Section I – Introduction

Background Information

While this concept of operations specifically references pandemic influenza,

This concept of operations is based upon the following planning assumptions:

1. During a pandemic/epidemic event there may be a significant increase in

When novel influenza A viruses are identified in people, public health actions focus on targeted monitoring and investigation. This can trigger a risk assessment of that virus with the Influenza Risk Assessment Tool (IRAT), which is used to evaluate if the virus has the potential to cause a pandemic.

2) Recognition of increased potential for ongoing transmission of a novel influenza A virus

When increasing numbers of human cases of novel influenza A illness are identified and the virus has the potential to spread from person-to-person, public health actions focus on control of the outbreak, including treatment of sick persons.

3) Initiation of a pandemic wave

A pandemic occurs when people are easily infected with a novel influenza A virus that has the ability to spread in a sustained manner from person-to-person.

4) Acceleration of a pandemic wave

The acceleration (or "speeding up") is the upward epidemiological curve as the new virus infects susceptible people. Public health actions at this time may focus on the use of appropriate non-pharmaceutical interventions in the community (e.g. school and child-care facility closures, social distancing), as well the use of medications (e.g. antivirals) and vaccines, if available. These actions combined can reduce the spread of the disease, and prevent illness or death.

5) Deceleration of a pandemic wave

The deceleration (or "slowing down") happens when pandemic influenza cases consistently decrease in the United States. Public health actions include continued vaccination, monitoring of pandemic influenza A virus circulation and illness, and reducing the use of non-pharmaceutical interventions in the community (e.g. school closures).

6) Preparation for future pandemic waves

When pandemic influenza has subsided, public health actions include continued monitoring of pandemic influenza A virus activity and preparing for potential additional waves of infection. It is possible that a 2nd pandemic wave could have higher severity than the initial wave. An influenza pandemic is declared ended when enough data shows that the influenza virus, worldwide, is similar to a seasonal influenza virus in how it spreads and the severity of the

Section II – Strategies

Initial Strategy

Weber State University (WSU) will follow the guidance of our state and local public health agencies. If a public health agency in geographic proximity to WSU declares an interval level three, the WSU Crisis Management Team (CMT), which consists of President's Council, shall meet, review this document, and begin preliminary action planning based on the most current operations and staffing information. The CMT may also consider the implementation of infection control guidelines, social distancing tactics, or other actions at this time. WSU will confer with the Weber-Morgan Health Department (WMHD) before implementing any protective measures.

Secondary Strategy

Once WSU has been notified that a public health emergency/pandemic has been declared by WMHD or is imminent/occurring in the greater Weber County/Davis County area this plan shall be activated. Notification will most likely be made through the Emergency Management Director by the Weber Morgan Health Department Emergency Coordinator. The point of contact

Once notified, the CMT shall be activated and will be the official source of health information to WSU faculty, staff and students. Any new directives regarding changes in operations will be made by the CMT. The decision to close any WSU facilities and any changes of day-to-day work schedules will be communicated through the CMT and will be based upon direction from local public health agencies.

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• Personal protective equipment should include N-95 masks, latex gloves and alcohol based hand sanitizer.

2. Delegation of Authority

In an effort to plan and prepare for high levels of absenteeism during a pandemic the university has outlined a plan for delegation of authority. This plan also establishes a management line of succession. (A line of succession provides a list of predetermined alternates for key leadership positions in each department, division or work unit.) The university's line of succession plan considers the following:

- The personnel identified for the management line of succession should know the operations of the work unit.
- Have the ability to effectively perform his/her duties with minimal or no supervision.
- Clearly understand the scope of the powers and duties delegated to him or her.
- Clearly understand the constraints, if any, of the powers and authorities she or he will be delegated.
- The line of succession plan is updated whenever a pertinent staff change occurs.
- Communicate the names and order of succession of designated personnel to division and work unit personnel.

The management line of succession plan should clearly identify:

- The names of designated personnel
- Their title(s); and how they can be contacted (phone, work cell-phone, pager, and/or email)
- In the event no personnel identified for the line of succession are available, the department should have an alternate line of succession plan that identifies other personnel who can assume the powers and duties outside of the work unit
- Departments should determine if those in the line of succession may need to be cross-trained in other areas in advance and provide such training where needed
- Departments should construct a method by which those in the line of succession will have access to information and needed items (*i.e.* computer access, calendars for employee approved time off, office keys, file cabinet keys etc.)

3. Communication/Messaging Plans co c(n)2 pD (n a)4 l}-2pDgc2 h)/P AMCB1c/c 1.6 0 Td(o)1.9)2.1 3.

H/RL will educate students through educational kits, posted information, and updates through Resident Assistants, floor meetings, etc.

Operational Information:

- H/RL has created a quarantine/isolation area in Stewart Wasatch Hall
 - o Broken up into suites (45 rooms 1st floor, 30 rooms 2nd floor, 30 rooms 3rd floor)
 - o Most students would go home
 - o Estimated number of students to be housed in a sick environment is just 10-20
- Ill students will be made aware of the isolation area by the WSU physician and/or nurse practitioner and their opportunity to use it
- Student meals will be delivered to the rooms of sick students by Sodexo personnel; students with meal money will pay as they go, others would be paid by another source of funds
- Common restrooms will be cleaned by Residence Life custodial personnel, who will be supplied with the necessary cleaning supplies
- Students will be asked to bag their garbage according to CDC guidelines and disposed of properly by custodians, with the assistance of Facilities Management
- Mechanical systems (air flow protocols) are sufficient for housing both sick and well students. Appropriate filters will need to be added
- Isolation zone will not be "enforced" by full time staff, but student communications will be regular
- A buddy system will be put in place where RAs serve as buddies to any isolated residents. The WSU physician has developed a checklist based on CDC guidelines that has been turned into a

COVID-19 (Novel Coronavirus) Specific Guidelines

This CDC guidance is based on what is currently known about the epidemiology of COVID-19 and the transmission of other viral respiratory diseases.

Coronaviruses are a large family of viruses, some causing illness in people and others that circulate among animals, including camels, cats, and bats. Rarely, animal coronaviruses can infect people exposed to infected animals, and then spread among people, as has been seen with MERS-CoV and SARS-CoV, and likely now with SARS-CoV-2, the virus that causes COVID-19. This interim guidance may help prevent this virus from spreading among people at Weber State University.

How it is Spread

COVID-19 is thought to spread mainly from person-to-person between people who are in close contact with one another (within about 6 feet) through respiratory droplets produced when an infected person coughs or sneezes.

It may 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 eyes, but this is not thought to be the main way the virus spreads.

People are thought to be most contagious when they are most symptomatic (the sickest). Some spread might be possible before people show symptoms but this is not thought to be the main way the virus spreads.

Symptoms

Patients with COVID-19 have experienced mild to severe respiratory illness. Symptoms, which may appear 2-14 days after exposure, can include fever, cough and/or shortness of breath

If You are Sick

Students or employees who have symptoms of acute respiratory illness are recommended to stay home and not come to work until they are free of fever (100.4° F [37.8° C] or greater using an oral thermometer), signs of a fever, and any other symptoms for at least 24 hours, without the use of fever-reducing or other symptom-altering medicines (e.g. cough suppressants). Employees should notify their supervisor and stay home if they are sick.

WSU should not require a healthcare provider's note for students or employees who are sick with acute respiratory illness to validate their illness or to return to class/work, as healthcare provider offices and medical facilities may be extremely busy and not able to provide such documentation in a timely way.

If you have a medical appointment, call the healthcare provider and tell them that you have or may have COVID-19. This will help the healthcare provider's office take steps to keep other people from getting infected or exposed.

Patients with confirmed COVID-19 should remain under home isolation precautions until the

this definition sick leave may be used. Employees may use vacation if they do not have sufficient accrued sick leave or leave without pay if they do not have sufficient leave of either type, as allowed by PPM 3-29a, or PPM 3-21a.

Please encourage faculty or staff who are ill with pandemic influenza to stay home.

Q: Is WSU required by law to provide paid sick leave to faculty or staff who are out of