have been in contact with the virus.



WHY IS COVID-19 CAUSING SO MUCH STIGMA?

The level of stigma associated with COVID-19 is based on three main factors: 1) it is a disease that's new and for which there are still many unknowns; 2) we are often afraid of the unknown; and 3) it is easy to associate that fear with 'others'.

It is understandable that there is confusion, anxiety, and fear among the public. Unfortunately, these factors are also fueling harmful stereotypes.

WHAT IS THE IMPACT?

Stigma can undermine social cohesion and prompt possible social isolation of groups, which might contribute to a situation where the virus is more, not less, likely to spread. This can result in more severe health problems and difficulties controlling a disease outbreak.

Stigma can:

- Drive people to hide the illness to avoid discrimination
- Prevent people from seeking health care immediately
- Discourage them from adopting healthy behaviours

¹ This checklist includes recommendations from Johns Hopkins Center for Communication Programs, READY Network.

HOW TO ADDRESS SOCIAL STIGMA

Evidence clearly shows that stigma and fear around communicable diseases hamper the response. What works is building trust in reliable health services and advice, showing empathy with those affected, understanding the disease itself, and adopting effective, practical measures so people can help keep themselves and their loved ones safe.

How we communicate about COVID-19 is critical in supporting people to take effective action to help combat the disease and to avoid fuelling fear and stigma. An environment needs to be created in which the disease and its impact can be discussed and addressed openly, honestly and effectively.

Here are some tips on how to address and avoid compounding, social stigma:

1. [Words matter](#): dos and don'ts when talking about the new coronavirus (COVID-19)
2. [Do your part](#): simple ideas to drive stigma away
3. [Communication tips and messages](#).

WORDS MATTER:

When talking about coronavirus disease, certain words (i.e suspect case, isolation...) and language may have a negative meaning for people and fuel stigmatizing attitudes. They can perpetuate existing negative stereotypes or assumptions, strengthen false associations between the disease and other factors, create widespread fear, or dehumanise those who have the disease.

This can drive people away from getting screened, tested and quarantined. We recommend a 'people-first' language that respects and empowers people in all communication channels, including the media. Words used in media are especially important, because these will shape the popular language and communication on the new coronavirus (COVID-19). Negative reporting has the potential to influence how people suspected to have the new coronavirus (COVID-19), patients and their families and affected communities are perceived and treated.

There are many concrete examples of how the use of inclusive language and less stigmatizing terminology can help to in control epidemics and pandemics from the HIV, TB and H1N1 Flu.²

DOS and DON'TS

Below are some **dos and don'ts** on language when talking about the new coronavirus disease (COVID-19):

DO - talk about the new coronavirus disease (COVID-19)

Don't - attach locations or ethnicity to the disease, this is not a "Wuhan Virus", "Chinese Virus" or "Asian Virus".

The official name for the disease was deliberately chosen to avoid stigmatisation - the "co" stands for Corona, "vi" for virus and "d" for disease, 19 is because the disease emerged in 2019.

² [UNAIDS terminology guidelines](#): from 'AIDS victim' to 'people living with HIV'; from 'fight against AIDS' to 'response to AIDS'.

DO - talk about “people who have COVID-19”, “people who are being treated for COVID-19”, “people who are recovering from COVID-19” or “people who died after contracting COVID-19”

Don't - refer to people with the disease as “COVID-19 cases” or “victims”

DO - talk about “people who may have COVID-19” or “people who are presumptive for COVID-19”

Don't - talk about “COVID-19 suspects” or “suspected cases”.

DO - talk about people “acquiring” or “contracting” COVID-19

Don't talk about people “transmitting COVID-19” “infecting others” or “spreading the virus” as it implies intentional transmission and assigns blame.

Using criminalising or dehumanising terminology creates the impression that those with the disease have somehow done something wrong or are less human than the rest of us, feeding stigma, undermining empathy, and potentially fuelling wider reluctance to seek treatment or attend screening, testing and quarantine.

DO - speak accurately about the risk from COVID-19, based on scientific data and latest official health advice.

Don't - repeat or share unconfirmed rumours, and avoid using hyperbolic language designed to generate fear like “plague”, “apocalypse” etc.

DO - talk positively and emphasise the effectiveness of prevention and treatment measures. For most people this is a disease they can overcome. There are simple steps we can all take to keep ourselves, our loved ones and the most vulnerable safe.

Don't - emphasise or dwell on the negative, or messages of threat. We need to work together to help keep those who are most vulnerable safe.

DO - emphasise the effectiveness of adopting protective measures to prevent acquiring the new coronavirus, as well as early screening, testing and treatment.

DO YOUR PART:

Governments, citizens, media, key influencers and communities have an important role to play in preventing and stopping stigma surrounding people from China and Asia in general. We all need to be intentional and thoughtful when communicating on social media and other communication platforms, showing supportive behaviors around the new coronavirus disease (COVID-19).

Here are some examples and tips on possible actions to counter stigmatizing attitudes:

- **Spreading the facts:** Stigma can be heightened by insufficient knowledge about how the new coronavirus disease (COVID-19) is transmitted and treated, and how to prevent infection. In response, prioritise the collection, consolidation and dissemination of accurate country- and community-specific information about affected areas, individual and group vulnerability to COVID-19, treatment options and where to access health care and information. Use simple language and

avoid clinical terms. **Social media** is useful for reaching a large number of people with health information at relatively low cost.³

- **Engaging social influencers**⁴ such as religious leaders on prompting reflection about people who are stigmatized and how to support them, or respected celebrities to amplify messages that reduce stigma. The information should be well targeted and the celebrities who are asked to communicate this information must be personally engaged, and geographically and culturally appropriate to the audiences they seek to influence. An example would be a mayor (or another key influencer) going live on social media and shaking hands with the leader of the Chinese community.
- **Amplify the voices**, stories and images of local people who have experienced the new coronavirus (COVID-19) and have recovered or who have supported a loved one through recovery to emphasise that most people do recover from COVID-19. Also, **implementing a “hero” campaign** honouring caretakers and healthcare workers who may be stigmatized. Community volunteers also play a great role in reducing stigma in communities.
- **Make sure you portray different ethnic groups**. All materials should show diverse communities being impacted and working together to prevent the spread of COVID-19. Ensure that typeface, symbols and formats are neutral and don't suggest any particular group.
- **Ethical journalism**: Journalistic reporting which overly focuses on individual behaviour and patients' responsibility for having and “spreading COVID-19” can increase stigma of people who may have the disease. Some media outlets have, for example, focused on speculating on the source of COVID-19, trying to identify “patient zero” in each country. Emphasizing efforts to find a vaccine and treatment can increase fear and give the impression that we are powerless to halt infections now. Instead, promote content around basic infection prevention practices, symptoms of COVID-19 and when to seek health care.
- **Link up**: There are a number of initiatives to address stigma and stereotyping. It is key to link up to these activities to create a movement and a positive environment that shows care and empathy for all.

COMMUNICATION TIPS and MESSAGES

An “**infodemic**” of misinformation and rumours is spreading more quickly than the current outbreak of the new coronavirus (COVID-19). This contributes to negative effects including stigmatization and

³ Nigeria successfully contained the 2014 Ebola outbreak that affected three other countries in West Africa partly through employing targeted social media campaigns to disseminate accurate information and correct hoax messages circulating on Twitter and Facebook. The intervention was particularly effective because international non-governmental organisations (NGOs), social media influencers, celebrities and bloggers used their broad platforms to forward and share information and opinions on the health communication shared. Fayoyin, A. 2016. Engaging social media for health communication in Africa: Approaches, results and lessons. *Journal of Mass Communication and Journalism*, 6(315).

⁴ The term “Angelina Jolie effect” was coined by public health communication researchers to account for increased Internet searches about breast cancer genetics and testing for several years after 2013 actress Angelina Jolie underwent a much-reported preventative double mastectomy. The “effect” suggests that celebrity endorsements from trusted sources can be effective at influencing the public to seek health knowledge, their attitudes towards and uptake of healthcare services for Covid-19.

discrimination of people from areas affected by the outbreak. We need collective solidarity and clear, actionable information to support communities and people affected by this new outbreak.

Misconceptions, rumours and misinformation are contributing to stigma and discrimination which hamper response efforts.

- **Correct misconceptions**, at the same time as acknowledging that people's feelings and subsequent behaviour are very real, even if the underlying assumption is false.
- **Promote the importance of prevention**, lifesaving actions, early screening and treatment.

Collective solidarity and global cooperation are needed to prevent further transmission and alleviate the concerns of communities.

- **Share sympathetic narratives**, or stories that humanize the experiences and struggles of individuals or groups affected by the new coronavirus (COVID-19)
- **Communicate support** and encouragement for those who are on the frontlines of response to this outbreak (health care workers, volunteers, community leaders etc).

Facts, not fear will stop the spread of novel coronavirus (COVID-19)

- Share facts and accurate information about the disease.
- Challenge [myths](#) and stereotypes.
- Choose words carefully. The way we communicate can affect the attitudes of others (see do's and don'ts above).



COVID-19 RETURN TO ON-SITE WORK ENVIRONMENT Faculty and Staff Health Safety Agreement

The health and well-being of our students, faculty and staff is a top priority. With the current and uncertain future of the COVID-19 Pandemic outbreak, it is imperative we follow very specific guidelines until such time as the Pandemic ends.

This document provides guidelines for keeping students, faculty, and staff safe during the current COVID-19 pandemic for all ON-SITE WORK/EMPLOYMENT ACTIVITIES. As a condition for your return to the on-site work environment, you will be expected to practice and follow these guidelines consistently for the safety of not only yourself, but for others you will encounter on-site.

For my safety, the **College/my employer will do the following:**

- Maintain a commitment to keeping educational/academic interruptions to a minimum and helping students stay on track to complete their programs of study;
- Initiate steps to mitigate the risk and transmission of COVID-19 including the thorough cleaning and disinfecting of the on-site work environment, to include, but not limited to: offices, classrooms, lab areas, etc., at the conclusion of use;
- Provide hand sanitizers and hand sanitizing stations on-site; provide regular cleaning/disinfecting of common areas such as water fountains and restrooms;
- Respond to faculty and staff concerns and/or questions as they may arise, and;
- Adapt, adjust, or change procedures or policies to adhere to CDC, state, or federal policy/guidelines.

Faculty and Staff Expectations:

As an employee, **I agree to the following conditions to return to class:**

1. **I will not come to work on-site if I am sick or stay on-site if I feel sick**, regardless of symptoms. I will contact my supervisor so that he/she is aware and can provide guidance as necessary. I will stay in touch regularly with my instructor during my work absence. If he/she has not provided me with guidance, I will contact my next level supervisor or Human Resources;
2. **I will not come on to work if I have been exposed to someone with COVID-19** or traveled to an area with a high incidence of COVID-19. I will quarantine per CDC guidelines. I will not come back on to work until I have quarantined for a minimum of 14 days. I will contact my supervisor and work with Human Resources to request appropriate accommodations, i.e., telework options, alternative work options, etc., if appropriate, until I return to work on-site;
3. **If after returning to work on-site, I find out that I was exposed to someone with COVID-19 outside of the work environment, I will contact my supervisor immediately** and quarantine per CDC guidelines. I will not come back on-site to work until I have quarantined for at least 14 days. My supervisor in consultation with Human Resources may offer work accommodations, i.e., telework options, alternative work options, etc., if appropriate for the type of job/position I hold at the college. I will stay in touch with my supervisor and Human Resources during my work absence;
4. **If I am diagnosed with COVID-19 I will not come on-site to work. If I recently worked on-site, I will advise my supervisor immediately of my diagnosis.** I will stay in touch with my supervisor and Human Resources as I am able. I will not return to work on-site until I have been authorized by **Human Resources**.
5. **I will practice Social/Physical Distancing and will not congregate** before, during, and after on-site work activities, as well as during breaks. I will not loiter or socialize on-site and will leave the premises when not engaged in work-related activities;
6. **I will properly wear a protective face covering (mask) when on-site.** This will be required for entry to any building until such time as I am directed to discontinue. Other Personal Protective Equipment (PPE) may be required by the college or by my supervisor, to include, but is not limited to: face shields, gloves, sanitizer, antibacterial wipes, etc. Failure to properly wear a face covering and/or use required PPE while on-site may result in conduct violations that may lead to possible disciplinary action and/or faculty sanctions;

COVID-19 RETURN TO ON-SITE WORK ENVIRONMENT

Faculty and Staff Health Safety Agreement

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7. **I will be prepared If the college is moved to a fully remote work environment for all employees.** In the event of a new outbreak or change in state guidelines, I understand it is possible the college may be moved to a full or partial work environment. I understand that if this occurs, I will need access to technology and internet with as little as 24 hours' notice;
8. RECOMMENDATION: **I should sign up for my College's Alert System** so that I will receive school-wide bulletins and update TEXTS/EMAILS not only about closings, but other emergency information I should know. For the latest emergency closing information, please sign up.
9. **Self-Check before Returning to On-site Work/Employment** – Faculty and staff are to conduct a daily health screening by completing the [CDC Self-Check Questionnaire](#) before going to work on-site or attending class.

Signature

By signing below, **I agree to the above Employee Expectations as a condition of returning to on-site work/employment.** If, at any time, I fail to follow any of these conditions, I understand I may be subjected to possible disciplinary action, up to and including termination. This agreement will become part of my official personnel file.

PRINTED NAME

SIGNATURE

DATE

6/26/20 2:55 PM

The parties agree that this agreement may be electronically signed. The parties agree that the electronic signatures appearing on this agreement are the same as handwritten signatures for the purposes of validity, enforceability, and admissibility.

1. Scope

The policy applies to all members of the College community, including students and employees, as well as all visitors to the College's campuses and facilities, including contractors, vendors, and guests.

2. Policy Statement

Central Virginia Community College is committed to maintaining, to the extent reasonably possible, a safe environment for all students and employees (the "College community"). The purpose of this policy is to help prevent the spread of contagious diseases through measures that focus on safety, prevention, and education. As needed, Central Virginia Community College will make available to its College community information about the transmission of diseases and precautions that infected persons should take to prevent the spread of disease. Central Virginia Community College will rely on information and guidance issued by the Centers for Disease Control and Prevention ("CDC"), the Virginia Department of Health ("VDH") and local public health officials.

This policy is not intended to cover common illnesses, such as colds and viruses, or upper respiratory infections.

3. Definitions

Contagious disease: an infectious disease that is spread from person to person through casual contact or respiratory droplets, which may lead to an epidemic or pandemic and threaten the health or safety of the Campus community. These diseases include but are not limited to: tuberculosis (TB), measles or German measles (rubella), certain strains of hepatitis and meningitis, as well as SARS and certain strains of influenza. Other potentially less serious infectious diseases, such as chicken pox, seasonal flu, and pneumonia will be addressed on a case-by-case basis.

Epidemic: the occurrence in a community or region of cases of an illness clearly in excess of normal expectancy.

Pandemic: a disease epidemic that has spread across multiple continents or worldwide.

4. Procedures

Persons who know or have reason to believe they are infected with a contagious disease that, according to public health officials, creates a risk of death or significant injury or impairment, must stay home and notify appropriate College personnel, e.g., instructor(s) or immediate supervisor. They also should contact their healthcare provider and advise the local health department. They must follow the directions of the local health department to prevent the spread of infection and to protect their own health. The Campus Police Chief will serve as the point(s) of contact between the local health department and the College.

4.1. Students

Students who know or have reason to believe they are infected with a contagious disease that poses a direct threat to the health or safety of others, i.e., creates a risk of death or significant injury or impairment, must stay home and notify the Vice President for Academic and Student Affairs and/or their instructor(s).

Faculty or staff who suspect a student is exhibiting symptoms of a contagious disease shall report what they have observed to Vice President for Academic and Student Affairs but may not take any other direct measures with respect to the student. The Vice President for Academic and Student Affairs may send students home if they exhibit or report experiencing symptoms of the contagious disease. Failure to follow the Student Health Safety Agreement instructions will be considered a violation of the student code of conduct and may result in disciplinary action.

Before returning to the College, students who reported having, or have been diagnosed as having a contagious disease must be free of all symptoms of the disease for at least seven (7) days since the date of the first report or diagnosis, or as otherwise recommended by a healthcare provider, the VDH, CDC, or other public health officials. The College may require students to provide written documentation from a healthcare provider or local health department that the student may return to campus safely, unless state officials advise agencies to not make such requests, in which case students may return after the appropriate period as established by public health officials.

Students have a responsibility to stay in contact with faculty/instructors regarding their absence and missed class assignments and should contact the Vice President for Academic and Student Affairs if they have any difficulties or concerns. The College will provide reasonable accommodations as requested and required by law.

4.2. Employees

Employees who know or have reason to believe they are infected with a contagious disease that poses a direct threat to the health or safety of others must notify their immediate supervisor and Human Resources that they have symptoms associated with the disease. Employees should stay home or leave the workplace if symptoms occur while already present at work. Supervisors have the authority to send employees home if they exhibit symptoms of a contagious disease while at the workplace. Employees will be charged sick or annual leave if sent home.

Before returning to the College, employees who have been diagnosed as having a contagious disease as listed above must be free of all symptoms of the disease for at least seven (7) days since the date of the first report or diagnosis or as otherwise recommended by a healthcare provider, the CDC, or other public health officials. Employees must provide written documentation from a healthcare provider that the employee may return to work safely, unless state officials advise agencies to not make such requests, in which case employees may return following the appropriate period as established by public health officials.

Employees must comply with all policies and procedures related to sick leave and supervisor notification regarding their ability to return to work. The College will provide reasonable accommodations as requested and required by law.

Failure to follow a supervisor's directive is considered insubordination and is subject to formal disciplinary action under the Department of Human Resource Management's ("DHRM") Standards of Conduct or faculty human resource policy.

When the State Health Commissioner and the Governor of the Commonwealth of Virginia declare a Communicable Disease of Public Health Threat as defined in Section 32.1-48.06 of the *Code of Virginia*, employees, pursuant to DHRM Public Health Emergency Leave Policy (Policy No. 4.52), are permitted or required to attend to the medical needs of themselves and immediate family members and will be afforded up to the maximum hours of paid leave per leave year as established by DHRM for this purpose.

4.3. College

Should any disease reach a pandemic stage, the College will rely on information and guidance from local and state health officials to provide appropriate information to the College community. College officials may temporarily close the College or its campuses, if such closure serves the best interest of the College community.

Central Virginia Community College will inform the College community of plans to provide continuity of operations that will minimize disruption to campus operations. Such continuity measures may include requiring and/or permitting employees to transition to temporary telework through a telework agreement; modifying or shifting responsibilities and duties based on College needs and access to the campus; or modifying or altering normal working hours and schedules. Other measures may include implementing new safety and sanitary measures at the workplace based on current and applicable recommendations by the VDH, CDC or any other state or federal agency, and in compliance with any Executive Orders issued that would require such measures. Students and employees will be notified of specific measures and may be asked to acknowledge receipt and understanding of those measures as well as agreement to abide by them.

The College will consult with local and state health officials to provide any specific instructions for individuals returning to the College following infection of a contagious disease.

4.4. Visitors, Guests, Contractors, and other Third Parties

The College reserves the right to limit access to its facilities to any third parties (visitors, guests, contractors, etc.), in the event of an epidemic, pandemic or any outbreak of a contagious disease that alters normal business operations. The College may institute additional safety measures based on the recommendations of public health officials that would be applicable to third parties visiting or working on campus.

4.5. Confidentiality

No person, group, agency, insurer, employer, or institution should be provided any medical information without the prior specific written consent of the student, employee, or other College community member unless required or allowable under state and/or federal law. Furthermore, all medical information relating to contagious diseases of students and will be kept confidential, according to applicable state and federal law. Medical information relating to contagious diseases of persons within the College community will only be disclosed to responsible college officials on a need-to-know basis.

4.6. Non-Discrimination/ Harassment

Discrimination or harassment of employees having or regarded as having a contagious disease is prohibited.

4.6. Sanctions

Students who fail to comply with this policy and applicable state and federal laws are subject to sanctions in accordance with the Student Code of Conduct.

Employees who fail to comply with all applicable Central Virginia Community College, VCCS, and DHRM policies and procedures, and applicable state and federal laws are subject to formal disciplinary action.

5. Authority

DHRM Policy 4.52, Public Health Emergency Leave
VCCS Policy 6.0.8.1, Contagious Diseases