



*The UNIVERSITY of OKLAHOMA®
Health Sciences Center
Fran and Earl Ziegler College of Nursing*

**Fran and Earl Ziegler College of Nursing
COVID-19 Response Plan – Students, Staff and Faculty
January 10, 2022**

This University of Oklahoma Health Sciences Center College of Nursing Response Plan is based on the University of Oklahoma Health Sciences Center COVID-19 Response Plan from January 10, 2022. Associate Deans, Assistant Deans, Department Chairs, Executive Directors, and Faculty responsible for reviewing and distributing this Plan in their areas and for implementing the necessary steps for compliance within their areas.¹

This plan and possible subsequent revisions will be distributed via email to faculty and staff and posted on the College of Nursing intranet. The University of Oklahoma Health Sciences Center COVID-19 Response Plan and associated updates are posted on the HSC COVID-19 Updates and Resources page: <https://www.ouhsc.edu/coronavirus>, also accessible from the OUHSC home page.

This College of Nursing Plan is intended for all College of Nursing employees and students; the OUHSC Plan applies to all OUHSC employees and students,² which includes residents and trainees, scholars, and, for purposes of this Plan, volunteers. It includes the following sections:

- I. Remote Work
- II. Events, Eating, Social Distancing, and Masking
- III. Obtaining Masks
- IV. Cleaning Facilities and Equipment
- V. Testing, Isolation, and Contact Tracing
- VI. COVID-19 Vaccine for Employees and Students
- VII. Screening and Reporting - Vaccinated & Unvaccinated Students & Employees
- VIII. Travel
- IX. Training
- X. Enforcement

¹ As the nature of COVID-19 remains dynamic, the members of the Specific Pathogens Preparedness Operations Team (SPPOT) and the OUHSC Emergency Operations Committee (EOC) will regularly evaluate the COVID-19 Return Plan and implement new or revised requirements for return when indicated. Updated versions of this Plan will be distributed to appropriate campus groups and posted on the HSC COVID-19 Updates and Resources page: <https://www.ouhsc.edu/coronavirus>, also accessible from the OUHSC home page.

² If an employee or student indicates compliance with a provision of this Plan is not possible due to medical reasons, the individual should be referred to the appropriate University office to request accommodations on the basis of disability office (Human Resources for employees; Accessibility & Disability Resource Center for students).

I. Remote Work

A. Remote Work Related to COVID-19

When remote work is recommended as part of the HSC COVID-19 response, associate/assistant deans, directors, managers and employees will be notified by campus administration or Human Resources. CON staff and faculty should work with their designated supervisor and/or department chair to establish remote work plans.

B. Remote Work for Non-COVID Reasons

Remote work **for purposes unrelated to COVID-19** that is otherwise consistent with the University's guidelines is not affected by this policy. The OUHSC is currently updating its Remote Work Plan and the final version will be posted to the CON Intranet once approved and will be found [here](#) in the CON Document Library under Active Policies.

C. Remote Work as a Reasonable Accommodation

Remote work for individuals with a disability must be coordinated with Human Resources (for employees) or the Accessibility and Disability Resource Center (for students).

II. Events, Eating, Social Distancing, and Masking

A. Events and Social Gatherings may resume on campus in accordance with the current HSC masking policy and the following.

1. Indoor Eating

- a. Meetings - Food may not be served at indoor meetings but may be provided to-go as participants leave.
- b. Events - Food and drink may not be served at indoor events, such as receptions, parties, and recognition ceremonies, but may be provided to-go as participants leave

2. Outdoor Eating – Food may be served at outdoor events; social distancing while eating is strongly encouraged.

B. Masking Protocols:

Employees, students, trainees, scholars, and volunteers must wear an approved mask in HSC facilities and in University vehicles. Masks must be paper surgical style, KN95, or N95. Scarves, gaiters, cloth masks, and bandanas are not acceptable. Masks with vents may not be worn unless a surgical mask is worn over the vented mask. Masks must cover the nose and mouth.

NOTE: OU Health, the University Hospitals and Trust Authority, and other Health Center entities may have masking policies for their facilities that differ from the HSC policy; individuals are reminded to review signage in each building to ensure masking compliance.

C. Disability Accommodation for Masking:

1. If an employee or student indicates compliance is not possible due to medical reasons:

- a. The individual must be referred to the appropriate University office to request accommodations on the basis of disability (Human Resources for employees; Accessibility & Disability Resource Center for students).

2. Masks are NOT required for children under age 2 or anyone who has trouble breathing, is unconscious, incapacitated, or otherwise unable to remove the mask without assistance.

D. Signage

University Operations will place signs in common areas that address the requirements in this plan, as appropriate. Departments and areas can obtain additional copies from Operations.

E. Masking Compliance Program

The Health Sciences Center, through SPPOT/EOC and clinics, will implement a masking compliance program for areas where masking is required, as needed.

III. **Obtaining Masks**

- A. Masks for Students and Employees - The University will make masks available to employees and students, appropriate to their on-campus responsibilities. A small supply will be available at the entrances of non-clinical facilities.

In addition:

1. Masks for CON students and employees in OKC are available at the information desk on the first floor of the CON. Staff from the Office for Business and Financial Affairs are responsible for maintaining a mask stock through the central mask inventory.
2. Masks for CON students and employees at sites away from OKC will be available at a central location. Site Coordinators will work with the Office for Business and Financial Affairs to ensure an ample supply of masks are available.

- B. Masks for Vendors and Others in Patient-Facing Areas/Buildings – The CON is required to advise visitors, vendors, and service providers that they are expected to provide their own approved masks when in the building. The CON will provide masks if available.

IV. **Cleaning Facilities and Equipment**

Clean facilities and equipment require a commitment from all levels of the University community. Everyone has an important role and responsibility in maintaining a healthy work environment.

A. University Responsibility

The University will provide appropriate routine cleaning consistent with pre-COVID cleaning schedules. For campus areas where a positive COVID-19 case has been identified, refer to B1 and B2 below.

B. CON Responsibility

As prior to COVID-19, each college manager remains responsible for obtaining appropriate cleaning supplies and providing for the cleaning of shared office equipment, furniture, surfaces, and environment.

1. COVID-19 Positive Individuals –Department/area managers who are notified that a COVID-19 positive individual was in their space in the past 24 hours should contact General Services (405-271-2311 or 918-660-3555) for OUHSC-

operated buildings or OneCall (405-271-2252) for UHAT-operated buildings to confirm when disinfecting of the space last occurred.

2. If the positive individual has been in the space since it was last disinfected, General Services/OneCall will, in consultation with EHSO, assess whether interim disinfecting is appropriate. The supervisor should follow instructions from General Services/OneCall while the assessment is pending. This procedure should be followed in off-campus leased spaces as well, by contacting the leasing agent or building maintenance team.

- C. Individual Responsibility – As prior to COVID-19, individuals are responsible for cleaning their personal and shared spaces and office equipment.

V. **Testing, Isolation**

A. Positive COVID -19 Tests

1. Employees and students who test positive at any testing location must report the positive test and obtain clearance from the Student & Employee Health Clinic via the online COVID-19 [Screening and Reporting Tool](#) upon receipt of the results.
2. Employees and students who test positive for COVID-19 are expected to advise co-workers, classmates, faculty, and supervisors who they had close contact with, in accordance with instructions from Student & Employee Health.
3. **PLEASE NOTE: The University does not accept negative rapid COVID-19 antigen tests from any clinic or laboratory.**

VI. **COVID-19 Vaccine for Employees and Students**

The University recognizes that vaccine requirements, particularly in patient care settings, are both prudent and important. To that end, the COVID-19 vaccine has been added to the mandatory vaccines for individuals in certain campus groups. The declination process in place for other mandatory vaccines is in effect for the COVID-19 vaccine as well, as described in Paragraph D below. These requirements and processes will be updated as appropriate, based on guidance from public health agencies and officials.

To be considered fully vaccinated against COVID-19, individuals must have completed a [World Health Organization \(WHO\)](#) approved COVID-19 vaccine series. The CDC defines a complete series to include boosters, for purposes of determining quarantine periods.

A. Mandatory Vaccines

1. Effective June 1, 2021, the following individuals (current and newly hired/enrolled) are required to submit a completed COVID-19 Vaccine Documentation Form and proof of vaccine:
 - a. Faculty, staff, and students with patient-facing responsibility. For purposes of this policy, “patients” include clinical and hospital patients, mental health and allied health clients, clinical human research participants, simulated patients, and parents/guardians of patients who cannot provide legal consent. “Patient-facing responsibilities” include any activities that are anticipated to necessitate direct contact or close physical proximity to a patient. Supervisors are responsible for determining whether the individuals in their area have patient-facing responsibilities.
 - b. Individuals who will observe, shadow, or volunteer in an area where patients are reasonably expected to be.

- c. Study Abroad - Faculty, staff, and students who are participating in an elective Study Abroad program should contact the Study Abroad office for current COVID-19 vaccine requirements of the University and country and program involved.

B. Vaccine Documentation:

1. Vaccine documentation must include the recipient's first and last name, recipient's date of birth, vaccine manufacturer, date(s) for each dose, and administering healthcare professional or facility.
2. The following documentation is acceptable as proof of vaccine completion. Student and Employee Health (405- 271-9675) can answer specific questions regarding documentation.
 - a. Documentation from [Oklahoma State Immunization Information System](#) (OSIIS) or other state vaccine registry
 - b. A legible copy of the front side of a completed CDC Vaccine Record card
 - c. Documentation from the licensed health care facility that vaccinated the individual
 - d. Other official documentation that includes the information in B.1 above.
3. Documentation will be submitted as follows:
 - a. Students will follow the [Student Process for COVID-19 Documentation](#)
 - b. Employees and student employees will complete the [COVID-19 Vaccine Documentation Form](#) and follow the submission instructions on it.

C. Vaccine Availability: The University strongly encourages all other faculty, staff, and students to complete a COVID-19 vaccine series, including the booster.

1. The College of Pharmacy and OU Health offers the COVID-19 Moderna vaccine for ages 18 and up in the OU Physicians building pharmacy.
2. Oklahoma Children's Hospital Pharmacy offers COVID-19 Pfizer vaccine doses for ages 12 to adult. Both pharmacy locations offer limited daily supplies of both regular series and booster vaccines Monday through Friday, 10 a.m. to 5 p.m. Children ages 5 to 11 will continue to receive COVID-19 vaccines in the pediatric clinics only.
3. Walk-ins are welcome but individuals are encouraged to pre-register at: [Registration And Consent](#).

D. Vaccine Completion for New Hires/Admissions:

Faculty, staff, volunteers, and students who are patient-facing and who are not fully vaccinated upon hire or admission must complete the first dose of a 2-dose WHO-approved series or a single series dose of a WHO-approved vaccine within 30 days of appointment (employees, scholars, volunteers) or of the first day of classes (students) and must complete the series no later than 60 days from then. Boosters are also encouraged. Students should confirm specific dates and deadlines with their college/program.

E. Declination: Faculty, staff, and students with patient-facing responsibility who decline to be vaccinated must complete and submit the appropriate Declination of COVID-19

Vaccination Form and comply with any preventive measures directed by the HSC facility where the individual will perform academic or employment responsibilities. (Facilities outside of HSC may have different vaccine policies and declination procedures.) HSC process and forms are available here:

1. Employees and student employees: <https://hr.ou.edu/self-service>
2. Students: <https://students.ouhsc.edu/Current-Students/Student-Wellbeing/Health-Clinic/required-immunizations>

VII. Screening & Reporting - Vaccinated and Unvaccinated Employees & Students

For purposes of this Response Plan, the following definitions apply:

A. Vaccinated Person – Defined

1. A person who completed the second dose of a two-dose World Health [Organization \(WHO\)-approved COVID-19 vaccine](#) series at least 14 days ago.
2. A person who completed a one-dose WHO-approved COVID-19 vaccine series at least 14 days ago

B. Unvaccinated Person - Defined

1. A person who has not received any [Organization \(WHO\)-approved COVID-19 vaccine](#) doses.
2. A person who has received only one dose of a two-dose WHO-approved COVID-19 vaccine series.
3. A person who is not at least 14 days past receipt of the second dose of a two-dose WHO-approved COVID-19 vaccine series.
4. A person who is not at least 14 days past receipt of a one-dose WHO-approved COVID-19 vaccine series.
5. A person who has completed a non WHO-approved COVID-19 vaccine series.

NOTE: The online Screening and Reporting tool <https://covidreporting.ouhsc.edu/> MUST be completed each time any of the following scenarios are experienced, for assessment and clearance BEFORE an employee or student may return to assigned University work location or obligation.

A. Vaccinated Person – Reporting Requirement:

1. You have symptoms that are consistent with COVID-19. For a list of symptoms, [click here](#).
2. You have tested positive for COVID-19 within in the past 10 days or are awaiting COVID-19 test results from a facility outside of OUHSC.
3. You have been in close contact within the past 10 days with someone who is COVID-19 positive or who is awaiting COVID-19 results. (Note: Health care workers who are treating COVID-19 patients and wearing appropriate PPE are not required to report exposures.

B. Unvaccinated Person – Reporting Requirement:

1. You have symptoms that are consistent with COVID-19. For a list of symptoms, [click here](#).
2. You have tested positive for COVID-19 within the past 10 days or are awaiting COVID-19 test results from a facility outside of OU Health.
3. You have been in close contact within the past 10 days with someone who is COVID-19 positive or who is awaiting COVID-19 results.
4. You have a household member who has tested positive for COVID-19 in the past 10 days.

NOTE: Vaccinated and unvaccinated individuals must also comply with the screening and reporting processes in place at their assigned off-campus locations/rotations.

VIII. Travel

The University's Travel and Screening Committee provides recommendations for COVID-19 mitigation strategies for travel that is approved as mission-critical.

- A. University Domestic and International Travel – Domestic and international air travel by HSC employees for University-related business or academic purposes is permitted only if the travel is considered *mission-critical* to the University. International travel by unvaccinated employees and students requires completion of the online COVID-19 Screening and Reporting Tool.
- B. Mission-critical Travel, Defined – Mission-critical travel is travel that is necessary to the University's ability to meet its core academic, research, or operations functions. More specifically, the purpose and timing of the travel must be such that if the travel does not occur as scheduled, the University's ability to meet its core academic, research, or operations functions is significantly impaired.
- C. Approval Process - Individuals who believe domestic or international travel is mission critical must contact their Dean, who will consider factors such as timing and purpose, State Department and CDC travel advisories for the destination(s), impact on competitive advantage, and actions of peer institutions. Approval of the Senior Vice President and Provost is not required.

IX. Training

- A. Campus-Level - The SPPOT/EOC Exec Team will assist with and coordinate training materials and opportunities for departments/areas, employees, and students to learn about COVID-19 and related campus policies.
- B. Other – The CON is responsible for ensuring employees and students receive COVID-19 training specific to their areas on as needed.

X. Enforcement

Employees and students who refuse to comply with the policies in this Response Plan are subject to disciplinary action, in accordance with the applicable handbook policy. Managers may consult with Human Resources for additional information.

If an employee or student indicates compliance is not possible due to medical reasons, the individual must be referred to the appropriate University office to request accommodations (Human Resources for employees; Accessibility & Disability Resource Center for students).

Vendors, visitors, volunteers, and patients who refuse to comply with this Response Plan are subject to having their access to campus suspended or terminated.