



# Back to Baldwin: Comprehensive Mary Baldwin University Reopening Plan

## Table of Contents

|  |           |
|--|-----------|
| <b>SAFE AND SUSTAINABLE REOPENING</b> .....  | <b>3</b>  |
| <b>BACKGROUND</b> .....  | <b>3</b>  |
| <b>PUBLIC HEALTH CONDITIONS AND CONSIDERATIONS</b> .....                                   | <b>3</b>  |
| <b>POSITIVE TRENDS IN PUBLIC HEALTH DATA</b> .....   | <b>3</b>  |
| <b>SURGE HEALTH CARE CAPACITY</b> .....  | <b>4</b>  |
| <b>CLIMATE OF ADHERENCE TO SOUND PUBLIC HEALTH PRINCIPLES</b> .....                        | <b>4</b>  |
| <b>COVID-19 CAMPUS PLAN FOR REOPENING</b> .....  | <b>4</b>  |
| <b>REPOPULATION OF THE CAMPUS</b> .....  | <b>4</b>  |
| 1. Establishment of a COVID-19 Pandemic Task Force .....                                   | 4         |
| 2. Contact information and procedures for reaching the local health department.....        | 5         |
| 3. Student’s initial return to campus .....  | 6         |
| 4. Education/training of faculty/staff/students.....                                       | 6         |
| 5. Physical Distancing, according to CDC guidelines:.....                                  | 11        |
| 6. Hygiene practices and cleaning/disinfecting protocols .....                             | 14        |
| 7. Housing.....  | 16        |
| 8. Protection of vulnerable individuals.....   | 17        |
| 9. International Student Considerations .....  | 17        |
| 10. Partnership and communication/information sharing.....                                 | 18        |
| 11. Face Coverings .....   | 18        |
| 12. Student Health Services:.....  | 19        |
| 13. Large events, such as ceremonies or performances .....                                 | 22        |
| 14. Communications strategy.....   | 22        |
| 15. Orientation and education/training .....   | 23        |
| <b>MONITORING HEALTH CONDITIONS TO DETECT INFECTION</b> .....                              | <b>23</b> |
| 1. Daily Health Screening.....   | 23        |
| 2. Campus Level Syndromic Surveillance.....  | 23        |
| 3. Establishment of a Testing Strategy .....   | 24        |
| <b>CONTAINMENT TO PREVENT SPREAD OF THE DISEASE WHEN DETECTED</b> .....                    | <b>24</b> |
| 1. Partnership with VDH for Contact Tracing .....  | 24        |
| 2. Quarantining and Isolating .....  | 24        |
| 3. Campus Outbreak Management .....  | 24        |
| 4. Partnership with Local Health Systems .....   | 24        |
| <b>SHUTDOWN CONSIDERATIONS</b> .....   | <b>25</b> |
| 1. Plans regarding dismissals or shutdowns .....   | 25        |
| 2. Nature of reduced campus activity .....   | 25        |
| 3. Considerations regarding Student Health and safety on campus versus returning home..... | 26        |
| 4. Communications plan for dismissals/shutdown.....  | 26        |
| <b>APPENDICES</b> .....  | <b>28</b> |
| <b>Appendix A: COVID-19 Emergency Preparedness &amp; Response Plan</b> .....               | <b>28</b> |
| <b>Appendix B: Pandemic Task Force Welcome Letter</b> .....                                | <b>47</b> |
| <b>Appendix C: Health and Safety Measures Letters</b> .....                                | <b>48</b> |

|                    |  |           |
|--------------------|--|-----------|
| <b>Appendix D:</b> | <b>Student Health Form.....</b>  | <b>55</b> |
| <b>Appendix E:</b> | <b>Virtual Town Hall Power Point.....</b>  | <b>56</b> |
| <b>Appendix F:</b> | <b>Frequently Asked Questions prepared for Faculty and Staff, May 26, 2020 .....</b> | <b>57</b> |
| <b>Appendix G:</b> | <b>Reopening of MBU/MDCHS.....</b>   | <b>64</b> |
| <b>Appendix H:</b> | <b>Face Coverings Policy .....</b>   | <b>69</b> |
| <b>Appendix I:</b> | <b>COVID-19 Chartwells Dining Modifications .....</b>                                | <b>70</b> |
| <b>Appendix J:</b> | <b>Office of the Governor Update .....</b>   | <b>71</b> |
| <b>Appendix K:</b> | <b>Exposed Employee Policy .....</b>   | <b>72</b> |
| <b>Appendix L:</b> | <b>Checklist for Returning to Work After Illness with COVID-19 .....</b>             | <b>73</b> |

## SAFE AND SUSTAINABLE REOPENING

### BACKGROUND

In February of 2020, Mary Baldwin University (MBU) began preparations for a COVID-19 Emergency Preparedness and Response Plan (Appendix A) as the Centers for Disease Control (CDC) closely monitored the outbreak of the disease as it moved into the United States. The initial plan was predicated on the assumption that, in the event that the pandemic reached our community, the campus would need to suspend academic programs and most operations for weeks or months. Mary Baldwin University's response plan strategies were intended to limit, as much as possible, the number of people who got sick and minimize disruption to university operations. MBU utilized a phased response to pandemic disease emergence based upon the pervasiveness of the disease and the severity of the illness it might cause.

The plan was based on a 3-level alert system:

**Alert Level 1** – No current hazard to persons. Alert and planning period.

**Alert Level 2** - Elevated Risk. Minimal immediate hazard to students, faculty and staff.

**Alert Level 3** - Pandemic Risk – Requires coordination with outside agencies. Suspension of classes and Non-functional Operations.

By the first week of March the campus had elevated its status to Alert Level 2 and began contingency planning for closing the residential campus. By Friday the 13<sup>th</sup> of March, the campus moved to Alert Level 3, suspended in-seat classes and moved to online instruction. Students were asked to return home and the University was essentially closed. As the month proceeded, widespread community transmission was noted across the state despite the very low numbers in and around Augusta County.

We feel strongly that the University's quick response to the pandemic was instrumental in keeping our campus community safe and healthy. We now want to work diligently toward a safe reopening to allow our students the opportunity to return to their educational endeavors, back in the classroom where they will thrive. Outlined below, in keeping with the Governor's Guidance, is our comprehensive plan for our return to campus.

### PUBLIC HEALTH CONDITIONS AND CONSIDERATIONS

As Mary Baldwin University reopens, our decision comes with the acknowledgement that we will be limiting illness and not preventing all infections. Our goal is to minimize the number of infections and the risk posed to those most vulnerable. We have done due diligence in the review of data to include sources from the [Centers for Disease Control \(CDC\)](#), [Virginia Department of Health \(VDH\)](#), [State Council of Higher Education for Virginia \(SCHEV\)](#), the [American College Health Association \(ACHA\)](#) and the [Virginia Hospital and Healthcare Association \(VHHA\)](#).

### POSITIVE TRENDS IN PUBLIC HEALTH DATA

Total new cases of COVID-19 have been slowly trending down statewide over the last ten (10) to fifteen (15) days. Hospitalizations statewide are following this same trend. The number of persons tested for COVID-19 by PCR testing has increased but those testing positives have declined as have the percent (%) positivity. In Augusta County numbers remain low at 169 cases. In Staunton, the home of MBU, a total of 66 cases have been reported.

## **SURGE HEALTH CARE CAPACITY**

According to the Virginia Hospital and Healthcare Association, as of June 22, 2020 there are currently 4,321 beds available in the state of Virginia. This does not include the additional 3,695 added under Executive Order 52. Bed capacity exceeds beds occupied across the state and surge capacity is nearly double that of total beds occupied. There are a total of 2,968 ventilators on hand in hospitals across the Commonwealth. At present, six hundred fifty-three (653) of those are in use, a total of 22% of the total available. The number of hospitals reporting difficulty acquiring PPE within seventy-two (72) hours has dropped to zero since early May.

Augusta Health, Mary Baldwin University's partner hospital currently has 231 total bed capacity with an average daily census of 143 (61%) There are currently fourteen (14) ICU beds and forty-three (43) ventilators on-hand with one percent (1%) in use. Augusta Health currently reports no difficulty in obtaining or replenishing PPE supplies within seventy-two (72) hours.

## **CLIMATE OF ADHERENCE TO SOUND PUBLIC HEALTH PRINCIPLES**

Mary Baldwin University's Staunton campus will reopen in the fall while the Murphy Deming College of Health Sciences Campus in Fishersville opened June 15, 2020. The Pandemic Task Force has worked diligently to put together a comprehensive plan for both campuses to assure adherence to Public Health Principles that will guide the health and safety of all faculty, staff, and students at the University. This working plan incorporates a comprehensive approach to mitigating spread of disease, promoting healthy behaviors, maintaining healthy environments, modifying physical layouts and spaces, utilizing physical barriers and guides, and assuring healthy operations.

## **COVID-19 CAMPUS PLAN FOR REOPENING**

The following information has been compiled from multiple working documents that constitute our comprehensive plan.

### **REPOPULATION OF THE CAMPUS**

#### **1. Establishment of a COVID-19 Pandemic Task Force**

A Pandemic Task Force (Appendix B) was established in February 2020 to ensure that the University response would be driven by evidence-based, objective information that would drive a rapid, comprehensive action plan. These issues are complex and span the breadth of the University and consist of a plethora of areas of concern to include:

- **Academic Instruction and Learning**
- **Athletics**
- **Co-Curricular Programs (including Student Engagement programming, internal events, and interfacing with off-campus populations)**
- **Communications and Advancement**
- **Community Relationships/Public Events and Performances**
- **Housing and Student Life (including move-in planning)**
- **Facilities, Dining and Auxiliary Services (including purchasing and procurement)**
- **Strategy, Finance, Legal (including travel)**
- **Campus Health and Counseling Services**
- **Human Resources (including workforce management/leaves and workforce resumption)**
- **Campus Safety and Security**

The Task Force has wide representation and consists of representatives from across the University (Academics, Communications, Medical, Facilities). Its efforts are being coordinated by Dr. Deborah Greubel, a member of the Executive Staff and Vice President of Health Sciences at the Murphy Deming College of Health Sciences. Her experience in higher education spans over 27 years in medical education. In addition, Dr. Greubel has many years of experience in international disaster relief response through her service in the United States Navy.

Members include:

**a. Academic Members**

- Dr. Ty Buckman - Provost
- Dr. Darren Jones - Student Engagement
- Dr. Paul Menzer - Dean, Visual/Performing Arts
- Matt Munsey - Vice President for Admissions
- Dr. Cary Usher - Vice Provost
- Dr. Martha Walker - Dean, Arts/Sciences

**b. Communications Members**

- Ginny Clemenko – Senior Associate Vice President, Communications

**c. Medical Members**

- Dr. Kent Diduch - Interim Program Director (MD)
- Dr. Deb Greubel - Vice President Health Sciences (NP)
- Erin Marley - Student Health (NP)
- Dr. Kim Nine - Director, School of Public Health (epidemiology)

**d. Facilities**

- Tom Byrnes - Director of Athletics
- BG Terry Djuric - Commandant of Virginia Women’s Institute for Leadership (VWIL)
- Nick Hall - Environmental Health and Safety

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

Mary Baldwin University has been in close contact with the Virginia Department of Health, Central Shenandoah Health Department. Our MBU representative for the medical coordination is Dr. Kent Diduch, a physician faculty and Interim Director of the PA Program at our College of Health Sciences. Dr. Diduch, a member of the pandemic team, is a family physician who also works within the community (Augusta Health) in the COVID-19 Testing Center. Dr. Diduch seeks counsel with VDH extensively as a source of information and for outreach for specific questions related to COVID-19 morbidity and mortality reports, testing information, etc.

For coordination for contact tracing, Dr. Deborah Greubel, Vice President of Health Sciences and Erin Marley, Nurse Practitioner in the Student Health Center are coordinating efforts with Amanda McComas, RN – VDH representative to MBU for Contact Tracing. Both Dr. Kornegay and Ms. McComas are updated through our weekly Pandemic Task Force meetings to which they are invited. Contact information for the VDH Central Shenandoah District:

Laura P. Kornegay, MD, MPH  
District Director  
[Laura.kornegay@vdh.virginia.gov](mailto:Laura.kornegay@vdh.virginia.gov)  
540-332-7830 Ext. 341

Amanda McComas, RN  
Contact Tracing Team Liaison to MBU  
[Amanda.McComas@vdh.virginia.gov](mailto:Amanda.McComas@vdh.virginia.gov)  
540-290-3005

### 3. Student's initial return to campus

#### a. Initial Screening

Mary Baldwin University announced that it plans to resume in-person classes for the Fall Semester for the Staunton Campus. MBU has also resumed classes that run yearly on our Health Sciences Campus in Fishersville in June 2020. Prior to returning to campus, all students, faculty, and staff receive a letter regarding the Health and Safety Measures "Requirements for Returning to Campus" (Appendix C). Included in that letter is a mandatory COVID-19 attestation that everyone is required to complete. These requirements include:

- i. **A 14-day temperature log**
  - Instructions for the proper method of recording temperatures
- ii. **Hand hygiene video tutorials**
  - ["What you need to know about handwashing"](#) (CDC)
  - ["Fight germs. Wash your hands!"](#) (CDC)
- iii. **A comprehensive COVID-19 Attestation Form**
  - Any fever in the last 14 days?
  - Did you watch the videos?
  - In the last 14 days have you had a new cough, shortness of breath, sore throat, muscle aches, respiratory symptoms, chills, loss of taste or smell?
  - In the last 14 days have you had close contact with a person diagnosed with COVID-19?
  - Have you recently traveled to CDC designated affected countries/areas?
- iv. The responses to the Attestation Form are reviewed by members of the Contact Tracing Team. Any positive responses are referred to and discussed with the Medical Section of the Pandemic Task Force. Each case is handled individually and based on [CDC Guidance](#).
- v. In addition, all students must have completed a health form (Appendix D) for submission to the Student Health Clinic with an updated listing of current immunizations and health status.

#### b. Move-In

Move-in will entail a multi-step process that begins with the Initial Screening outlined above in Section 3.a. The campus had a trial period for the screening process in May when undergraduate students were allowed to return to campus to retrieve belongings that had been left in dormitories when the campus initially closed itself to residential living in March of 2020. Students were "cleared" to return and were limited to two (2) helpers who also were required to complete the Initial Screening process. This will be adopted as a process for repopulation of campus in the fall.

### 4. Education/training of faculty/staff/students

In late May, the University hosted a "Virtual Town Hall" (Appendix E) that outlined the University's comprehensive plan for reopening the campus for residential education. A PowerPoint presentation accompanied the virtual meeting along with a written compilation of frequently asked questions (Appendix F). The following information was provided to the faculty and staff and will be part of New Student Orientation as students return to campus:

- i. Prevention of the spread of disease
- ii. Promotion of behaviors that could reduce spread
- iii. How to maintain healthy environments in the workplace

- iv. How to maintain healthy operations in the workplace
- v. Recognizing the signs and symptoms of COVID-19
- vi. Staying vigilant to keep the campus community healthy
- vii. [Prevention of Social Stigma Related to COVID-19](#)

In addition to a Town Hall (Appendix E), Frequently Asked Questions document (Appendix F) and the letter sent forward to faculty, staff, and students regarding the “COVID-19 Requirements for Returning to Campus” (Appendix C) students will also receive an informational/educational document titled: “REOPENING of MBU/MDCHS” (Appendix G). This five-page document includes embedded documents and links to external resources. It is based on the Centers for Disease Control (CDC) “[Considerations for Institutes of Higher Education](#)”. Detailed information in this document include:

**a. The Guiding Principles**

The more an individual interacts with others, and the longer the interaction, the higher the risk of COVID-19 spread. (Lowest Risk, More Risk, Highest Risk)

**b. How the disease is spread**

COVID-19 is a beta-coronavirus mostly spread by respiratory droplets released when people talk, cough, or sneeze. These droplets can land in the mouths or noses of people nearby or possibly inhaled into the lungs. Spread is most likely from person to person through close contact (within 6 feet). Transmission can occur during the pre-symptomatic incubation period (1-2 days). Viral shedding has also been reported in asymptomatic individuals. It is thought that asymptomatic people may represent 25-50% of total infections.

The virus can deposit on environmental surfaces where it can remain viable for days. It is thought that the virus may spread to hands from these contaminated surfaces and then to the nose, mouth or eyes, causing infection. Therefore, personal prevention practices (such as handwashing, staying home when sick), environmental prevention practices (such as cleaning and disinfection) and robust contact tracing are important principles that are covered in the MBU education documents.

**c. Promoting Behaviors that Reduce Spread**

**i. Health Check Before Returning to Campus** (see section 3.a)

As noted above under “initial screening”, utilizing the Health Check before returning to campus is paramount in reducing the likelihood of disease migration. This document, titled- “Requirements for Returning to Campus” (Appendix C), is a requirement for all faculty, staff, and students. Education is provided within the letter on how this screening is accomplished. This process will also be utilized any time a person is off campus for any extended period.

**ii. Staying home or self-isolating when appropriate**

The Contact Trace Team, the Medical Section of the Pandemic Response Team, and/or the Student Health Center will consult with any faculty, staff or student who believes they may be sick with COVID-19 or been exposed to COVID-19. Before returning to campus, these individuals will be asked to self-isolate or quarantine, depending on their exposure and in accordance with [CDC Guidelines](#) and the [Virginia Department of Health](#) (VDH).

iii. **Hand hygiene education is included in the “Requirements for Returning to Campus” document.**

- [“What you need to know about handwashing”](#) (CDC)
- [“Fight germs. Wash your hands!”](#) (CDC)

iv. **Respiratory etiquette**

Information on respiratory etiquette is included in our Reopening Educational Document (Appendix G) and our Face Coverings Policy (Appendix H). The information contained in these documents was obtained from the CDC website [“Respiratory Hygiene/Cough Etiquette”](#) and has been included in our posted signage around the campus.

v. **Face coverings**

- The University has created a face covering policy (Appendix H) which outlines the requirements for the use of face coverings at MBU.
- This same policy applies to the Athletic Facility (PAC) and during travel to away games when allowed.

d. **Maintaining Healthy Environments**

i. **Cleaning and disinfecting**

- Our housekeeping staff will continue their normal duties paying special attention to frequently touched surfaces (e.g. door handles, sink handles, drinking fountains, grab bars, hand railings, bathroom stalls, and dining tables) within our facility.
- The University has purchased an “IsoKlean ULV Cold Fogger” that provides a touchless application that covers 1076 sq ft per minute.
- Students, faculty, and staff are expected to keep their personal items (e.g. cell phones, other electronics) and personal work and office spaces clean. Use of disinfectant wipes will be available to them to wipe down desks, phones, etc. Trash will be removed by the office occupants and placed in the hall for housekeeping to collect.
- Students will work with faculty on specific cleaning procedures to occur during the day in classrooms and labs for additional cleaning after spaces are used.
- There is a separate policy for the usage of College of Health labs and classroom spaces. Students will receive a copy of this and must acknowledge by signing.

ii. **Modifying layouts**

- For classrooms, seating/tables/desks will be at least 6 feet apart when feasible.
- Students and faculty are NOT permitted to move chairs or tables in any room.
- We will host smaller classes in each room to ensure 6 feet spacing.
- In some instances, distance learning may need to be offered in addition to in-person classes to help reduce the number of in-person attendees.
- Some classes may be live streamed into adjacent classrooms to ensure 6 feet spacing.
- We will provide adequate distance between individuals engaged in experiential learning opportunities (e.g. labs) as much as possible to reduce exposure time.

**iii. Physical barriers and guides**

- We have installed some physical barriers, such as sneeze guards and partitions, in some areas of the buildings. The sneeze guards are focused on touchless points of sale, ordering food, counseling, and tutoring that cannot be conducted virtually.
- We are utilizing physical guides, such as tape on floors or sidewalks and signs on walls to ensure that individuals remain at least 6 feet apart in lines or at other times.

**iv. Staggering use and restricting numbers in communal spaces**

- Staggered use and restriction of the numbers of people allowed in at one time to specified shared spaces to ensure that everyone can stay at least six (6) feet apart. For example:
  - Atriums
  - Student lounge areas
  - Student study areas
  - Faculty kitchen areas
  - Faculty conference areas
- All faculty, staff, and students will be expected to help clean and disinfect areas between use.
- In the College of Health Sciences, students will only be in the building for scheduled face to face lectures and labs. Studying at home is preferred unless it is crucial to be in the building to utilize equipment for skills practice.

**v. Changing how food service is operated (Appendix I)**

Dining Services has prepared a comprehensive plan on [COVID-19 Modifications](#) to include:

- Safety Procedures Across Campus
  - Associate Safety
    - Wellness check to include self-reported illness and temperature checks
    - Face coverings required at all times
    - Gloves worn at all times
    - Plexi health shield barriers at registers and points of service
  - Cleaning and Sanitizing
    - Associates wash hands and change gloves every 30 minutes or less
    - Cleaning tables, chairs, and high-touch surfaces with sanitizer
    - Area disinfection (facility, restrooms, etc.)
    - Sanitizer stations
  - Social Distancing and Associate Training
- Service Modifications
  - Three-tier model to increase social distancing
  - Entrance and traffic flow
  - Service ware solutions
  - Hours of Operations
  - Seating Modifications
- Catering Modifications
  - Contactless Catering
    - Packaging approach

- Attendant-served buffets
- Communications, Digital and Marketing Plans
  - A complete guest communication package will be implemented in all locations to communicate the new safety measures.
  - Signage throughout facilities for social distancing
    - Dining venue entrances
    - Dining stations or cues
    - Line cuing
    - Digital ordering pickup zone communication
    - Digital marketing plans

**e. Maintaining Healthy Operations**

**i. Recognizing signs and symptoms**

Students, faculty, and staff had information related to “*signs and symptoms of disease*” delivered as part of the Virtual Town Hall (Appendix E). Faculty and staff have also been provided with a copy of the document the REOPENING OF MBU/MDCHS (Appendix G). Within the document is a reference to “Recognizing Signs and Symptoms” which is linked to the CDC resource [signs and symptoms of COVID-19](#). If faculty staff or students come to work ill or become ill at work, they will be sent home.

**ii. Protections for students, faculty, and staff at higher risk for severe illness from COVID-19**

- Faculty and staff who have serious underlying medical conditions who might be at [higher risk for severe illness from COVID-19](#) will have options to help limit their exposure (e.g., telework and/or modified job responsibilities). Individuals should speak to their supervisors regarding these options.
- Students at [higher risk for severe illness](#) will have options to help limit their exposure (e.g. virtual learning). Students should speak to their program directors regarding these options.
- Consistent with applicable law, policies are in place to protect the privacy of people at [higher risk for severe illness](#) regarding underlying medical conditions in compliance with applicable federal and state privacy and confidentiality laws.

**iii. Regulatory Awareness**

- Faculty, staff, and students are included on any information that is disseminated through the University that relates to federal, state, or local regulatory agency policies.
- All faculty and staff in the College of Health Sciences Professional Program to which the following policy pertains have been made aware of this state regulatory agency policy relating to the Training Site Requirement for the procurement of PPE (Appendix J).

**iv. Gatherings**

- Virtual events, meetings, etc.
  - We will pursue virtual group events, gatherings or meetings as much as possible, and when required to be in person (e.g. classroom, labs) promote social distancing of at least 6 feet between people.
- Limit non-essential visitors, volunteers, activities

- We will limit non-essential visitors, volunteers, and activities involving external groups or organizations as possible - especially with individuals who are not from the local geographic area (e.g. community, town, city, or county).
  - Individuals visiting the campus and buildings must have completed the 14 day temperature checking and attestation process that all students and faculty complete. There are NO EXCEPTIONS.
- v. **Travel and transit**
  - All non-essential employee travel is discontinued at this time.
- vi. **Designated COVID-19 Point of Contact**
  - The Contact Trace Team or the Pandemic Medical Team is the designated COVID-19 Point of Contact. The contact information for the team can be located on the University website.
  - The Student Health Center is also a designated COVID-19 Point of Contact.
  - REPORTING SYMPTOMS:
    - What to do if you are sick: [follow these instructions first!](#)
    - **Then REPORT - call the Contact Trace Team**
      - If you have symptoms of COVID-19
      - If you have a positive test for COVID-19
      - If you were exposed to someone with COVID-19 within the last 14 days
- vii. **Leave and Time off policies**
  - We will have flexible sick leave policies and practices that enable faculty, staff and students to stay home or self-isolate when they are sick, have been exposed, or are caring for someone who is sick.

## 5. Physical Distancing, according to CDC guidelines:

### a. Strategies to allow physical distancing in classrooms/learning environments

#### i. Occupancy

Occupancy limits have been set based upon room size and numbers of desks/chairs/tables that will allow for distancing between students/faculty for a minimum of six feet. This limit shall not exceed the maximum capacity (50) for a gathering space as directed by the Governor's Office during Phase II of reopening Virginia. Most rooms within the University, utilizing this principle, have a max capacity of about thirty-five (35) seats. Classes will be reassigned to appropriately sized spaces as necessary to assure that distancing guidelines are met.

#### ii. Staggered Schedules

As of June 15<sup>th</sup>, faculty have submitted plans for all scheduled fall courses to accommodate COVID-19 contingency planning. Start times for classes that exist within the same building/floor are staggered to allow for decreased congestion in the hallways.

#### iii. Classroom Layout

Classrooms have had the furniture rearranged and measured to ensure a distancing between students/faculty of at least six feet. Spacing includes six (6) feet distance between each table side by side as well as six (6) feet distance to the next table in front. This distance takes into account the chair where the student would sit, not desk end to desk end. Desks may also be staggered in some rooms to allow for more spacing.

- iv. **Workspace Distancing**

Within most buildings, faculty enjoy a private office. This eliminates the worry for distancing while in the faculty workspace. For staff who are in communal work areas, a minimum of six (6) feet of space between work spaces has been set up. Barriers (such as that in a cubicle work area) decrease the need for increasing distance greater than six (6) feet. Face coverings are required in all open areas including open work spaces.
- b. **Social distancing considerations outside the classroom**
  - i. **VWIL Corps of Cadets**

Mary Baldwin University has a senior military college Corps of Cadets called the Virginia Women’s Institute for Leadership (VWIL). The Corps consists of approximately 100 residential students. The cadets will maintain 6-10 foot distances in formations and physical training. The cadets will also wear face coverings and help educate the MBU community on face coverings and social distancing. VWIL formations will be held outdoors primarily. Three parades in the Fall semester will be held outdoors, cadets will wear face coverings and maintain 6-foot distance. Spectator chairs will be set up 6 feet apart. We’ll offer livestream or recorded video. Vans will be disinfected with our IsoKlean system on a weekly basis, disinfecting will be in each van for cadets to wipe down seats and seatbelts. Cadets will wear face coverings in vans (unless traveling alone).
  - ii. **Extracurricular Activities**

Programming will abide by physical distancing guidelines stated in CDC regulations. The number of attendees at events will be limited by the revised room occupancy. Students will create a reservation process to assess the number of attendees at formal events. Events that are structured for participants to “come and go” will be monitored for room capacity, social distancing, and number of attendees by the Event Coordinator.
  - iii. **Dining Services**

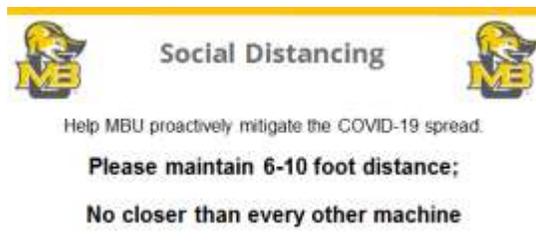
Dining Services has prepared a comprehensive plan on COVID-19 Modifications. ([Appendix I](#)).
  - iv. **Residence Life & Housing**

Visitation while class is in-session will be limited to registered students who reside on campus. Visitors that are not MBU students, faculty, and staff will be permitted and must complete the attestation form and 14-day temperature check prior to each visit. Overnight guests will be prohibited. Students will adhere to physical distancing guidelines and revised room capacities in lounges and common areas (kitchens, laundry rooms, bathrooms, etc.).
- 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.**
  - i. **Lounges**

We are committed to limiting capacity in lounges (indoor and outdoor) across campus to enable 6-foot distancing along with the wearing of face coverings in public. Each lounge across campus will have room capacity signs posted; extra chairs have been removed to encourage positive behavior regarding social distancing. Residence Assistants (RA) will be expected to remind students of the occupancy limits, social distancing, etc.
  - ii. **Exercise Rooms**

Indoor exercise rooms have been evaluated to limit room capacity; enabling athletes to maintain six (6) to ten (10) foot distance from other athletes. Professors for Physical

Education classes and coaches/athletic trainers will ensure athletes maintain proper distance both indoors and outdoors. We are expanding our yoga room to enable this distancing. In our strength and conditioning room and aerobic fitness room the following reminders will be posted:



**iii. Dining Halls**

Dining Services has prepared a comprehensive plan on Covid-19 Modifications. ([Appendix I](#)).

**iv. Athletics**

Six (6) feet social distancing will occur within all classrooms, lobbies, hallways, locker rooms, the fitness center, dance room, athletic training room, and gymnasium. Building capacity expected to be approximately 40-50% less than previous capacity.

- The utilization of floor decals on walking areas and in the activity areas throughout the PAC. These will be located at 6 feet intervals to indicate distance requirements.
- Signage indicating room capacity throughout the building. These will be placed in each locker room, classroom, and activity space.
- Face coverings are expected across the campus to include inside the athletic facility.
- Travel to away games (when permitted) will include distancing within vehicles and the wear of face coverings. Each passenger will sit one per row on each side of the bus (alternating seats). There are 4 seats in each row and by alternating seats there can be two passengers in each row. The traveling party (coaches and players) will alternate seats in each row to maximize spacing. The coaching staff will monitor these requirements during travel.

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

**i. Lounges**

As stated above in 5.c.i, we are committed to limiting capacity in lounges (indoor and outdoor) across campus to enable 6-foot distancing along with the wearing of face coverings in public. Each lounge across campus will have room capacity signs posted; extra chairs have been removed to encourage positive behavior regarding social distancing. The capacity will be in keeping with the Governor's mandate.

**ii. Exercise Rooms**

As stated in 5.c.ii, indoor exercise rooms have been evaluated to limit room capacity; enabling athletes to maintain six (6) to ten (10) foot distance from other athletes. Professors for Physical Education classes and coaches/athletic trainers will ensure athletes maintain proper distance both indoors and outdoors. We are expanding our yoga room to enable this distancing. In our strength and conditioning room and aerobic fitness room reminder signage will be posted.

iii. **Dining Halls**

Dining Services has prepared a comprehensive plan on Covid-19 Modifications. ([Appendix I](#)).

iv. **Athletics**

The following will apply to events if held at MBU:

• **Outdoor Events**

- The bleachers will be closed for use.
- Announcements regarding the social distancing (6 feet) requirements for attendees at games will be sent out prior to game day.
- Attendees will be asked to bring their own lawn chairs and spread out around the event perimeter maintaining a 6 feet distance.
- Staff will be available to help remind spectators of the 6 feet distancing rules.
- Face coverings will be required for entrance into the event area.

• **Indoor Events**

- Capacity will be limited to approximately 33%. Passes will be issued for a specified number of spectators for each event.
- Six (6) feet social distancing rules will apply. Seated areas will be marked with tape.
- Face coverings will be required for entrance to the event.

• **Visiting Teams to MBU Campus for Athletic Events**

- By Conference rules, the Athletic Trainers of the opposing school shall certify the health of their athletes prior to the onset of travel to MBU. The Athletic Trainers of the USA South Athletic Conference are in the process of issuing how this will be directed.
- MBU will ask for written documentation of the opposing teams verification of clearance.
- Referees/Officials will be checked by MBU Athletic Trainers or Representatives prior to interacting with teams/coaches. College referees will be under a “14 day socialization policy” all season. Temperature checks will be obtained on each official prior to a contest.

e. **Strategies for food/dining services should be consistent with plans to optimize physical distancing.**

Plans regarding dining services take into consideration 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. The dining services contractor has put together a comprehensive plan for these items ([Appendix I](#)).

6. **Hygiene practices and cleaning/disinfecting protocols**

a. **Cleaning and disinfection protocols**

i. **Frequently touched surfaces**

- In keeping with the CDC guidelines ([CDC.gov](#)), housekeeping will follow the recommendations within these guidelines.
- Housekeeping staff will pay special attention to frequently touched surfaces to include door handles, sink handles, grab bars, hand railings, light switches,

countertops, bathroom stall, dining tables, etc. across the campus. Drinking fountains have been covered for non-use to reduce exposure. Touchless bottle filling stations will still be available for use.

- Employees will be responsible for cleaning of desktops, phones, keyboards, etc within their own workspace.

**ii. Transport vehicles**

• **Transporting passengers**

In keeping with CDC Guidelines ([CDC.gov](https://www.cdc.gov)), staff may transport known or suspected cases of COVID-19 in non-emergency vehicles, such as passenger vans or cars, for transportation to receive essential medical care. Drivers will wear an N95 respirator or face covering (if N95 is not available) and eye protection (face shield, goggles) and the passenger will also wear a face covering. Occupants of the vehicle will avoid close contact (6 feet) with others. Drivers will comply with hand hygiene

• **Cleaning/Disinfecting of Vehicles**

In keeping with CDC Guidelines ([CDC.gov](https://www.cdc.gov)), the following guidelines will be utilized for cleaning and disinfecting of vehicles:

- Clean and disinfect commonly touched surfaces in the vehicle at the beginning and end of each shift and between transporting passengers who are visibly sick.
- Ensure adequate ventilation when utilizing disinfection products during cleaning. Doors and windows will remain open during cleaning.
- When cleaning and disinfecting, individuals will wear disposable gloves and PPE required according to the product manufacturer's instructions. Use of disposable gown will be used, if available.
- The vehicle will be cleaned with soap and water if surfaces are visibly dirty, prior to disinfectant application. The vehicle will be disinfected with an EPA Registered Antimicrobial Product, diluted bleach, or alcohol solution as recommended by the CDC ([CDC.gov](https://www.cdc.gov)).

**iii. Schedules for increased cleaning, routine cleaning and disinfection**

Housekeeping staff will continue their normal duties paying special attention to frequently touched surfaces. Utilizing guidance from CDC ([CDC.gov](https://www.cdc.gov)) and cleaning recommendations from the EPA ([EPA.gov](https://www.epa.gov)) increased cleaning will include:

- Normal routine cleaning with soap and water
- Disinfection with EPA-approved disinfectants against COVID-19
- Use of alternate disinfectants in the event that EPA-approved disinfectants are not available ([EPA.gov](https://www.epa.gov)).

**iv. Assurance of adequate cleaning supplies**

Adequate supplies of soap, hand sanitizer containing at least 60% alcohol, paper towels, and disinfectant wipes have been ordered in bulk supply for use across the campus. We will continue to monitor supply volume and keep on hand adequate numbers of these items. In addition, we will have an appropriate inventory of EPA approved disinfectants as recommended by CDC ([CDC.gov](https://www.cdc.gov)) as well as IsoKlean.

**v. Correct use and storage of cleaning supplies**

MBU will provide education to all housekeeping employees on the use of PPE, how to properly don (put on) and doff (take off) PPE, and how to properly dispose of PPE. Workers will be trained on the hazards of and proper storage of the cleaning chemicals used in the workplace in accordance with OSHA's Hazard Communication standard ([29 CFR 1920.1200](https://www.ecfr.gov)).

**b. Provisions for hand sanitizer/handwashing stations**

Hand sanitizer will be available in every building entrance and outside elevators on every floor. Classrooms and office spaces throughout the University will be equipped with disinfecting wipes. Hand sanitizer stations will be strategically placed throughout the buildings on both campuses. Bathrooms are equipped with antibacterial hand soap.

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

Professors will ensure equipment (science lab, computer lab, band instruments, etc) are not shared. Cleaning supplies will be provided to ensure equipment is disinfected between uses. Computer labs will be disinfected with IsoKlean Fogger twice a week and students will be encouraged to use disinfectant wipes before using computer lab equipment while maintaining social distance.

**7. Housing**

**a. Face coverings in shared spaces**

Face coverings will be required in all shared spaces if more than one individual is in the space at a time. Students may relax their face coverings if in their dormitory room alone or other shared space alone. When another person enters the space then each individual will don their face covering.

**b. Reminders of proper hand hygiene**

Instructional signage and reminders are posted in restrooms, hallways, on doors and on bulletin boards.

**c. Enhanced cleaning**

Housekeeping staff will continue their normal duties paying special attention to frequently touched surfaces (e.g. door handles, sink handles, grab bars, hand railings, bathroom stalls, dining tables) across the facility. Drinking fountains have been covered for non-use to reduce exposure to the virus. Touchless bottle filling stations will still be available for student use. The University has purchased a hospital-grade disinfectant that provides a touchless application that covers 1076 sq ft per minute. Students, faculty, and staff are expected to keep their personal items (e.g. cell phones, other electronics) and personal work and office spaces clean. Use of disinfectant wipes will be available to them to wipe down desks, phones, etc. Students will be encouraged to take trash from their rooms to large trash cans that are available in each residence hall and emptied daily during move-in, thereafter 2-3 times a week or as needed.

**d. Training for residential advisors/live in staff**

Training will include information about University policies and procedures regarding emergency response, programming requirements that adhere to physical distancing, and incident reporting for students who violate COVID-19 policies.

**e. Restrictions on events/social activities in housing facilities**

Programs will occur in residential spaces and be limited to revised capacity and adhere to physical distancing guidelines. Residential staff will increase the amount of passive/virtual programming.

**f. Establishment of occupancy limits**

Furniture in the residence halls have been placed in positions to assure 6-foot distancing between residents. Students will be encouraged not to move furniture for their own health and safety.

**g. Restrictions on building access**

Visitation while classes are in-session will be limited to registered students who reside on campus. Visitors that are not MBU students, faculty, or staff will be permitted and must complete the attestation form and 14-day temperature check prior to each visit. Overnight guests will be prohibited. Students will adhere to physical distancing guidelines and revised room capacities in lounges and common areas (kitchens, laundry rooms, bathrooms, etc.).

**h. Required training and documentation for certain staff**

All residential staff will receive the training that is provided to all University staff.

**8. Protection of vulnerable individuals**

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

The health and safety of our entire MBU family is our top priority. Beginning in March 2020, MBU announced a campus-wide update on flexible work arrangements. If a faculty or staff member falls into a high-risk group, the University is urging them to work from home as they are able. Students are also encouraged to continue virtual learning opportunities should they be at high-risk or if they should fall ill.

**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**

- i. MBU employees are regularly encouraged to stay home if they are not feeling well, notify their supervisor of the absence, and report close contact with people exhibiting COVID-19 symptoms or their own COVID-19 symptoms to our MBU COVID-19 Contact Trace team. MBU provides paid authorized absences for MBU employees to self-isolate or quarantine while awaiting results of contact tracing.
- ii. Faculty, coaches, and advisors will regularly encourage students to report to the Student Health Center when they come in close contact with people exhibiting COVID-19 symptoms or they have their own COVID-19 symptoms. Faculty will enable students to complete coursework while in self-isolation or quarantine. Confidential reporting is key to protecting the individual's privacy while maintaining health and safety of our community.

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

Mary Baldwin University has policies related to exposure and return to work/school: The Exposed Employee Policy (Appendix K) allows for prompt identification and isolation of potentially infectious individuals as a critical step in protecting faculty, staff, and students on the MBU and MDCHS campus. The Checklist for Returning After Illness (Appendix L) is based upon the CDC Guideline regarding safe return to work.

**9. International Student Considerations**

**a. COVID-19 Travel Health Risks**

As of June 11, 2020, Passport Operations through the Department of State have been delayed. Some passport agencies and centers are entering phase one of reopening and all passport

applications have been delayed. Currently there are over 1.72 million passports awaiting issuance.

Those students with current F1 visas can only enter the U.S. up to 30 days before the start date of their document. When these students arrive to the U.S. we will require a 14 day quarantine prior to coming to campus.

We have reviewed and are following the CDC recommendations for Study Abroad and Other International Student Travel ([International Travel, CDC](#)). It is the responsibility of the family of international students to understand the health and safety risks of travel. However, we work with all international students through the Spencer Center at MBU to prepare them for the arrival to campus.

**b. CDC Returning Travelers Guidelines**

If a student is arriving to the campus from the countries identified by the Centers for Disease Control and Prevention (CDC) as a Level 2 and/or Level 3 country, the student will be quarantined at an off-campus location for fourteen (14) days from the date of return to the United States but before the first day of program start, even if they do not feel ill.

**c. Travel Registry**

International student summer residents will be assessed to determine if they will require quarantine.

**10. Partnership and communication/information sharing**

**a. Augusta Health**

Mary Baldwin University Student Health Services are contracted with Augusta Health Hospital and Augusta Medical Group to provide healthcare services to MBU students. Through this partnership, and in regular contact with the leadership of Augusta Medical Center, MBU is able to maintain a very close working relationship with the hospital system. In addition, members of our Murphy Deming College of Health Sciences work part-time within the Augusta Health system leading to increased information sharing.

**b. Virginia Department of Health (VDH)**

We have invited both Dr. Kornegay and Amanda McComas, RN to our weekly Pandemic Team meetings. We have had meetings with Amanda and members of our Student Health Services team. We enjoy a great working relationship with our VDH partners.

**11. Face Coverings**

**a. Plans for how we intend to teach/reinforce use of face coverings among students, faculty and staff**

- i. The Face Covering Policy (Appendix H) states that all faculty, staff, and students must wear a face mask when on campus in a public area including time of brief interaction between co-workers or friends. The policy reiterates that the face covering is not a substitute for social distancing.
- ii. The Face Covering Policy covers the use of face coverings while on campus, the care of the face coverings, and other information regarding social distancing, respiratory etiquette, and hand hygiene.

- iii. This information is part of the information given to all faculty, staff, and students as part of the “Safe Return to Campus” information.
- b. Personnel:**
- i. Faculty**
- Normal Classroom: Mary Baldwin University has implemented a Face Covering Policy (Appendix H). Face coverings will be worn at all times while still maintaining six feet distancing. We have allotted the freedom for faculty to teach without a face covering if they are at least ten (10) feet away from any student within the class. However, we are encouraging the use of face coverings even in these instances as a mentoring opportunity to show to all students the importance of adherence to this important safety requirement. We have enhanced the classrooms with microphones to increase the ability for students to hear a faculty who is speaking through a face covering. Performance Classrooms: Increased social distancing greater than ten (10) feet has been recommended for those classrooms in which students may be required to perform, sing, etc. The use of face coverings is still required, however, there may be instances where increased distancing beyond ten (10) feet may be recommended.
- ii. Students**
- Students will be required to wear face coverings at all times when on campus with the following exceptions:
- In an office space alone
  - In a dormitory room alone
  - In a dormitory room where roommates can maintain 10 feet distancing
  - In an automobile alone
- iii. Staff**
- Mary Baldwin University has implemented a Face Covering Policy for all Faculty, Staff, and Students (Appendix H). Face coverings will be worn at all times while still maintaining six feet distancing. Staff may remove their face covering if they are alone in a closed office space.

## **12. Student Health Services:**

- a. Assurance of provision of medical-grade PPE for Health Services Staff**
- Mary Baldwin University Student Health Services are contracted with Augusta Health Hospital and Augusta Medical Group to provide healthcare services to MBU students. All medical-grade PPE for the Health Center staff will be provided by our Augusta Health partners. Per Augusta Health, there is adequate supply of PPE to meet the needs of the Health Center staff. This includes gowns, gloves, N95s, surgical masks and goggles.
- b. Maintenance of typical (non-COVID-19) Health Services**
- Appointment slots for telehealth and in-person visits will be available to students. Patients will be triaged by phone to determine what appointment platform best meets their needs. If needed, telehealth appointments can be converted to an in-person visit.
- c. Mental Health Services**
- The Mental Health Counseling Center will provide virtual mental health services via telehealth. The barrier of face coverings and meeting with students has raised significant concern regarding efficacy of treatment (rapport/trust building, facial expressions, etc.). Consensus among Higher Ed counseling centers across Virginia in both public and private

universities is to use telehealth to allow for uncovered visits. Virtual therapy allows the mental health professionals to observe and “connect” with students more effectively than under “masked” conditions. Counseling and Psychological Services staff will be enrolling in an on-line course for best practices in conducting telehealth mental health services.

The following processes have been incorporated into the Mental Health Clinic:

- Face coverings, hand sanitizer, and disinfectants will be provided for staff.
- All appointments will be delivered in a HIPAA compliant format via telehealth.
- Services will be provided for all undergraduate residential students.
- Student appointments will be scheduled via phone or email. Students seeking an initial appointment for services will be scheduled for an intake appointment. Information regarding their personal data (DOB, contact information, etc.) will be reviewed to determine the urgency of the appointment (e.g. crisis, risk of harm, etc.).
- A Treatment Authorization packet is then emailed to the student for on-line completion and submission utilizing OneDrive.
- Services include:
  - Individual therapy
  - Group therapy
  - Crisis intervention
  - Educational programs
  - Consultation to faculty/staff

Plexi-glass may be used in the offices in the chance that a counselor needs to assess a student in crisis (in person) during office hours. In person crisis interventions carry a high risk of contamination due to the fact that the student may be emotionally distressed, resulting in higher amounts of bodily fluids (tears, sputum, nose blowing, etc. ). As a result, face coverings may be difficult to maintain. Mental health crisis involving risk of harm to self or others after hours will be referred by MBU on-call staff to Valley Community Services Board.

A conversion of the current waiting room for those students who may not have a private place to meet will be completed. A tablet/iPad will be provided to a student who may not have the technology for virtual therapy. Arrangements have been made for IT to provide a tablet/iPad for use for those students who do not have their own. The waiting area will be cleaned/disinfected after each visit.

The Health Center will work in conjunction with Counseling and Psychological Services to provide additional mental health services when indicated, such as medication management.

**d. Student Health Services Facility Considerations:**

**i. Waiting Areas**

There are separate waiting areas for well visits, sick visits, and mental health visits; also, separate entrances into the facility for each type of visit. There will never be more than two (2) persons in a waiting area. All waiting patients will be separated by a minimum of 6 feet. All patients are required to wear face coverings prior to entering the facility. All patients will be required to “gel in and gel out” using hand sanitizer before entering and exiting the facility.

**ii. Signage**

There is signage directing students to the appropriate entrance for their appointment; signage noting the six (6) feet distance and requirement for wearing a face covering at all times. There is also signage reminding students of good hand hygiene and respiratory etiquette.

**iii. Environmental Management/Cleaning**

Per Augusta Health Infection Control protocols, clinic exam rooms, waiting rooms and bathrooms will be disinfected after each patient visit.

**iv. IT Considerations**

Cameras and microphones have been added to the desktop computers to facilitate telehealth. We will eliminate paper forms by changing to an electronic format with upload of completed documents to a HIPAA-compliant drive.

**e. Student Health Services Administrative/Staff Considerations**

**i. PPE**

Appropriate PPE will be provided to the Student Health Service (SHS) office assistant, Registered Nurse, and Nurse Practitioner by the SHS partner, Augusta Health and Augusta Medical Group. Mary Baldwin student workers will be required to wear a face covering when they report to the clinic but any additional PPE (e.g. gloves) will be provided by Augusta Health as needed.

**ii. Employee Health Program Protocols**

The Student Health Service Registered Nurse and Nurse Practitioner will utilize employee health within their organization at Augusta Health.

**iii. Education/Training of Staff**

The Student Health Services clinicians receive COVID-specific education and training through Augusta Health Hospital's Infection Control Department. This is through in-person, video and electronic review of materials. The office assistant is educated by the Nurse Practitioner and Registered Nurse in proper use of PPE, symptom reporting, infection control best practices and the symptoms of COVID-19.

**iv. Billing/Charges**

All patient visits (except for yearly physical exams) are free to students. There are fees for rapid in-house point-of-care testing. These tests are not billed to insurance. Insurance is only billed for off-site lab testing and imaging.

**v. Staff Scheduling**

Mary Baldwin University Student Health Services consists of one (1) Nurse Practitioner, one (1) Registered Nurse, and one (1) Office Assistant. All three individuals work Monday-Friday to fully staff the clinic. Clinicians and the Office Assistant are able to maintain six (6) feet of distancing during daily operations and in cases where the clinicians must be closer than six (6) feet, appropriate PPE is used.

**f. Student Health Services Patient Care Considerations**

**i. Online Appointments**

Online appointments will not be available for students. Students need to be triaged to the appropriate appointment type (telehealth vs in-person vs immediate testing) and instructed to the appropriate entrance into the Health Center. For this reason, all students will need to call the Health Center for all appointments.

**ii. Strategies to Limit Shared Objects**

All patient forms have been converted to an electronic format which can be sent to the student and then routed to a HIPAA-compliant drive for clinic use. All pens and clipboards have been removed from the waiting area and patient rooms. Should a pen be needed by a patient, after use it will be returned to a “soiled bin” and disinfected per the infection control guidelines. Patient restroom will be restricted to those patients requiring lab urinalysis (or in cases of extreme need by the patient). All patients will “gel in and gel out”.

**iii. Triage Protocols**

All students will be screened by the scheduler at the time an appointment is made for any possible symptoms of COVID-19. If the patient makes the appointment greater than 2 days in advance, they will be advised that the day of the appointment they will be called to complete the symptom checker prior to arriving at the clinic.

**iv. Screening Forms**

Screening for possible COVID-19 symptoms will occur prior to the patient coming to the clinic. Screening will occur no more than 2 days before the scheduled appointment. Patients will be asked a series of questions to determine his/her risk of COVID-19 infection or exposure.

**v. Patient Screening Procedures (e.g. symptom/temp check before entering clinic)**

All students entering the clinic for their appointments will have their temperature checked at the door with an infrared thermometer. The symptom-checker will be completed prior to the student’s arrival in the Health Center.

**13. Large events, such as ceremonies or performances**

- a. Large events sponsored by the institution will be live-streamed (where possible). Other events will be limited to the revised space or room occupancy to ensure physical distancing.

**14. Communications strategy**

- a. Mary Baldwin University is committed to providing a safe living and learning environment, including open and ongoing efforts to inform the campus about safety issues and emergency response planning. We support community monitoring, which asks all members of campus to watch out for one another, encourage physical distancing and use of face coverings, and report COVID-19 symptoms to help keep each other safe and stop the spread of disease.
- b. MBU is leveraging existing communication systems to enable COVID-19 symptom reporting. Our community is familiar with our MAXIENT centralized reporting and recordkeeping system which will have a COVID-19 reporting tab. Additionally, the university created an email account [COVID19@marybaldwin.edu](mailto:COVID19@marybaldwin.edu) for our community to ask questions to our health professional team.
- c. The Communications Team have prepared template emails for timely notification to the MBU Community when we have our first confirmed case of COVID-19. This communication will contain no personal information and will be HIPAA compliant. The communication will be brief but will ensure that the community is aware that all individuals who may be a contact will be notified and will be asked to quarantine per CDC guidelines. We want to reassure our community of the exposure risk and reinforce the need for hand hygiene, use of face coverings, social distancing, and reporting of symptoms.

## 15. Orientation and education/training

- a. All students (returning and new) will be provided educational materials as part of student onboarding and the move-in approval process. This information will be sent to students (and parents) via email. The information includes videos for proper hand washing and proper wear of face coverings, policies for face coverings in public, importance for social distancing at all times in public. The information all includes reminders for utilization of hand sanitizer when entering spaces (e.g. residential room, classroom, etc.) and when and how to report symptoms.
- b. The use of educational posters for hand hygiene, social distancing, and the use of face coverings will be posted in dining facilities, bathrooms, residential and academic hallways, the library, computer labs, and the fitness center. These posters will catch the attention of faculty, staff, and students to remind all of the importance of keeping healthy and reporting symptoms. Social media will also be created to remind our MBU community to help mitigate the spread of the COVID-19.
- c. Social media posts will also creatively remind our MBU community to help mitigate the spread of COVID-19.
- d. Residential Assistants will have training and programming to reinforce safe habits within residential halls. New student orientation will include a session regarding COVID-19 health, safety, prevention and reporting procedures provided by health experts on the Pandemic Task Force.
- e. Students and employees will be reminded to limit public room capacity, ensure 6-foot distancing, and wear face coverings. Each room across campus will have room capacity signs posted (example below); extra chairs have been removed to encourage positive behavior regarding social distancing.

## MONITORING HEALTH CONDITIONS TO DETECT INFECTION

### 1. Daily Health Screening

- a. In high-risk areas where face coverings and/or adequate social distancing may be a challenge (e.g. clinical health practical labs), daily temperatures will be done on each faculty, staff, or student working within the clinical lab spaces. This would include certain labs on the main MBU campus as well.
- b. If a student has been off campus for a period of time (e.g. clinical rotations, internships, etc.), the student must restart the 14 day temperature log and attestation before returning to campus.
- c. If a faculty member or staff has been off campus for a period of time, the individual must restart the 14 day temperature log and attestation before returning to campus.
- d. Monitoring Symptoms Daily: The MBU community (students, faculty, staff) are encouraged to monitor their own symptoms related to the COVID-19 disease on a daily basis. MBU has signs throughout the two campuses to remind our community of what symptoms to watch for a report.

### 2. Campus Level Syndromic Surveillance

- a. The Contract Trace Team will be responsible for campus level syndromic surveillance. This will occur in partnership with the Student Health Services, Augusta Health, and VDH.

- b. MBU's Contact Trace Team members have completed the Johns Hopkins course for contact tracing: <https://coronavirus.jhu.edu/contact-tracing>.

### **3. Establishment of a Testing Strategy**

- a. MBU will test any student who presents to the Student Health Center with complaints consistent with COVID-19. A rapid-test will be performed. The student will be potentially moved to the area designated for self-isolation/quarantine if this cannot be accomplished within the current living arrangement.
- b. The Contact Trace Team will be notified and will be the main point of contact for management of the potential positive case.
- c. MBU faculty and staff who report COVID-19 symptoms will receive a prescription to report to our Augusta Health testing site by our College of Health Sciences healthcare providers. The Augusta Health testing site will know this is an MBU employee to facilitate reporting back to MBU's contact tracing team.

## **CONTAINMENT TO PREVENT SPREAD OF THE DISEASE WHEN DETECTED**

### **1. Partnership with VDH for Contact Tracing**

- a. MBU and the Student Health Services office have partnered with the Virginia Department of Health for contact tracing. A virtual meeting was held on 15 June 2020 with the Nurse Practitioner from SHS, the lead for the Pandemic Team, and Amanda McComas, RN from VDHS to outline plans going forward for a collaborative team approach.
- b. VDH participates in our weekly Pandemic Prevention and Response Team meeting. When MBU members (students, faculty, staff) are tested for COVID-19, our Contact Trace Team notifies VDH to facilitate close reporting while MBU members self-isolate or quarantine awaiting test results.

### **2. Quarantining and Isolating**

- a. The University has plans for the utilization of an off campus facility for those cases who may need isolation or quarantine. Single room with private bathroom facilities would be available at this site. Campus services (dining, student engagement, virtual learning) will be provided so as not to disrupt learning.

### **3. Campus Outbreak Management**

- a. If a surge occurs within the community and an outbreak were to occur on the MBU campus, we would re-enact our COVID-19 Emergency Management Response Plan (Appendix A). The threshold for a total shutdown of the campus is a bit higher now given the extensive planning and work that has been done to prepare the campus to handle a certain level of cases.
- b. The University will work in tandem with the Virginia Department of Health (VDH) to identify, trace, isolate/quarantine any and all cases within the campus community.
- c. When the threshold of "bed capacity" for isolation or quarantine hits its limit, the University would begin the process of shutting down residential operations.

### **4. Partnership with Local Health Systems**

- a. The University has a strong partnership with Augusta Health Hospital and Augusta Medical Group not only for the provision of care through our Student Health Services, but also as a community partner and COVID-19 partner. To date, we have shared information with

leadership within the Health System as it pertains to our campus plans. We maintain contact with them regarding patient load, bed capacity, numbers of cases within the community. We have shared PPE and other items during the initial national shortage.

- b. The MDCHS resides on Lifecore Drive just across the street from Augusta Health. Some faculty members within the College of Health Sciences maintain clinical sustainment hours at Augusta Health and work part-time within their specialty.

## **SHUTDOWN CONSIDERATIONS**

### **1. Plans regarding dismissals or shutdowns**

- a. MBU's Pandemic Task Force and Murphy Deming College of Health Sciences (MDCHS) has regular communications with our local and state public health officials regarding COVID-19 trends, testing, and mitigation efforts.
- b. MBU has a phased-approach to decrease the number of situations that require-community members to gather in groups and to minimize the time spent in close proximity with each other. Before dismissing on-campus courses, our measures begin with canceling in-person extracurricular events, changing from dining-in options to take-out meals, and further restricting indoor common areas (e.g., library, labs, lounges, fitness rooms).
- c. MBU's decision to dismiss on-campus classes may vary for our main campus in Staunton and branch campus in Fishersville (MDCHS) because our populations on each campus varies by size, degree, and residential status. On the Staunton main campus we have eight hundred (800) undergraduate residential students while on the MDCHS campus we have three hundred (300) who reside nearby, but not directly on the branch campus.
- d. Criteria informing our decision to dismiss or shutdown will include:
  - i. Confirmed cases of COVID-19 on campus and within Augusta County
  - ii. Augusta County hospital bed availability
  - iii. MBU's quarantine room availability
  - iv. Severity of COVID-19 symptoms within our MBU community

### **2. Nature of reduced campus activity**

- a. In the event of severe conditions or public health direction/guidance, MBU will be prepared to further reduce campus activities. As we reopen, we intend to reduce campus activities from normal operations. Room capacities will be limited to enable 6-foot distance while requiring face coverings in public.
- b. Our residential community will have additional guidance limiting visitors. As previously mentioned on page 12, section 7e, Programs will occur in residential spaces and be limited to revised capacity and adhere to physical distancing guidelines. Residential staff will increase the amount of passive/virtual programming. Our primary focus is on the health and safety of our campus community while providing a positive and engaging on-campus experience.
- c. MBU will be prepared to reduce campus activity to most essential participants with synchronous and/or asynchronous online viewing. For example, home athletic events are live streamed, therefore, if necessary we would be able to play games without fans on site. We'll

do the same for our Corps of Cadets and Theatre group where parades/performance are key to their mission.

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

- a.** The health and safety of our students, faculty, and staff are paramount. MBU is committed to safely re-opening and operating throughout the Summer and Fall semesters. We will provide comprehensive training, consistent messaging and supportive reminders to ensure our community maintains 6-foot distancing, regular disinfection, wearing of face coverings, and reporting of signs/symptoms of disease.
- b.** MBU's Student Health Services are prepared to handle student appointments for traditional student health issues and COVID-19 symptoms. The Health Center is prepared for rapid, cost-effective COVID-19 testing. We will keep symptomatic students isolated until test results are known and until the student is cleared to return to classes. Our contact tracing process will mitigate the spread of COVID-19. We will continue to support students with online courses while isolated or in quarantine as needed or as a result of testing positive for the virus.
- c.** Our goal is to decrease the number of situations that require community members to gather in large groups and to minimize the time spent in close proximity with each other. Although we do not have any confirmed COVID-19 cases on campus presently, we will continue to heed the caution of public health experts about the highly contagious nature, how it is transmitted, and the importance of face coverings and social distancing to stop or slow down the spread of the disease. If federal and state guidance or conditions in Augusta County dictate the need for students to return home, MBU will follow our procedures to return to fully online courses.
- d.** When a student is sick and tests positive for COVID-19, Mary Baldwin will discuss with the student whether it may be better to recover at home or at the university's self-isolation location. Most people with COVID-19 have mild symptoms and can recover at the university's self-isolation location without medical care. These students will be able to take care of themselves with rest, hydration, and over-the-counter medication. These students will have daily health and wellness visits from the university providing meals. We have identified the following circumstances under which MBU would recommend or require that individual students return home: multi-symptoms, emergency warning signs, pre-existing medical conditions deemed at risk to develop severe COVID-19 symptoms, student expresses concern that they are unable to care for oneself in isolation. <https://www.cdc.gov/coronavirus/2019-ncov/community/colleges-universities/considerations.html>

### **4. Communications plan for dismissals/shutdown.**

- a.** MBU's comprehensive emergency communication plan ensures timely notification to our community while protecting privacy and ensuring the safety of our community.
- b.** MBU's Emergency Operations Plan enables our Executive Staff to effectively and efficiently review various situations and prepare decisions to remain open, dismiss classes, or shutdown. We regularly exercise emergency preparedness and communications through our Baldwin Alert Messaging and Important Updates via text, email, and website updates.
- c.** In March 2020, we clearly communicated to our employees, students and their families the decision to transition classes online and close offices. In May 2020, when we decided to

prepare to reopen, we communicated this via email, social media, website and video. Additionally, our most current information regarding campus resources and updates regarding COVID-19 preparation and response are posted on the university homepage.

## APPENDICES

### Appendix A: COVID-19 Emergency Preparedness & Response Plan



Mary Baldwin University

## COVID-19 Response Plan

1 March 2020

Table of Contents

**BACKGROUND**..... 30

**SOURCE AND SPREAD OF THE VIRUS**..... 30

**INCUBATION PERIOD**..... 30

**SEVERITY**..... 31

**RESPONSE PLAN:**..... 31

**Current Campus Communications:**..... 32

**Future Campus Communications:**..... 33

**PREVENTION INFORMATION**..... 33

**COVID-19 RESPONSE PLAN**..... 34

## BACKGROUND

The Centers for Disease Control and Prevention (CDC) is closely monitoring an outbreak caused by a novel (new) coronavirus first identified in Wuhan, Hubei Province, China. Chinese authorities identified the new coronavirus in late December of 2019 which has resulted in thousands of confirmed cases in China, including cases outside Wuhan, with additional cases being identified in sixty (60) countries internationally, including the United States and Canada. The virus has been named SARS-CoV-2 and the disease it causes has been named “coronavirus 2019” (abbreviated “COVID-19”). On January 30, 2020, the International Health Regulations Emergency Committee of the World Health Organization declared the outbreak a “public health emergency of international concern.”

The numbers of cases are changing on a daily basis. Currently there are 60 countries reporting confirmed cases of the disease. Nine new states (Brazil, Denmark, Estonia, Georgia, Greece, Norway, Pakistan, and North Macedonia) reported new confirmed cases within the last 24 hours. Situation Data (total and new cases in last 24 hours) reported by the World Health Organization as of March 1, 2020:

| <b>Globally</b>             | <b>China</b>  | <b>Outside of China</b>   |
|-----------------------------|---|---|
| 85,403 confirmed (1753 new) | 79,394 confirmed (435 new)<br>2,838 deaths (47 new) | 6009 confirmed (1318 new)<br>53 countries (2 new)<br>86 deaths (19 new) |

**New cases are within the last 24 hours**

## WHO RISK ASSESSMENT

CHINA            Very High  
Regional Level   Very High  
Global Level     Very High

## SOURCE AND SPREAD OF THE VIRUS

Coronaviruses are a large family of viruses that are commonly found in species of animals including camels, cattle, cats, and bats. Rarely, animal coronaviruses can infect people and then spread between people such as with MERS-CoV, and SARS, CoV. The new SARS-CoV-2 virus is a betacoronavirus, like MERS-CoV and SARS-CoV. All three of these viruses have their origins in bats. The sequences from U.S. patients are similar to the one that China initially posted suggesting a likely single, recent emergence of this virus from an animal reservoir.

Understanding of the transmission risk is incomplete. However, there are now indications that person-to-person spread is occurring, most likely between close contacts (as in the case of SARS). Spread is thought to occur via respiratory droplets produced when an infected person coughs or sneezes. These droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs. People are thought to be most contagious when they are most symptomatic. Some spread may be possible before people show symptoms. It may also be possible that a person can get COVID-19 by touching a surface or object that has the virus on it and then touching their own mouth, nose, or possibly their eyes, but this is not thought to be the main way the virus spreads.

## INCUBATION PERIOD

The incubation period for COVID-19 is thought to be within 14 days following exposure, with most cases occurring approximately five days after exposure. In a family cluster of infections, the onset of fever and respiratory symptoms occurred approximately three (3) to six (6) days after presumptive exposure. Similarly, in an analysis of 10 patients with confirmed COVID-19 pneumonia, the estimated mean

incubation period was five (5) days.

### **SEVERITY**

Pneumonia appears to be the most frequent serious manifestation of infection. Patients present with fever, cough, dyspnea, and bilateral infiltrates on chest X-ray. However, most COVID-19 infections are not severe, although many patients have had critical illness. A report from the Chinese CDC of 44,500 confirmed infections, 81% were mild, 14% severe, and 5% critical. The overall case-fatality rate was 2.3%. Many strains of coronavirus are ubiquitous and are often responsible for symptoms attributed to the “common cold”. Similarly, coronavirus COVID-19 seemingly causes no or mild symptoms in some people infected by it.

### **RESPONSE PLAN:**

Because it is impossible to predict the full effects of the emergence of a new virus, instead of a detailed action plan, Mary Baldwin University’s plan provides a general framework and recommended actions to be considered in the event of an outbreak of COVID-19. Institutional areas and individual departments are responsible for the development of more detailed plans within their respective areas.

This plan is predicated on the assumption that in the event of a pandemic COVID-19 event entering the United States, the campus may need to suspend academic programs and most operations for weeks or months. In addition to student illness, in the event of a pandemic, 20-40% of employees will be unable to come to work. Mary Baldwin University’s response plan strategies are intended to limit, as much as possible, the number of people who get sick and minimize disruption to university operations. MBU will utilize a phased response to pandemic disease emergence based upon the pervasiveness of the disease and the severity of the illness it is causing. In case of a pandemic, the response team and senior administration will coordinate its response with local city, county, state and federal health authorities. Public health orders will supersede any planned internal responses.

Currently, the biggest threat for spread of COVID-19 on campuses comes from visitors and tourists, and campus officials should be particularly mindful of delegations visiting from China. Our campus has begun assessing planned travel and study abroad programs for the winter and spring for viability and safety.

At present, there is no basis for changing business as usual regarding housing, campus events, and other circumstances under which large groups of people will be gathering.

Infection prevention and control (IPC) is a major factor in preventive and mitigation measures for COVID-19. To ensure evidence-based quality guidance and prompt response to global demand for personal protective equipment (PPE), WHO has convened the IPC expert global network of specialists from around the world since the beginning of the outbreak. There is no indication for use of masks by the general public at this time. However, it is very important to note that the campus must remain vigilant regarding seasonal influenza and will promote vaccination and prevention using the preventive actions outlined in this brief. The CDC estimates that so far this season there have been at least 15 million flu illnesses in the U.S., 140,000 hospitalizations, and 8,200 deaths from flu. In the U.S., flu is currently a far bigger threat than coronavirus.

The Student Health Clinic personnel are on alert for any patients coming to the university clinic with fever and respiratory symptoms (e.g. cough, shortness of breath) who have been in Wuhan during the 14 days before illness onset or who have been exposed to someone diagnosed with and/or exposed to COVID-19. Any patient suspected of infection with COVID-19 are placed on infection protocol immediately. Suspect

patients are asked to wear a surgical mask as soon as they are identified and are evaluated in a private room with the door closed. Health care personnel entering the room use standard precautions, contact precautions, airborne precautions (N-95 respirator), and use eye protection (e.g., goggles or a face shield).

The following Protocol is currently being utilized for any suspected COVID-19 Patient at the MBU Health Clinic:

**Assessment for Potential Coronavirus Patient  
Arriving at Student Health Clinic  
Report all SUSPECT cases immediately to Health Department & Infection Prevention**

|  | YES    | NO |                                    |
|--|--------|----|------------------------------------|
| A) What is the highest temperature recorded?   | F or C |    | Fever onset date: ____/____/____   |
| B) Does the patient have any of the following? |        |    | Symptom onset date: ____/____/____ |
| Symptoms of lower respiratory illness          |        |    |                                    |
| Cough  |        |    |                                    |
| Difficulty Breathing                           |        |    |                                    |

**AND**

|   |  |  |                             |
|---|--|--|-----------------------------|
| C) Travel to China in last 14 days before symptom onset?  |  |  | Date and place of exposure: |
| D) Close contact* with a person who is under investigation for COVID-19 while the person was ill? |  |  | Date and place of exposure: |

\*Close contact is defined as: caring for, living with, visiting, or sharing a healthcare waiting room with a coronavirus case or having direct contact with infectious secretions i.e., being coughed on while not wearing personal protective equipment.

Other differential diagnosis can include: Influenza, RSV, H. metapneumovirus, Parainfluenza, Adenovirus, Rhinovirus/Enterovirus, *M. pneumoniae*

- √ **IMMEDIATELY**
  - Provide surgical mask, and escort to private room
  - Isolate patient in private room and instruct to wear surgical mask at all times
  - Use Standard, Contact, and Droplet precautions, and eye protection
  - Call EMS for transport to Emergency Department
  - Call Emergency Department Charge Nurse to inform of patient's arrival and need for Negative Pressure Room.
- √ Begin line list of patients in waiting room with suspect patient.
- √ **At Transfer from Student Health Clinic to ED**
  - Close exam room door and do not use room until advised by Infection Control

**Current Campus Communications:**

Because there is currently no risk to the university campus, leadership should provide communication to the university campus regarding the following information:

- Individuals visiting the health clinic are being screened during their appointment for recent international travel and will be asked about their health and travel history.
- The University is continually monitoring the most updated information from the Center for Disease

Control (CDC), the World Health Organization (WHO), and the Virginia Department of Health for recommendations for monitoring and testing of COVID-19 (Coronavirus).

- Flu activity is very high in the United States and is expected to continue throughout the next several months. Anyone who has not received a flu vaccine this season should consider getting the vaccine. The Health Clinic on campus can administer the vaccine.
- The University Executive Staff and Incident Response Team are actively monitoring any developments around COVID-19 (Coronavirus) and coordinating campus resources, responses and communications.
- Cleaning crews will increase cleaning and disinfecting of high-touch surfaces and restrooms in university buildings, residence halls, and recreation facilities.
- On the recommendation of health experts, we recommend anyone who is ill or thinks they may be ill to stay home from class and from work and seek medical care as necessary.
- Faculty are being provided guidance on ways to accommodate students who may need to temporarily complete assignments remotely.
- We have suspended Travel Abroad programming for Spring 2020 and May Term.

#### **Future Campus Communications:**

Future communication related to MBU's COVID-19 response to the following critical audiences should be coordinated through the Office of Integrated Communications (OIC) as in keeping with the University's issues management protocol:

- Current students
- Faculty and Staff
- Parents
- Media
- Prospective Students and Parents
- Community at large

The Office of Integrated Communications will review content, advise on timing and channels for distribution, and will assist with distribution as appropriate.

#### **PREVENTION INFORMATION**

There is currently no vaccine to prevent 2019-nCoV infection. The best way to prevent infection is to avoid being exposed to the virus. Currently there are no additional precautions recommended for the general public to take. However, as a reminder, CDC recommends everyday preventive actions to help prevent the spread of respiratory viruses, including:

- Good hand hygiene:
  - Wash hands often with soap and water for at least 20 seconds. If soap and water are not available, use an alcohol-based hand sanitizer.
- Avoid touching your eyes, nose, and mouth with unwashed hands.
- Avoid close contact with people who are sick.
- Stay home when you are sick.
- Cover your cough or sneeze with a tissue, then throw the tissue in the trash.
- Clean and disinfect frequently touched objects and surfaces.
- Get a flu vaccine.

**Should the risk to the University increase, the following plan will be implemented:**

**COVID-19 RESPONSE PLAN**

COVID-19 INCIDENT ACTION PLAN

**OFFICE OF THE PROVOST**

| <b>ALERT LEVEL 1</b>   | <b>ALERT LEVEL 2</b>  | <b>ALERT LEVEL 3</b>  |
|--|---|---|
| No current hazard to persons. Alert and planning period.   | Elevated Risk. Minimal immediate hazard to students, faculty and staff.   | Pandemic Risk. Requires coordination with outside agencies. Suspension of classes and Non-functional Operations.  |
| <ul style="list-style-type: none"> <li>• Identify essential staff</li> <li>• Review Emergency Operations Plan</li> <li>• Notify faculty/staff of Level 1 alert</li> <li>• Faculty members and academic support will be prepared to provide continued academic operations</li> <li>• Identify any pending foreign travel/foreign abroad study</li> <li>• Develop a policy for suspension of classes</li> <li>• For International Programs:               <ul style="list-style-type: none"> <li>○ Review protocols from U.S. State Dept., U.S. Public Health Service, CDC to determine if students should return home</li> <li>○ Communicate with international students to determine if they will remain on campus or return home</li> </ul> </li> </ul> | <ul style="list-style-type: none"> <li>• Notify faculty/staff of Level 2 alert</li> <li>• Cancel all off-campus activities</li> <li>• Students restricted to campus (except for family related activities)</li> <li>• Continue academic operations</li> <li>• Monitor faculty and staff absences</li> <li>• Monitor students in foreign travel programs and review emergency evacuation plans.</li> <li>• Determine opportunities for online teaching.</li> <li>• Review student absenteeism policies.</li> <li>• Determine if any social distancing strategies need to be activated to include the suspension of lectures, field trips, intercollegiate, club and rec competition, international travel, etc.</li> </ul> | <ul style="list-style-type: none"> <li>• Notify faculty/staff of Level 3 alert</li> <li>• Notification of suspension of classes</li> <li>• Determination of adjustment of academic calendar.</li> <li>• College closed to visitors</li> <li>• Essential personnel only to report to campus</li> </ul> |

## ADMISSIONS

| <b>ALERT LEVEL 1</b>  | <b>ALERT LEVEL 2</b>   | <b>ALERT LEVEL 3</b>   |
|---|--|--|
| No current hazard to persons. Alert and planning period.  | Elevated Risk. Minimal immediate hazard to students, faculty and staff.  | Pandemic Risk. Requires coordination with outside agencies. Suspension of classes and Non-functional Operations.   |
| <ul style="list-style-type: none"> <li>• Notify staff of Level 1 alert</li> <li>• Identify essential staff</li> <li>• Develop a communication plan for prospective students and parents, guidance counselors and coordinate with OIC</li> </ul> | <ul style="list-style-type: none"> <li>• Notify staff of Level 2 alert</li> <li>• Require all staff to return to the office</li> </ul> | <ul style="list-style-type: none"> <li>• Notify staff of Level 3 alert</li> <li>• Office closed to visitors</li> <li>• Essential personnel only to report to office</li> </ul> |

## ATHLETICS

| <b>ALERT LEVEL 1</b>   | <b>ALERT LEVEL 2</b>  | <b>ALERT LEVEL 3</b>   |
|--|---|--|
| <p>No current hazard to persons. Alert and planning period.</p>  | <p>Elevated Risk. Minimal immediate hazard to students, faculty and staff.</p>  | <p>Pandemic Risk. Requires coordination with outside agencies. Suspension of classes and Non-functional Operations.</p>  |
| <ul style="list-style-type: none"> <li>• Notify staff of Level 1 alert</li> <li>• Assist with implementing infection control by teaching good hygiene practices to Athletes and students, faculty and staff who use the PAC.</li> <li>• Develop a plan for physical education activities courses to be continued.</li> </ul> | <ul style="list-style-type: none"> <li>• Notify staff of Level 2 alert</li> <li>• Contact all future opponents about the possibility of modification to athletic travel and events and modify as needed.</li> <li>• Consult with USA South about the status of games and standings</li> </ul> | <ul style="list-style-type: none"> <li>• Notify staff of Level 3 alert</li> <li>• Athletic and Wellness faculty and staff because of expertise may volunteer to assist with students still on campus.</li> <li>• Continued consultation by email with USA South and modifications to athletic schedules during a recess</li> </ul> |

## BUSINESS AND FINANCE

| ALERT LEVEL 1   | ALERT LEVEL 2   | ALERT LEVEL 3  |
|---|---|--|
| No current hazard to persons. Alert and planning period.  | Elevated Risk. Minimal immediate hazard to students, faculty and staff.   | Pandemic Risk. Requires coordination with outside agencies. Suspension of classes and Non-functional Operations.   |
| <ul style="list-style-type: none"> <li>• Notify staff of Level 1 alert</li> <li>• Review the comprehensive pandemic flu business plan as it pertains to pandemics (all business functions are the same here)</li> <li>• Identify essential staff</li> <li>• Cross train employees for essential duties</li> <li>• Secure remote desktop access for staff. They will need laptops and VPN.</li> <li>• Make certain all documents/work can be completed online and are available online.</li> </ul> | <ul style="list-style-type: none"> <li>• Notify staff of Level 2 alert</li> <li>• Implement procedures for rapid procurement of supplies as needed across campus</li> <li>• Review the comprehensive pandemic flu business plan as it pertains to pandemics (all business functions are the same here)</li> </ul> | <ul style="list-style-type: none"> <li>• Notify staff of Level 3 alert</li> <li>• Close office to visitors.</li> <li>• Essential personnel only to report</li> <li>• Review the comprehensive pandemic flu business plan as it pertains to pandemics (all business functions are the same here)</li> </ul> |

## DINING SERVICES

| ALERT LEVEL 1  | ALERT LEVEL 2  | ALERT LEVEL 3   |
|--|--|---|
| No current hazard to persons. Alert and planning period.   | Elevated Risk. Minimal immediate hazard to students, faculty and staff.  | Pandemic Risk. Requires coordination with outside agencies. Suspension of classes and Non-functional Operations.  |
| <ul style="list-style-type: none"> <li>• Identify essential staff</li> <li>• Plan to consolidate work based on reduced work force</li> <li>• Develop a plan to ensure safe delivery and stocking of food items and resources of food items, necessary for the ongoing provision of food services in Hunt Dining Hall</li> <li>• Inventory and restock non-perishable food items and utensils as necessary based on student population over a three (3) day period</li> <li>• Ensure personnel are properly trained to prevent the spread of infectious disease</li> <li>• Develop plan to transport food to designated quarantine areas</li> </ul> | <ul style="list-style-type: none"> <li>• Alert all designated personnel on call</li> <li>• Identify meal delivery needs and potential locations for quarantined students</li> <li>• Identify roles of essential staff: leadership, communications, food production, food delivery.</li> <li>• Prepare communication for any changes in service of food and location, and coordinate dissemination with OIC</li> <li>• Contact the local health department</li> </ul> | <ul style="list-style-type: none"> <li>• All essential personnel report to designated areas; backup staff and volunteers placed where needed</li> <li>• Provide instruction to designated personnel</li> <li>• In coordination with OIC, communicate any changes to location and times of meal service to leadership and students</li> <li>• Activate plan to deliver food to quarantine areas</li> <li>• University café is closed, and all meals are served in Hunt Dining Hall. All meals and/or food items are served (handheld) by designated staff only.</li> </ul> |

## INTEGRATED COMMUNICATIONS

| ALERT LEVEL 1  | ALERT LEVEL 2  | ALERT LEVEL 3  |
|--|--|--|
| No current hazard to persons. Alert and planning period.   | Elevated Risk. Minimal immediate hazard to students, faculty and staff.  | Pandemic Risk. Requires coordination with outside agencies. Suspension of classes and Non-functional Operations.   |
| <ul style="list-style-type: none"> <li>• Identify essential staff</li> <li>• Review Emergency Operations Plan</li> <li>• Develop integrated internal and external communication plan including communication with the Board of Trustees; faculty, staff, and students at main campus and at remote locations; alumnae/i; parents; other boards; the media; and governmental officials</li> <li>• Create MBU web site for up-to-date information for internal and external communities</li> </ul> | <ul style="list-style-type: none"> <li>• Follow the integrated communication plan, updated according to current information on changing situation. Essential elements will include:                             <ul style="list-style-type: none"> <li>• Send internal e-mail(s) to all faculty, staff, students</li> <li>• Post information to Web with link from home page</li> <li>• Send appropriate messages to all campus landlines and text message using BAM outreach and emergency functions.</li> <li>• Post print announcements throughout campus and at all MBU Regional Centers</li> <li>• Utilize cable channel 2 for information/announcement updates</li> <li>• Create appropriate voice mail message(s) for incoming phone lines</li> </ul> </li> </ul> | <ul style="list-style-type: none"> <li>• Same actions as for Level 2, with updated information.</li> <li>• Send BAM alert/community service message.</li> <li>• Coordinate press releases and manage news teams, interviews, etc. based on media inquiries.</li> <li>• Coordinate with local health department and Augusta Health on vital messaging.</li> </ul> |

## FACILITIES

| ALERT LEVEL 1   | ALERT LEVEL 2  | ALERT LEVEL 3   |
|---|--|---|
| <p>No current hazard to persons. Alert and planning period.</p>   | <p>Elevated Risk. Minimal immediate hazard to students, faculty and staff.</p>   | <p>Pandemic Risk. Requires coordination with outside agencies. Suspension of classes and Non-functional Operations.</p>   |
| <ul style="list-style-type: none"> <li>• Identify essential staff</li> <li>• Prepare preliminary plans for quarantine and isolation locations</li> <li>• Prepare preliminary housing plans</li> <li>• Prepare plans to assist with evacuating campus if necessary               <ul style="list-style-type: none"> <li>○ Assess transportation needs</li> <li>○ Contact contractors/suppliers</li> <li>○ Obtain verbal commitment</li> </ul> </li> <li>• Identify plan for re-locating affected students needing quarantine and isolation</li> <li>• Test essential building systems</li> <li>• Test ventilation system operations in accordance with plan</li> <li>• Develop plan for servicing quarantine and isolation areas</li> <li>• Order additional supplies (filters etc.) for supporting essential systems and essential personnel</li> <li>• Purchase identified PPE and secure in central location</li> <li>• Train essential employees on duties, procedures &amp; PPE</li> <li>• Develop plan for shutting down non-essential buildings/areas should recess be necessary</li> <li>• Communicate plan to department personnel</li> <li>• Assess feasibility of doing project work during a recess (personnel &amp; funds available)</li> </ul> | <ul style="list-style-type: none"> <li>• Distribute N95 respirators to essential personnel</li> <li>• Identify work schedules for essential personnel (consider rotating teams of employees scheduled to work)</li> <li>• Review respirator and PPE training with essential employees</li> <li>• Review Pandemic Flu Plan with employees</li> <li>• Review quarantine and isolation locations for any changes/needs</li> <li>• Review housing plans</li> <li>• Review relocation plan for quarantine and isolation areas</li> <li>• Test essential building systems</li> <li>• Test ventilation system operations in accordance with plan</li> <li>• Review plan for servicing quarantine and isolation areas</li> <li>• Purchase exhaust fans for HVAC zoning where needed</li> <li>• Identify additional fuel storage where needed</li> <li>• Confirm availability of gasoline supply for college vehicles</li> <li>• Service portable generator/test weekly</li> <li>• Confirm contractor services readiness and service levels</li> <li>• Purchase maintenance supplies and disposables to maintain adequate levels for services needed should shipments be delayed or cancelled.</li> </ul> | <ul style="list-style-type: none"> <li>• Communicate plans to staff and implement crisis operation mode</li> <li>• Execute plan for moving and/or evacuating students</li> <li>• Execute housing plan</li> <li>• Execute shut-down of non-essential buildings according to plan and criteria</li> <li>• Implement crisis management personnel schedules</li> <li>• Execute operations for essential systems/functions</li> <li>• Notify service contractors of operations mode – implement strategies</li> <li>• Order extra gasoline for emergency generator</li> <li>• Refill oil tanks if during normal heating season</li> <li>• Fuel all Physical Plant vehicles</li> <li>• Order additional fuel for storage area</li> <li>• Test portable generator functions</li> <li>• Review supplies stock and re-order as needed</li> <li>• Review readiness and plan with staff</li> <li>• Perform maintenance or project work as emergency operations mode allows</li> <li>• Maintain emergency operations and prepare for re-opening school schedule per the administrative directive</li> <li>• Assist other departments as needed and resources available</li> <li>• Communicate daily or as needed with</li> <li>• Pandemic Flu Committee/Command</li> <li>• Assess effectiveness of emergency planning,</li> </ul> |

|  |   |  |
|--|---|--|
| <ul style="list-style-type: none"> <li>• Assist other departments with preparation as needed</li> <li>• Communicate readiness level to Pandemic Flu Committee</li> </ul> | <ul style="list-style-type: none"> <li>• Plan and purchase for any project or maintenance work planned for a recess period</li> <li>• Assist other departments with preparation</li> <li>• Communicate readiness level to Pandemic Flu Committee</li> </ul> | <p>response, and operations and adjust procedures as needed for future needs</p> |
|--|---|--|

## INFORMATIONAL TECHNOLOGY

| ALERT LEVEL 1  | ALERT LEVEL 2   | ALERT LEVEL 3   |
|--|---|---|
| <p>No current hazard to persons. Alert and planning period.</p>  | <p>Elevated Risk. Minimal immediate hazard to students, faculty and staff.</p>  | <p>Pandemic Risk. Requires coordination with outside agencies. Suspension of classes and Non-functional Operations.</p>   |
| <ul style="list-style-type: none"> <li>• Identify essential staff</li> <li>• Develop a plan to provide alternate personnel to support critical functions and infrastructure in the event primary support personnel are unavailable</li> <li>• Implement a Crisis Response Team</li> <li>• Supply all key personnel with equipment to connect remotely.</li> <li>• Cross train employees for essential duties</li> <li>• Continue IT services and Canvas software</li> <li>• Test chain-of-command e-mail and phone communications plan</li> </ul> <p>NOTE: Much of these critical services can be provided remotely via tele-commuting and VPN over Internet data networks</p> | <ul style="list-style-type: none"> <li>• Develop a schedule of coverage of essential duties</li> <li>• Determine on-call response for unexpected situations</li> <li>• Communicate staffing and contact plans to the Crisis Response Team</li> <li>• Continue employee cross-training</li> </ul> <p>NOTE: During the various levels of the pandemic, critical personnel will tele-commute to minimize their risk of contamination</p> | <ul style="list-style-type: none"> <li>• Implement staffing plan as needed.</li> </ul> <p>NOTE: During the various levels of the pandemic, critical personnel will tele-commute to minimize their risk of contamination</p> |

## MEDICAL SUPPORT SERVICES

| ALERT LEVEL 1   | ALERT LEVEL 2   | ALERT LEVEL 3   |
|---|---|---|
| <p>No current hazard to persons. Alert and planning period.</p>   | <p>Elevated Risk. Minimal immediate hazard to students, faculty and staff.</p>  | <p>Pandemic Risk. Requires coordination with outside agencies. Suspension of classes and Non-functional Operations.</p>   |
| <ul style="list-style-type: none"> <li>• Identify essential staff</li> <li>• Implement infection control practices across campus</li> <li>• Place posting at Student Health Services notifying patients with COVID-19 profile that traveled to China (or have been visited by persons from ) affected countries to notify staff immediately</li> <li>• Identify an isolated exam room</li> <li>• Arrange for negative pressure machines if feasible. Physical Plant would need to determine feasibility</li> <li>• Put standard precautions in place</li> <li>• Have respiratory protection equipment in place</li> <li>• Follow CDC and Augusta Health protocol for patient testing</li> <li>• Monitor Health Care workers</li> <li>• Health Center essential personnel receive N95 Masks</li> </ul> | <ul style="list-style-type: none"> <li>• Isolate and monitor suspected cases.</li> <li>• Identify contacts of suspected cases.</li> <li>• Initiate prophylaxis of contacts based on strength of patient presentation as recommended by CDC/VDH.</li> <li>• Establish phone triage lines for Student Health Service.</li> <li>• Have counseling initiate pre-event counseling for essential personnel.</li> <li>• Initiate poster, e-mail campaign on self-protection.</li> <li>• Provide masks for essential personnel</li> </ul> | <ul style="list-style-type: none"> <li>• Suspend standard transport protocol schedule; transport ongoing according to need.</li> <li>• Based on screening criteria or consultation with health care provider of Health Service: Transport to Student Health/infirmary provided by Campus Security; or Transport to hospital provided by 911. c) If 911 cannot respond, Campus Security will provide transport.</li> <li>• Draw on volunteer ranks to meet transport needs.</li> <li>• Continue use of respiratory protective equipment.</li> <li>• Have isolation room available in Health Service (negative pressure)</li> <li>• Locate people contacted by patient.</li> <li>• Arrange for screening of people who have had contact.</li> <li>• Arrange for counseling services.</li> <li>• Contact Coroner’s office if necessary.</li> </ul> |

## CAMPUS SAFETY

| ALERT LEVEL 1   | ALERT LEVEL 2  | ALERT LEVEL 3  |
|---|--|--|
| <p>No current hazard to persons. Alert and planning period.</p>   | <p>Elevated Risk. Minimal immediate hazard to students, faculty and staff.</p>   | <p>Pandemic Risk. Requires coordination with outside agencies. Suspension of classes and Non-functional Operations.</p>  |
| <ul style="list-style-type: none"> <li>• All campus safety staff are essential personnel</li> <li>• Keep ongoing communication with local police, fire and other emergency response personnel to coordinate efforts for managing safety issues</li> <li>• Remain in compliance to HIPAA and FERPA regulations</li> <li>• Develop and maintain transportation log for all medical transports</li> <li>• All security staff must participate in training sessions regarding COVID-19 as provided by health staff</li> <li>• Train security staff in the use of PPE equipment and fit each for N-95 protective mask</li> <li>• Designate transport vehicles and equip security vehicles with disinfectant, disposable gloves and biohazard waste bags</li> <li>• If needed, coordinate with outside source transportation for on campus and off campus transportation of patients</li> <li>• Request that all security and other University essential personnel be provided a free flu shot</li> </ul> | <ul style="list-style-type: none"> <li>• Maintain direct communications with local authorities via email, telephone, and two-way communication sources</li> <li>• In conjunction with a medical provider, develop triage protocols for responding to students, faculty and staff in distress either due to illness or illness of others or in need of transport for medical care</li> <li>• Set up triage center on campus with the following categories: Death, acute illness, symptoms of illness and stress related concerns</li> <li>• If needed, coordinate with outside source transportation for on campus and off campus transportation of patients</li> </ul> | <ul style="list-style-type: none"> <li>• Assist with campus closing as necessary to provide orderly evacuation of all students, faculty and staff who are not essential personnel</li> <li>• Secure campus buildings. Issue keys only to those selected by the approved authorities.</li> <li>• Close/block and secure all entrances to campus roadways. Funnel all authorized traffic through the Coalter Street Main Entrance to Campus</li> <li>• Maintain appropriate manpower to secure campus grounds and facilities 24/7</li> <li>• Monitor working staff for symptoms of illness</li> <li>• Provide assistance to essential personnel as required</li> </ul> |

## STUDENT ENGAGEMENT

| ALERT LEVEL 1  | ALERT LEVEL 2   | ALERT LEVEL 3   |
|--|---|---|
| No current hazard to persons. Alert and planning period.   | Elevated Risk. Minimal immediate hazard to students, faculty and staff.   | Pandemic Risk. Requires coordination with outside agencies. Suspension of classes and Non-functional Operations.  |
| <ul style="list-style-type: none"> <li>• Identify essential staff</li> <li>• Prepare preliminary plans for quarantine and isolation locations</li> <li>• Prepare preliminary housing plans</li> <li>• Prepare plans to assist with evacuating campus if necessary                             <ul style="list-style-type: none"> <li>○ Assess transportation needs</li> <li>○ Contact contractors/suppliers</li> <li>○ Obtain verbal commitment</li> </ul> </li> <li>• Identify plan for relocating affected students needing quarantine and isolation</li> <li>• Communicate readiness level to COVID-19 committee</li> </ul> | <ul style="list-style-type: none"> <li>• Review respirator and PPE training with essential employees</li> <li>• Review COVID-19 plan with employees</li> <li>• Review quarantine and isolation locations for any changes/needs</li> <li>• Review housing plans</li> <li>• Review relocation plan for quarantine and isolation areas</li> <li>• Communicate readiness level to COVID-19 committee</li> </ul> | <ul style="list-style-type: none"> <li>• Communicate plans to staff and implement crisis operation mode</li> <li>• Execute plan for moving and/or evacuating students</li> <li>• Execute housing plan</li> <li>• Implement crisis management personnel schedules</li> <li>• Review readiness plan with staff</li> <li>• Communicate with staff daily or as needed</li> <li>• Assess effectiveness of emergency planning, response, and operations and adjust procedures as needed for future needs</li> </ul> |

**Appendix B: Pandemic Task Force Welcome Letter**

**April 16, 2020**

**To: Planning Team - Pandemic Preparation 2020-2021 Academic Year**

Tom Byrnes, Kent Diduch, Nick Hall, Darren Jones, Kim Nine, Carey Usher, Martha Walker

**From:** Dr Deb Greubel and Terry Djuric

**RE: Planning Team Charge**

On behalf of President Fox, we're requesting your support for a planning effort to inform MBU's Executive Staff regarding our 2020-2021 Academic Year.

It is the aim of the planning team to put forward a proactive comprehensive plan for our 2020-2021 academic year. We have been charged by the president to prepare a list of ideas and literature support in the following areas by the first week in May:

1. Sustain the good health of our community
2. Adjust our physical campus to encourage social distancing
3. Adjust our academic calendar, if required.

Please begin gathering your ideas in these areas and we'll look for an opportunity to virtually collaborate a few times next week. The President recognizes the extra time and attention that is involved in conducting this planning effort. She is deeply appreciative of your willingness to support the University and this team.

// T. Djuric //

// D. Greubel //

## Appendix C: Health and Safety Measures Letters

### #1 Student Return to Campus

#### Dear Students:

Thank you for your continued patience as we all navigate the changes that the COVID-19 pandemic has brought to each of our lives. We would like to provide information regarding retrieving your remaining items from campus. There are several steps that need to be taken before you can return to campus. Please read the following very carefully.

#### Schedule Your Visit

All students will be able to return to campus to retrieve their belongings beginning Wednesday, May 20, and ending Friday, June 19 to include the weekends.

So that we can effectively manage traffic and social distancing, students in the following locations will move out based on the following schedule:

- Spencer & Hilltop - (9–11 am)
- Woodson & McClung - (11 am–1 pm)
- Memorial & Kable - (1–3 pm)
- King & Tullidge - (3–5 pm)

**Students in these residence halls must use the move out [SignUp Form](#)** to schedule their return date and time.

**Residents of all other buildings** will need to schedule a time (between 9 am–5 pm on any day) directly with campus safety by emailing [safety@marybaldwin.edu](mailto:safety@marybaldwin.edu) at least 72 hours in advance. In the email, you must include your MBU ID, contact number, building name, room number, and date/time of arrival, and the names of up to 2 additional people that will assist with your move. You should not use the sign-up form. Communicate directly with campus safety.

#### Health and Safety Measures

There are several precautions that are being taken to ensure the health and safety of staff, students, and visitors while returning to campus. The housekeeping staff will increase the cleaning of residence halls with an emphasis on sanitizing door handles on rooms and exits/entrances. We have limited the number of students that will be in the buildings at the same time to promote social distancing. We encourage all visitors to practice social distancing while in the building and wear face masks. Additionally, we ask that you **bring no more than 2 additional people** to accompany you for moving assistance.

### COVID-19 - REQUIREMENTS FOR RETURNING TO CAMPUS

The following requirements must be fulfilled before returning to campus. This includes the student and the 2 additional people that will be assisting with the move:

**1. Keep a 14 DAY TEMPERATURE LOG:**

*Please note:* We understand that you may not be able to fulfill the 14-day requirement before your scheduled date of return. Please record your temperature for all days leading up to 48 hours before your scheduled date of return.

|             | DAY 1 | DAY 2 | DAY 3 | DAY 4 | DAY 5 | DAY 6 | DAY 7 | DAY 8 | DAY 9 | DAY 10 | DAY 11 | DAY 12 | DAY 13 | DAY 14 |
|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|--------|--------|--------|--------|--------|
| TEMPERATURE |       |       |       |       |       |       |       |       |       |        |        |        |        |        |
| DATE        |       |       |       |       |       |       |       |       |       |        |        |        |        |        |

**INSTRUCTIONS**

**BEFORE YOU TAKE YOUR TEMPERATURE:**

- Wait 30 minutes after eating, drinking, or exercising.
- Wait at least 6 hours after taking medicines that can lower your temperature, like:
  - Acetaminophen (also called paracetamol)
  - Ibuprofen
  - Aspirin

**USING AN ORAL THERMOMETER:**

*Please note:* An oral temperature is the most accurate method to assess your own temperature.

1. Turn the thermometer on by pressing the button near the screen.
2. Hold the tip of the thermometer under your tongue until it beeps. Do not bite the thermometer.
3. Read your temperature on the screen.
4. Record your temperature in the 14-Day Temperature Log, noting the current date and time the temperature was taken.
5. Clean your thermometer with soap and water and dry it well.

**2. WATCH THE FOLLOWING VIDEOS REGARDING HAND WASHING:**

- [What you need to know about handwashing.](#)
- [Fight Germs. Wash Your Hands!](#)

**3. READ AND SIGN THE FOLLOWING ATTESTATION 48 hours before** your scheduled return to campus.

- [MBU COVID-19 Attestation Form](#)

**Based on the information in this form, you will receive a confirmation email 24-48 hours before your scheduled move out date regarding your clearance to return. You will not be able to access the building unless cleared. \***

### **Returning Keys and Library Materials**

If you previously turned in your residence hall keys, report directly to the building you reside in. You must present your MBU ID card for verification purposes to the Campus Safety Officer or MBU Representative at the building. The Officer/Representative will assist you in gaining entrance into the building and your room.

If you still have your residence hall keys, you will follow the same procedure of presenting your MBU ID to the officer/representative at the building. You will turn your keys over and sign the necessary key return paperwork with the officer/representative at the building before departing campus.

If you have Grafton Library or ILL materials to return, please be sure to bring them to campus with you. We will have a designated box in each dorm for easy drop-off. You can also put them in the library drop box, located to the right of Grafton's front doors.

### **Questions**

As always, if you have any questions or concerns please email [reslife@marybaldwin.edu](mailto:reslife@marybaldwin.edu).

Thank you again. Stay healthy and safe,

The Office of Residence Life & Housing

## #2 New Students COVID Requirements

TO: All MDCHS New PT/OT Students  
FROM: Vice President, Health Sciences  
DATE: 28 May 2020  
RE: **Health and Safety Measures**

Welcome to Murphy Deming College of Health Sciences! We are excited to welcome you to our campus and look forward to having you here for the coming years as you work toward your degree. I hope you received my letter from a few weeks ago outlining the health and safety measures that we have been taking to assure a safe and healthy campus. As part of this effort, I am now reaching out to you for you to begin your work of assuring that as you arrive you are healthy and safe.

Please be sure to read the following carefully. You will need to begin this process now so that you will have it completed before your arrive to your first day of on site classes.

### **Health and Safety Measures**

The health and safety of our MDCHS family is EVERYONE's responsibility. Your participation in these health and safety measures helps keep you safe AND helps keep your colleagues safe.

There are several precautions that are being taken to enhance the health and safety of faculty, staff, and students when arriving or returning to campus:

1. The housekeeping staff will increase cleaning of our facility with an emphasis on sanitizing door handles on rooms and exits/entrances.
2. Surface cleaners will be available in classrooms to wipe down tables and chairs after use.
3. We will be limiting the number of students that will be in the building at the same time to promote social distancing.
4. We will require face coverings while in the building and limit numbers of people in rooms to ensure social distancing.
5. All faculty, staff, and students MUST comply with the COVID-19 Health Requirements before being cleared to enter our building.

### **COVID-19 - REQUIREMENTS FOR RETURNING TO CAMPUS**

**The following requirements must be fulfilled before returning to the MDCHS building.**

- 1. Keep a 14 DAY TEMPERATURE LOG:**

**Please note:** Please record your temperature for all days leading up to 48 hours before your scheduled date of return.

|             | DAY 1 | DAY 2 | DAY 3 | DAY 4 | DAY 5 | DAY 6 | DAY 7 | DAY 8 | DAY 9 | DAY 10 | DAY 11 | DAY 12 | DAY 13 | DAY 14 |
|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|--------|--------|--------|--------|--------|
| TEMPERATURE |       |       |       |       |       |       |       |       |       |        |        |        |        |        |
| DATE        |       |       |       |       |       |       |       |       |       |        |        |        |        |        |

## INSTRUCTIONS

### BEFORE YOU TAKE YOUR TEMPERATURE:

- Wait 30 minutes after eating, drinking, or exercising.
- Wait at least 6 hours after taking medicines that can lower your temperature, like:
  - Acetaminophen (also called paracetamol)
  - Ibuprofen
  - Aspirin

### USING AN ORAL THERMOMETER:

**Please note:** An oral temperature is the most accurate method to assess your own temperature. However, use of infrared thermometers is also satisfactory.

### 2. WATCH THE FOLLOWING VIDEOS REGARDING HAND WASHING:

- [What you need to know about handwashing.](#)
- [Fight Germs. Wash Your Hands!](#)

### 3. READ AND SIGN THE FOLLOWING ATTESTATION 48 hours before your scheduled return to campus.

- [MBU COVID-19 Attestation Form](#)

**Based on the information in this form, you will receive a confirmation email 24-48 hours before your clearance to return. You will not be able to access the building until cleared. \***

## Questions

As always, if you have any questions or concerns please email: [crhjohnson@marybaldwin.edu](mailto:crhjohnson@marybaldwin.edu)

Stay safe and be healthy.

### #3 COVID-19 MDCHS Faculty Staff

TO: All MDCHS Faculty and Staff  
FROM: Vice President, Health Sciences  
DATE: 1 June 2020  
RE: **Health and Safety Measures**

Thank you for your continued patience as we all navigate the changes that the COVID-19 pandemic has brought to each of our lives. This note will serve to provide information regarding safety steps that you will need to take before returning to campus. Please be sure to read the following carefully. You will need to begin this process two weeks prior to your return.

#### **Health and Safety Measures**

The health and safety of our MDCHS family is EVERYONE's responsibility. Your participation in these health and safety measures helps keep you safe AND helps keep your colleagues safe.

There are several precautions that are being taken to enhance the health and safety of faculty, staff, and students when returning to campus:

6. The housekeeping staff will increase cleaning of our facility with an emphasis on sanitizing door handles on rooms and exits/entrances.
7. Surface cleaners will be available in classrooms to wipe down tables and chairs after use.
8. We will be limiting the number of persons that will be in the building at the same time to promote social distancing.
9. We will require face coverings while in the building and limit numbers of people in rooms to ensure social distancing.
10. All faculty, staff, and students MUST comply with the COVID-19 Health Requirements before being cleared to return to our building.

#### **COVID-19 - REQUIREMENTS FOR RETURNING TO CAMPUS**

**The following requirements must be fulfilled before returning to campus.**

#### **4. Keep a 14 DAY TEMPERATURE LOG:**

**Please note:** Please record your temperature for all days leading up to 48 hours before your scheduled date of return.

|                  | DAY<br>1 | DAY<br>2 | DAY<br>3 | DAY<br>4 | DAY<br>5 | DAY<br>6 | DAY<br>7 | DAY<br>8 | DAY<br>9 | DAY<br>10 | DAY<br>11 | DAY<br>12 | DAY<br>13 | DAY<br>14 |
|------------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|-----------|-----------|-----------|-----------|-----------|
| TEMPER-<br>ATURE |          |          |          |          |          |          |          |          |          |           |           |           |           |           |
| DATE             |          |          |          |          |          |          |          |          |          |           |           |           |           |           |

**INSTRUCTIONS**

**BEFORE YOU TAKE YOUR TEMPERATURE:**

- Wait 30 minutes after eating, drinking, or exercising.
- Wait at least 6 hours after taking medicines that can lower your temperature, like:
  - Acetaminophen (also called paracetamol)
  - Ibuprofen
  - Aspirin

**USING AN ORAL THERMOMETER:**

*Please note: An oral temperature is the most accurate method to assess your own temperature. However, use of infrared thermometers is also satisfactory.*

**5. WATCH THE FOLLOWING VIDEOS REGARDING HAND WASHING:**

- [What you need to know about handwashing.](#)
- [Fight Germs. Wash Your Hands!](#)

**6. READ AND SIGN THE FOLLOWING ATTESTATION 48 hours before your scheduled return to campus.**

- [MBU COVID-19 Attestation Form](#)

**Based on the information in this form, you will receive a confirmation email 24-48 hours before your clearance to return. You will not be able to access the building until cleared. \***

**Questions**

As always, if you have any questions or concerns please let me know.

Stay safe and be healthy.

Appendix D: Student Health Form



HEALTH AND IMMUNIZATION RECORD

This completed form MUST be returned by July 15 for fall semester and December 1 for spring semester

Send directly to: Mary Baldwin University, Office of Health Services
PO Box 1500, Staunton, VA 24401
FAX: (540) 887-7289
EMAIL: HealthCenter@marybaldwin.edu
Questions? Call (540) 887-7095

Name Last First Middle Initial
Permanent Home Address City State
Date of Birth / / Class entering: ( ) First Year ( ) Transfer
Mo Day Year Circle all that apply: VWIL PEG ATHLETE
Student ID#
Student Cell Phone ( ) - Email
Parent/Guardian Email Address Parent/Guardian Phone ( ) -
In Case of Emergency, Notify Phone ( ) - Relationship
Medical Insurance Company Policy No.

ATTACH A COPY (FRONT AND BACK) OF YOUR INSURANCE CARD
OUT-OF-STATE MEDICAID is NOT accepted in VA, except in a hospital Emergency Room.

REQUIRED SIGNATURES

I certify that the information provided in the entirety of this health form to be true and complete to the best of my knowledge. I also understand that the information I have provided in this health record may be reviewed by staff from the MBU Health Center, Counseling and Psychological Services, VWIL (if applicable), PEG (if applicable) and the Head Athletic Trainer, as needed. I give permission to MBU to furnish such procedures as may be deemed necessary by the Health Center, Counseling and Psychological Services and Head Athletic Trainer on my student's behalf.

Signature of Student Date
\*\*Signature of Parent IF UNDER 18\*\*

Consent for the Treatment of Minors / Statement MUST be signed if student is under 18 years of age.
I hereby authorize and give permission to the Student Health Center to treat my child whenever he/she presents to the Health Center for routine medical care, vaccinations, and/or treatment for minor injuries and illnesses.
Parent Signature Date

## Appendix E: Virtual Town Hall Power Point



### Guiding Principles

- Proactively plan to open MBU residential programs Fall 2020; lean forward with integrated planning
- Ensure MBU is safe and resilient through the pandemic
- Exercise foresight in scenario planning and adopt nimble mindset
- Leverage MBU's health professionals, essential workers, and summer schedule to test our plan



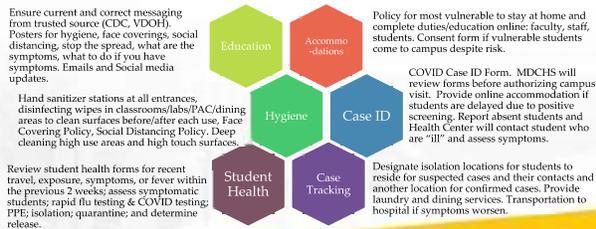
### Enabling a Safe Campus

Together, we're diligently reviewing each of the university's daily routines, policies and procedures and adapting to provide the safest environment possible.

MBU will be ready when we have a process for physical distancing, disinfecting spaces, actively monitoring, symptom response, contact tracing... and ...

Incoming persons are 14 days symptom free and no close contact with symptomatic person in 14 days.

### Health Measures



### Communications



**Appendix F: Frequently Asked Questions prepared for Faculty and Staff, May 26, 2020**

|                             |  |  |
|-----------------------------|--|--|
| <p>CASES</p>                | <ol style="list-style-type: none"> <li>Are there any cases of COVID-19 cases on campus or in the surrounding community?</li> <li>Has anyone from MBU contracted COVID-19?</li> </ol>   | <ol style="list-style-type: none"> <li>Yes, there are cases of COVID-19 in our surrounding community. These numbers change on a daily basis so noting them here would be inaccurate.</li> <li>We have had members of our MBU family affected by COVID-19 either directly or through members of their own family, however, to date, there have been no exposures on our campus during the phase of their illness at this time.</li> </ol> <p>Note: We will share information about any cases with connections to faculty, students, or staff on campus as allowed by state and federal privacy regulations.</p>   |
| <p>RISK</p>                 | <p>When will the risk of COVID-19 go away?</p>   | <p>The risk of subsequent waves of infection will remain until we achieve sufficient “herd immunity” through vaccination or actual infection and recovery.</p>   |
| <p>VACCINE</p>              | <p>Is there a vaccine available for COVID-19?</p>  | <p>No, there is currently no vaccine available for COVID-19 although clinical trials and vaccine development efforts have begun in earnest.</p>  |
| <p>TESTING</p>              | <p>Will MBU provide COVID-19 testing once the university resumes campus activities?</p>  | <p>Faculty, staff, and students who have symptoms related to COVID-19 or determine that they need to be tested based on potential exposure are encouraged to contact the Student Health Center on Campus.</p> <p>We will be collaborating with the resources available in the Staunton/Augusta/Waynesboro area. This will include sending individuals to the COVID Assessment Center and might include on campus testing.</p>  |
| <p>CONTACT TRACING TEAM</p> | <ol style="list-style-type: none"> <li>How will MBU identify and manage those individuals who are exposed to cases of COVID-19?</li> <li>What is Contact Tracing?</li> <li>What is a Contact Tracing Team?</li> <li>What training has the Contact Tracing Team had?</li> </ol> | <ol style="list-style-type: none"> <li>MBU will immediately initiate contact tracing. Contact tracing is part of the process to stop the chain of transmission.</li> <li>Contact tracing helps identify any and all persons who may have been exposed to a positive or potentially positive COVID-19 patient.</li> <li>A Contact Tracing Team, working with the medical team, will locate and talk with those who may have been exposed, assist in arranging for individuals to isolate themselves, and work to identify any persons with whom they may have come in close contact.</li> <li>All team members have completed a 6-hour course through John Hopkins University School of Public Health and earned a certificate in Contact Tracing.</li> </ol> |

|                          |  |   |
|--------------------------|--|---|
| ISOLATION AND QUARANTINE | <ol style="list-style-type: none"> <li>1. What is the difference between isolation and quarantine?</li> <li>2. Who decides?</li> <li>3. What if someone on campus is confirmed or suspected to have COVID-19?</li> <li>4. What does it mean to be a “potential exposure”?</li> <li>5. When will they be released?</li> </ol> | <ol style="list-style-type: none"> <li>1. Quarantine and Isolation are different <ol style="list-style-type: none"> <li>a. Isolation is the separation of sick people with a contagious disease from people who are not sick.</li> <li>b. Quarantine is the separation of people who were exposed to a contagious disease to see if they become sick. This often involves some level of restriction on the movement of those people.</li> </ol> </li> <li>2. Who decides? <ol style="list-style-type: none"> <li>a. The Virginia Department of Health has guidelines for persons with confirmed or suspected COVID-19 about when they are no longer contagious and when it is safe to be around others. This guideline describes ending isolation in non-healthcare settings: <a href="https://www.vdh.virginia.gov/content/uploads/sites/182/2020/04/Home-IsolationQuarantine-Release-Graphic_FINAL.pdf">https://www.vdh.virginia.gov/content/uploads/sites/182/2020/04/Home-IsolationQuarantine-Release-Graphic_FINAL.pdf</a></li> <li>b. The Pandemic Team for MBU will help the MBU family understand and follow the VDH guidelines during any suspected or confirmed cases.</li> </ol> </li> <li>3. Where will they self-isolate or quarantine if necessary? <ol style="list-style-type: none"> <li>a. Faculty and Staff: self-isolate at their own homes off campus until they have recovered</li> <li>b. Commuter students, non-residential students: self-isolate at their own homes off campus until they have recovered</li> <li>c. Residential Students: MBU will have available a separate facility for the proper care of individuals who may need to self-isolate.</li> </ol> </li> <li>4. A “potential exposure” means being a household contact or having a close contact within 6 feet of a person with confirmed or suspected COVID-19 for at least 10 minutes, or shorter in a healthcare setting, while the person was sick and 48 hours before the person became sick.</li> <li>5. When will they be released? <ol style="list-style-type: none"> <li>a. MBU will follow the VDH guidelines for ending isolation.</li> </ol> <br/> <a href="https://www.vdh.virginia.gov/content/uploads/sites/182/2020/04/Home-IsolationQuarantine-Release-Graphic_FINAL.pdf">https://www.vdh.virginia.gov/content/uploads/sites/182/2020/04/Home-IsolationQuarantine-Release-Graphic_FINAL.pdf</a> </li> </ol> |
| RETURN TO WORK OR SCHOOL | <ol style="list-style-type: none"> <li>1. How will the university help assure that people are cleared to come back to school or work?</li> </ol>   | <ol style="list-style-type: none"> <li>1. Part of the function of the Contact Tracing Team is to help determine the risk of potential exposure to coworkers and others on campus. The Contact Tracing Team will enter all COVID-19 positive persons into a monitoring program to check on them and see how they are recovering.</li> </ol>  |

|                     |   |   |
|---------------------|---|---|
|                     |   | <p>2. Recovery status (and clearance to return to work) is assigned when: 1) the individual remains fever-free without the use of fever reducers for 72 hours, 2) the individual shows improvement in respiratory symptoms (e.g., cough, shortness of breath), and 3) it has been at least 10 days since their symptoms first appeared. Return to work/School will be cleared through the Pandemic Medical Team.</p>  |
| RESOURCES           | What resources or national guidelines did the task force use to determine the actions and recommendations for the university? | <p>1. We continue to monitor COVID-19 and to take any new actions that are warranted as new information emerges in the rapidly changing situation.</p> <p>2. The university continues to work closely with our local, state, and national public health agencies to address the threat presented by COVID-19. We also follow regular updates from the Centers for Disease Control (CDC), and the World Health Organization (WHO). We have adopted the American College Health Association's (ACHA) Guidelines for Preparing for COVID-19 on college campuses.</p>   |
| RETURNING TO CAMPUS | When will faculty and staff come back to campus?  | <p>1. Phased Return: MBU will phase in a return of faculty, staff, and students in a coordinated process to ensure appropriate physical distancing, availability of PPE (personal protective equipment) and testing capabilities for COVID-19. Individuals will return to campus based on the core activities they support and their demonstrated need to be on-campus. No one should return to campus without coordination through their respective departments.</p> <p>2. Information and instructions regarding the phased return to campus will be forthcoming.</p> <p>3. All actions taken for the return to campus is based upon recommendations from the Governor of Virginia, the Virginia Department of Health, the CDC, and the ACHA.</p> |
| OTHER WORK OPTIONS  | What other work options might there be to help keep us safe?  | <p><b>SOME OPTIONS THAT MBU IS CONSIDERING</b></p> <p>1. Remote Work: Remote work may continue to be an option as we begin the return to the campus in the fall. Those who can work remotely to fulfill their work responsibilities should continue to do so to limit the numbers of individuals on campus and the spread of the COVID-19 virus. <b>Remote work arrangements must be approved by the immediate supervisor</b> and can be accomplished on a full or partial day/week schedule as appropriate.</p> <p>2. Alternating Days or Alternating Weeks: To limit the number of individuals and interactions among those on campus, departments should consider scheduling partial staffing on alternating days or</p>                         |

|                |  |  |
|----------------|--|--|
|                |  | <p>weeks with staff who are required on campus (e.g. two weeks remote, two weeks on campus OR one week on campus, three weeks remote). Such scheduling will enable physical distancing, especially in areas with large common workspaces. To contain “germ circles,” it is best to schedule the same people on the same days to limit any one individual’s exposure to other individuals when possible.</p> <p>3. Staggered Reporting/Departing: The beginning and end of the workday typically bring many people together at common entry/exit points of buildings. Staggering reporting and departure times by at least 15 minutes will reduce traffic in common areas to meet physical distancing requirements.</p>   |
| HEALTHY CAMPUS | How will you keep Faculty, Staff, and Students safe and healthy? | <p>1. MBU’s policies and protocols for responding to the COVID-19 pandemic will be rooted in safety for staff, faculty, students, invited guests (e.g., contractors) and for the public with whom we interact.</p> <p>2. The health and well-being of our community is critical. Protecting the health of the MBU community will require long-term effort and commitment, cooperation, teamwork and understanding.</p> <p>3. The university’s plans for expanding operations and increasing the presence of faculty, staff and students will be guided by the following criteria:</p> <ul style="list-style-type: none"> <li>• Existing and projected government restrictions (e.g., Stay at Home Orders, Face Covering Requirements, Physical Distancing, Gatherings, etc.).</li> <li>• Recommendations from Centers for Disease Control (CDC), World Health Organization (WHO), Virginia Department of Health (VDH), the Federal Government (recently released opening guidelines), State of Virginia (Opening Guidelines), Augusta Health Medical Center</li> <li>• A very intentional effort by all faculty, staff and students in exercising both personal and community responsibility.</li> <li>• Resource availability: including PPE (Personal Protective Equipment) for students, faculty and staff.</li> <li>• Contact tracing and case management protocols.</li> <li>• Physical distancing strategies.</li> </ul> <p>4. The university has developed the following policies/processes for returning to campus to ensure the health and safety of our campus community members:</p> <ul style="list-style-type: none"> <li>• Return to Campus Process</li> </ul> |

|                     |  |   |
|---------------------|--|---|
|                     |  | <ul style="list-style-type: none"> <li>○ Faculty, staff, and students will be asked to sign a Comprehensive COVID-19 Attestation Form</li> <li>● Face Covering Policy</li> <li>● Exposed Employee Policy</li> <li>● COVID-19 Symptom Monitoring Policy</li> </ul>   |
| FACE COVERINGS      | <p>1. Do face coverings really work?</p> <p>2. Should I wear a mask/face covering if I have asthma or COPD?</p> <p>3. How should I wash a cloth face covering?</p> | <p>1. YES, face masks really do work. My face mask protects you and your face mask protects me! MBU has a face mask/covering policy that is intended to help minimize the spread of COVID-19.</p> <p>a. Helpful guidelines about face masks:</p> <ul style="list-style-type: none"> <li>I. Face masks/coverings should be worn by all individuals working on campus at all times in public settings (e.g., common workspaces, public spaces, hallways, stairwells, elevators, meeting rooms, classrooms, breakrooms, campus outdoor spaces, in restrooms, etc.).</li> <li>II. Faculty who are delivering on-campus instruction may remove their face mask to teach provided they are located within a delineated teaching area that is no less than 10 feet from students.</li> <li>III. If physical distancing is possible, individuals working in private offices or laboratory environments that do not otherwise require masks can remove their masks while in such space.</li> <li>IV. You may wear homemade cloth face coverings that abide by CDC and other public health recommendations.</li> <li>V. Disposable masks should only be worn for one day.</li> </ul> <p>2. Yes, if your medical provider agrees that it is safe for you. Because these diseases vary in severity, you should ALWAYS consult with your health provider about this.</p> <p>3. <a href="https://www.cdc.gov/coronavirus/2019-ncov/downloads/DIY-cloth-face-covering-instructions.pdf">https://www.cdc.gov/coronavirus/2019-ncov/downloads/DIY-cloth-face-covering-instructions.pdf</a></p> |
| GLOVES              | Should I also be wearing gloves?   | Gloves are not necessary for general use and should not replace good hand hygiene. Washing your hands often with soap and water is considered the best practice for common everyday tasks. Please speak with your supervisor to determine if gloves are necessary.  |
| PHYSICAL DISTANCING | What do you mean by “Physical Distancing?”   | Maintaining space between you and others is a best practice and will be required on the MBU campus to avoid exposure to the COVID-19 virus and slow its spread. Because people can spread the virus   |

|   |  |   |
|---|--|---|
|   |  | <p>before they know they are sick, it is important to stay away from others whenever possible, even if you have no symptoms. Physical distancing is especially important for people who are at higher risk. Individuals on campus should follow these physical distancing practices:</p> <ul style="list-style-type: none"> <li>• Stay at least 6 feet (about 2 arms' length) from other people</li> <li>• Do not gather in groups</li> <li>• Stay out of crowded places and avoid mass gatherings</li> </ul>   |
| PERSONAL DISINFECTION                   | Is my office cleaned by the house keepers every evening? | <ol style="list-style-type: none"> <li>1. Housekeeping will continue to clean office and workspaces, classrooms, and public spaces based on protocols developed with CDC guidance in mind, BUT you should take additional care to wipe down commonly used surfaces after use.</li> <li>2. When leaving any room in which you have been working or eating, it is recommended that you swab down all work or eating areas with EPA-registered disinfectant. This includes a private workspace or any shared-space location or equipment (e.g., computers, A/V and other electrical equipment, copiers, desks and tables, chair arms, light switches, doorknobs, handles, etc.). To the best of your ability, you should clear desk and table surfaces in personal offices and workstations to aid in thorough cleaning. Using a hand sanitizer that contains at least 60% alcohol is also effective after contacting commonly used surfaces.</li> <li>3. It may not be possible for the university to provide product for every personal use scenario. Please take this into consideration as you go about your daily activities on campus. Personal supplies of hand sanitizer are recommended in case you are in an area where it may not be accessible.</li> </ol> |
| WHAT ABOUT PEOPLE WHO ARE AT HIGH RISK? | What types of conditions are considered high risk?       | <ol style="list-style-type: none"> <li>1. Individuals with certain conditions may have a higher risk for COVID-19 infection. Those conditions include: <ul style="list-style-type: none"> <li>• Age 65 years and older</li> <li>• HIV</li> <li>• Asthma (moderate-to-severe)</li> <li>• Chronic lung disease</li> <li>• Diabetes</li> <li>• Serious heart condition</li> <li>• Chronic kidney disease being treated with dialysis</li> <li>• Severe obesity</li> <li>• Immunocompromised</li> <li>• Pregnancy (while pregnant people seem to have the same risk as adults who are not pregnant, pregnancy can create changes that may increase the risk of some infections)</li> </ul> </li> </ol>  |

|                          |  |  |
|--------------------------|--|--|
|                          |  | 2. We encourage all people in this category to work from home, limit contact with others while on campus, and to always practice personal safety with hand washing and wearing of face-coverings.  |
| HOW LONG WILL THIS LAST? | How long can we anticipate restrictions and limitations in activities? | <p>Twelve (12) to eighteen (18) months, if not longer.</p> <ul style="list-style-type: none"> <li>- Resumption of activities will be gradual and phased based on local public health conditions as well as institutional capacity</li> </ul> |

## Appendix G: Reopening of MBU/MDCHS

TO: All Faculty/Staff/Students

FROM: Vice President Health Sciences

DATE: 2 June 2020

RE: REOPENING OF MDCHS

### 1. GUIDING PRINCIPLES

The more an individual interacts with others, and the longer the interaction, the higher the risk of COVID-19 spread. The risk of COVID-19 spread increases in Institutions of Higher Education non-residential settings as follows:

- a. Lowest Risk: Faculty and students engage in virtual-only learning options, activities, and events.
- b. Slightly Increased Risk: Small in-person classes, activities, and events. Individuals remain spaced at least 6 feet apart and do not share objects (e.g. hybrid virtual and in-person class structures or staggered/rotated scheduling to accommodate smaller class size)
- c. Increased Risk: Full-sized in-person classes, activities, and events. Students are not spaced apart, share classroom materials or supplies, and mix between classes and activities.

### 2. SPREAD OF DISEASE

COVID-19 is mostly spread by respiratory droplets released when people talk, cough, or sneeze. It is thought that the virus may spread to hands from a contaminated surface and then to the nose or mouth, causing infection. Therefore, personal prevention practices (such as **handwashing, staying home when sick**) and environmental prevention practices (such as **cleaning and disinfection**) are important principles that are covered in this document. Fortunately, there are a number of actions we can take to help lower the risk of exposure and spread.

### 3. PROMOTING BEHAVIORS THAT REDUCE SPREAD

- a. **Prior to returning to campus** you received a letter regarding the Health and Safety Measures for the campus. Included in this letter was a mandatory COVID-19 **“Requirements for Returning to Campus Document”** that you were required to complete.
- b. **Staying Home or Self-Isolating when Appropriate**
  - Before returning to campus, students, faculty or staff who have been sick with COVID-19 symptoms or tested positive for COVID-19 must self-isolate at home.
  - Before returning to campus, students, faculty or staff who have been potentially exposed to someone with COVID-19 must quarantine at home.
- c. **Hand Hygiene and Respiratory Etiquette**
  - Hand washing is preferable to hand sanitizer.
    - Handwashing with soap and water for at least 20 seconds.
    - If soap and water are not readily available, hand sanitizer that contains at least 60% alcohol can be used.
  - Cover cough and sneezes with a tissue or use the inside of your elbow.
    - Used tissues should be discarded in the trash and hands washed immediately with soap and water for at least 20 seconds.

- If soap and water are not readily available, hand sanitizer that contains at least 60% alcohol can be used.

**d. Face Coverings**

Face coverings will be worn at all times when in the building. Please remember not to touch your face covering and to wash your hands frequently.

**4. MAINTAINING HEALTHY ENVIRONMENTS**

**a. Cleaning and Disinfection**

- Our housekeeping staff will continue their normal duties paying special attention to frequently touched surfaces (e.g. door handles, sink handles, drinking fountains, grab bars, hand railings, bathroom stalls, dining tables) within our facility.
- The university has purchased an “IsoKlean ULV Cold Fogger” that provides a touchless application that covers 1076 sq ft per minute.
- Students, faculty, and staff are expected to keep their personal items (e.g. cell phones, other electronics) and personal work and office spaces clean. Use disinfectant wipes to wipe down desks, phones, etc. Trash should be removed at the end of the day and placed in the hall for housekeeping to collect.
- Students will work with faculty on specific cleaning procedures to occur during the day in classes and labs for additional cleaning after spaces are used.
- There is a separate policy for the usage of the Labs and classroom spaces that resides in PolicyStat. Students will receive a copy of this to read and acknowledge.

**b. Modified Layouts**

- For classrooms, seating/tables/desks will be at least 6 feet apart when feasible.
- Students and faculty are NOT permitted to move chairs or tables in any room without permission of the VPHS.
- We will host smaller classes in each room to ensure 6 feet spacing.
- In some instances, distance learning may need to be offered in addition to in-person classes to help reduce the number of in-person attendees.
- Some classes may be live streamed into adjacent classrooms to ensure 6 feet spacing.
- We must provide adequate distance between individuals engaged in experiential learning opportunities (e.g. labs) as much as possible to reduce exposure time.

**c. Physical Barriers and Guides**

- We will be installing some physical barriers, such as sneeze guards and partitions, in some areas of the building.
- You may also see some physical guides, such as tape on floors or sidewalks and signs on walls to ensure that individuals remain at least 6 feet apart in lines or at other times.

**d. Communal Spaces**

- We will be staggering use and restricting the number of people allowed in at one time to specific shared spaces to ensure that everyone can stay at least 6 feet apart.
  - Atrium
  - Student lounge areas
  - Student study areas
  - Faculty kitchen areas

- Faculty conference areas
- We will expect everyone to help clean and disinfect these areas between use.
- Students should plan to only be in the building for scheduled face to face lectures and labs, but should plan to do studying at home unless it is crucial to be in the building to utilize equipment for skills practice.

**e. Food Service**

- We will still have snack and drink options available in Avenue Q - this will now be offered through Student Services. These will be offered at a lower, more reasonable cost.

**5. MAINTAINING HEALTHY OPERATIONS**

**a. Protections for Students, Faculty, and Staff at Higher Risk for Severe Illness from COVID-19**

- Faculty and staff who have serious underlying medical conditions who might be at [higher risk for severe illness from COVID-19](#) will have options to help limit their exposure (e.g., telework and/or modified job responsibilities). Individuals should speak to their supervisors regarding these options.
- Students at [higher risk for severe illness](#) will have options to help limit their exposure (e.g. virtual learning). Students should speak to their program directors regarding these options.
- Consistent with applicable law, policies are in place to protect the privacy of people at [higher risk for severe illness](#) regarding underlying medical conditions in compliance with applicable federal and state privacy and confidentiality laws.

**b. Regulatory Awareness**

- All faculty and staff need to be aware of state or local regulatory agency policies related to group gatherings to determine if events can be held.

**Office of the Governor: 26 May 2020**

**Update Advisement About Health Care Related Instruction Under Executive Orders 53, 55, 61, 62 and Related Orders**

1. Postsecondary education institutions are responsible for adhering to EO 53, EO 55, EO 61, EO 62 and any other related guidance from the Governor as a result of EO 51 and the Declaration of a State of Emergency of March 20, 2020.
2. For the sake of student safety and liability, students should only be placed into clinical settings if the following conditions are satisfied:
  - a. The training site agrees to accept the student into its environment and to maintain appropriate infection control standards, including making available to the student necessary PPE, as recommended by the CDC and other pertinent federal and state guidance and comparable to the PPE it provides to its employees in similar settings; and
  - b. The student is required to read and sign an Acknowledgement of Risk; and
  - c. The student is given the option to postpone any clinical placement, without academic penalty; however, there shall be an understanding that completion of clinical placement(s) may be required prior to graduation or progression within the academic program.

3. For students enrolled in health professional academic programs, in-person instruction may occur so long as it is done consistently with requirements and advisements otherwise in effect for the Commonwealth at the time. These include but are not necessarily limited to guidance found in EO 53 (i.e., gatherings no greater than 10, minimum six feet separation) as well as subsequent guidance to wear face coverings and sanitize classrooms and labs between uses.
4. Students should be given the option to forego any in-person educational experience—testing or instruction-related—to a later point in time and not be subject to academic penalty for selecting such option.

**c. Gatherings**

- We will pursue virtual group event, gatherings or meetings as much as possible, and when required to be in person (e.g. classroom, labs) promote social distancing of at least 6 feet between people.
- We will limit non-essential visitors, volunteers, and activities involving external groups or organizations as possible - especially with individuals who are not from the local geographic area (e.g. community, town, city, or county).
- Individuals entering the building must have completed the 14 day temperature checking and attestation process that all students and faculty complete. There are NO EXCEPTIONS.

**d. Telework and Virtual Meetings**

- We will encourage telework for as many faculty and staff as possible, especially employees at [higher risk for severe illness from COVID-19](#).
- We will replace in-person meetings with video or tele-conference calls whenever possible.
- We will provide student support services virtually, as feasible.
- When possible, we will institute flexible work hours and telework schedules utilizing staggered shifts to help establish policies and practices for social distancing (maintaining distance of approximately 6 feet) between people.

**e. Travel and Transit**

- All non-essential travel is discontinued at this time.

**f. Designated COVID-19 Point of Contact**

- The Contact Trace Team or the Pandemic Medical Team is the designated COVID-19 Point of Contact.
- The Student Health Center is also a designated COVID-19 Point of Contact.
- REPORTING SYMPTOMS:
  - What to do if you are sick: [follow these instructions first!](#)
  - **Then REPORT - call the Contact Trace Team**
    - If you have symptoms of COVID-19
    - If you have a positive test for COVID-19
    - If you were exposed to someone with COVID-19 within the last 14 days

**g. Leave (Time Off) and Excused Absence Policies**

- We will have flexible sick leave policies and practices that enable faculty, staff and students to stay home or self-isolate when they are sick, have been exposed, or caring for someone who is sick.

**h. Recognize Signs and Symptoms**

- Faculty and staff should be able to recognize the [signs and symptoms of COVID-19](#).
- If faculty, staff, or students come to work ill or become ill at work, they should be sent home

## Appendix H: Face Coverings Policy

### PURPOSE:

The use of a face mask has been found to be helpful at reducing the spread of seasonal coronaviruses and COVID-19. This is to protect people around you if you are infected but do not have symptoms.

### POLICY:

Effective immediately and until further notice, all faculty, staff, and students should wear a face mask when on campus in a public area including time of brief interaction between co-workers or friends. These face coverings are not a substitute for social distancing.

### PROCEDURE:

- Use of Face Masks While on Campus
  - All faculty, staff, and students should wear a face covering on campus and in campus settings in situations where they may be near people.
  - Faculty or staff working alone in their offices do not need to wear masks.
  - Students who are alone in a room do not need to wear a mask.
  - Anytime someone is on campus and within 6 feet of another person, a mask should be worn.
- Care of the Face Mask
  - Face masks are only effective for protection if they are handled, worn, stored and disposed of properly.
  - A cloth face covering that covers the nose and mouth is sufficient for campus wear.
  - Practice good hand hygiene before and after handling the mask (see wash your hands often).
  - Mark the outside of your mask to identify which side is the outside of the mask and handle it accordingly.
  - Store your mask in a paper bag or a Ziploc-style bag to keep it clean.
  - Don't touch the outside of your mask while it is on your face.
  - Don't pull your mask below your chin while you are wearing it. Leaving the mask dangling or improperly fitted to your face creates opportunities for cross-contamination.
- Avoid Close Contact
  - These face coverings are not a substitute for social distancing. CDC still recommends a distance of 6 feet between yourself and other people.
- Cover Coughs and Sneezes
  - If you are in a private setting and do not have on your cloth face covering, remember to always cover your mouth and nose with a tissue when you cough or sneeze or use the inside of your elbow.
- Wash Your Hands Often
  - Frequent hand washing with soap and water for at least 20 seconds
  - Use hand sanitizer if hand washing is not readily available (use a hand sanitizer that contains at least 60% alcohol).
  - Avoid touching your eyes, nose, and mouth with unwashed hands

### NOTE:

- Surgical masks or N-95 respirators are not required. These are critical supplies that should be reserved for healthcare workers and others deemed necessary are recommended by the CDC.

**Appendix I: COVID-19 Chartwells Dining Modifications**

[https://drive.google.com/file/d/1BHdiPlyQiSU4\\_7gaUeYgyPnifXCqNUup/view](https://drive.google.com/file/d/1BHdiPlyQiSU4_7gaUeYgyPnifXCqNUup/view)



**COMMONWEALTH of VIRGINIA**  
*Office of the Governor*

Atif Qarni  
Secretary of Education

May 26, 2020

To: Postsecondary Education Providers in Virginia  
From: Atif Qarni, Secretary of Education, Commonwealth of Virginia  
Subject: Updated Advisement About Health Care Related Instruction Under Executive Orders 53, 55, 61, 62 and Related Orders.

1. Postsecondary education institutions are responsible for adhering to EO 53, EO 55, EO 61, EO 62 and any other related guidance from the Governor as a result of EO 51 and the Declaration of a State of Emergency of March 20, 2020.
2. For the sake of student safety and liability, students should only be placed into clinical settings if the following conditions are satisfied:
  - a. The training site agrees to accept the student into its environment and to maintain appropriate infection control standards, including making available to the student necessary PPE, as recommended by the CDC and other pertinent federal and state guidance and comparable to the PPE it provides to its employees in similar settings; and
  - b. The student is required to read and sign an Acknowledgement of Risk; and
  - c. The student is given the option to postpone any clinical placement, without academic penalty; however, there shall be an understanding that completion of clinical placement(s) may be required prior to graduation or progression within the academic program.
3. For students enrolled in health professional academic programs, in-person instruction may occur so long as it is done consistently with requirements and advisements otherwise in effect for the Commonwealth at the time. These include but are not necessarily limited to guidance found in EO 53 (i.e., gatherings no greater than 10, minimum six feet separation) as well as subsequent guidance to wear face coverings and sanitize classrooms and labs between uses.
4. Students should be given the option to forego any in-person educational experience—testing or instruction-related—to a later point in time and not be subject to academic penalty for selecting such option.

*This advisement was initially issued on April 9, 2020, and has been amended as of May 26, 2020.*

## **Appendix K: Exposed Employee Policy**

### **PURPOSE:**

To ensure prompt identification and isolation of potentially infectious individuals as a critical step in protecting faculty, staff, and students on the MBU and MDCHS campus.

### **POLICY:**

Supervisors should inform and encourage employees to self-report any suspected possible exposure to COVID-19 or any signs or symptoms of COVID-19 if they suspect possible exposure.

### **PROCEDURE:**

1. If an individual or a supervisor a) suspects an employee has been exposed to or b) an employee self-reports a possible exposure to or c) reports any signs or symptoms of COVID-19, the supervisor should immediately call the delegated medical representative for the Pandemic Response Team (Dr. D. Greubel).
2. Supervisors should send the employee home with instructions to
  - a. self-isolate away from other family and visitors and await a phone consultation from the medical representative.
3. The medical representative will query the employee regarding:
  - a. the primary exposure
  - b. any secondary exposures
  - c. any tertiary exposures
4. The employee may be asked to self-isolate and monitor their health for up to 14 days from the last day of possible contact.
  - a. A contact is a person who is involved in any of the following from 2 days before and up to 14 days after the onset of symptoms:
    - i. Having face-to-face contact with a COVID-19 patient within 4 feet for > 15 minutes;
    - ii. Providing direct care for a patient with COVID-19 disease without use of proper PPE;
    - iii. Staying in the same close environment as a COVID-19 patient (including sharing a workplace, classroom or household or being at the same gathering) for any amount of time);
    - iv. Travelling in close proximity with (3 feet separation from) a COVID-19 patient in any kind of conveyance.
5. The employee should be instructed to call their health care provider to inform them of the exposure and to seek medical attention if any symptoms arise.

## Checklist for Returning to Work After Illness with COVID-19

1. Acute Respiratory Illness (not tested for COVID-19 or if test comes back negative for COVID-19)
  - a. Based on CDC guideline, an employee may return to work only when all three of the following conditions have been achieved:
    - i. Seven (7) days have passed since the beginning of any symptoms
    - ii. AND there are no fevers for the past 72 hours without the use of any fever-reducing medications (aspirin, acetaminophen, or ibuprofen)
    - iii. AND the majority of symptoms (cough, shortness of breath, etc.) have improved
2. An asymptomatic case of COVID-19 that is found by testing
  - a. Based on the CDC guideline, an employee may return to work only when all three of the following conditions have been achieved:
    - i. Ten (10) days after the patient's positive COVID-19 test
    - ii. They have not developed any symptoms (fever, chills, muscle pains, headache, shortness of breath, cough, sore throat, or new loss of taste/smell) during these ten (10) days
    - iii. They adhere to strict face mask (not cloth) wearing at work for an additional three (3) days after returning for a total of fourteen (14) days after their positive test
3. Confirmed COVID-19 with illness not requiring hospitalization
  - a. Based on CDC guideline, an employee may return to work only when all three of the following conditions have been achieved:
    - i. Seven (7) days have passed since the beginning of any symptoms
    - ii. AND there are no fevers for the past 72 hours without the use of any fever-reducing medications (aspirin, acetaminophen, or ibuprofen)
    - iii. AND the majority of symptoms (cough, shortness of breath, etc.) have improved
    - iv. The employee has had **2 confirmed negative COVID-19 tests**, administered by a medical professional and spaced at least 24 hours apart (if testing is available) or a provider's note for clearance to return to work.
4. Confirmed COVID-19 with illness requiring hospitalization
  - a. An employee who has been confirmed (tested positive by a medical professional) with COVID-19 and has become ill due to the virus, requiring hospitalization may be at higher risk of shedding (dispensing respiratory secretions) and spreading the infection. The CDC recommends rigorous testing before returning these employees to work since they may experience longer periods of viral detection compared to those with mild or moderate symptoms.
  - b. Employees with conditions that might weaken their immune system may have "prolonged viral shedding after recovery." The CDC recommends these employees discuss returning to work with their personal healthcare provider to best assess if they pose no threat to coworkers. This may include re-testing to verify they are no longer shedding the virus.
  - c. Businesses should consider each of these staff members on a case-by-case basis, requiring verified testing and return to work authorizations from the worker's healthcare professional.