Deans and vice presidents are responsible for reviewing and distributing this Plan in their areas and for implementing the necessary steps for compliance within their areas.¹

Revised 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. This Plan applies to all OUHSC employees and students,² which includes residents and trainees and, for purposes of this Plan, volunteers. It includes the following sections:

I. Telecommuting in Response to COVID-19
II. Events, Eating Spaces, 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

I. Telecommuting in Response to COVID-19

1. With the wide availability of COVID-19 vaccines and the demonstrated effectiveness of other COVID-19 mitigation protocols on and off campus, in conjunction with the recommendations of infectious diseases and public health officials, telecommuting in HSC-based programs in response to COVID was discontinued as of August 1, 2021. However, each area must be prepared to fully return to telecommuting as soon as possible, if the University deems it necessary based on COVID-related data.

A. Telecommuting for Non-COVID Reasons - Telecommuting for purposes unrelated to COVID-19 that is otherwise consistent with the University’s guidelines is not affected by this policy. The current Remote Work guidelines are available here. Telecommuting as a reasonable accommodation for individuals with a disability must be coordinated with Human Resources (for employees) or the Accessibility and Disability Resource Center (for students).

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. Revised 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).
II. **Events, Eating Spaces, Social Distancing, and Masking**

A. **Events and social gatherings** may resume on campus in accordance with all pre-COVID policies and in accordance with current CDC guidance, with the exception of indoor eating.

    a. **Indoor Eating**.
        i. Meetings - Food at indoor meetings should be served in designated eating spaces that are socially distanced or provided to-go as individuals leave the meeting space.
        ii. Events - Food may not be served at indoor events, such as receptions, parties, and recognition ceremonies but may be provided as a to-go option.

    b. **Outdoor Eating** – Food may be consumed outdoors and at outdoor events; social distancing while eating is strongly encouraged.

For information about designated eating spaces in a particular building, individuals may contact the building coordinator or manager of the office where the space is located.

B. **Masking protocols:**

    Masks must be surgical style. Scarves, gaiters, and bandanas are not acceptable. Masks with vents may not be worn, unless a surgical style mask is worn over the vented mask. Masks must cover the nose and mouth.

    **General Facilities** – The University expects masking by all individuals when inside general facilities, including OU’s academic, athletic, housing, and administrative facilities.

    **Health Care Facilities** – OU continues to require masking for all individuals in patient-facing settings, including in clinics, in clinical research participant and simulated patient areas, and in facilities and areas where patient care is the primary function, as determined by the dean or vice president for the facility or area.

    **Transportation** – Riders on University-provided transportation, such as transit buses and shuttles, must wear masks, in compliance with Department of Transportation mandates.

    **Classrooms** - Masking is required in classrooms located in patient care areas and in facilities where the primary function is patient care. Masking is expected in all other classrooms as well.

    **Positive Cases in the Classroom** - Faculty who become aware that a student who has been attending class in a non-patient care area has tested positive for COVID-19 two days before or after the last class meeting will:

        a. Continue holding in-person classes and

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3 *For purposes of this policy, “patients” include clinic and hospital patients, mental health and allied health clients, human research participants in clinical protocols, simulated patients, and parents/guardians of patients who cannot give legal consent.

“Patient-facing responsibilities” include activities that are anticipated to necessitate direct contact or close physical proximity to a patient, as determined by each area’s manager.

4 It is presumed that students attending class in patient care areas/facilities where patient care is the primary function are already masking in accordance with this Response Plan.
b. **Require** all students in the class to wear masks for two weeks from the date of the positive student’s last attendance.

The student who tested positive will observe the quarantine period established by Student & Employee Health.

**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, the individual should 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. If a patient states compliance is not possible due to medical reasons, contact the clinic manager for direction.
3. Masks should NOT be worn by children under the age of 2 or anyone who has trouble breathing, is unconscious, incapacitated, or otherwise unable to remove the mask without assistance, per the CDC.

D. **Signage** - University Operations will place signs in common areas that address the requirements in Sections III, IV, and V, as appropriate. Departments and areas can obtain additional copies of these signs from University 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.

   1. Employees - Masks for employees outside of clinical areas may be obtained from the central mask inventory. Managers should complete this [form](#) to obtain surgical-style masks for their employees. Masks for employees within clinical areas will be obtained through the normal clinic supply chain.
   2. Students - Masks for students who are on campus may be obtained from the HSC Student Affairs or OU-Tulsa Student Affairs offices. Masks for students in Lawton, Weatherford, Ardmore, and Bartlesville may be obtained from the program coordinators. Students in off-campus rotations who need masks should contact HSC Student Affairs or OU-Tulsa Student Affairs, as applicable.

B. **Masks for Patients and Guests** – When possible, patients should be asked to wear their own mask to their appointments and to advise their guests to do the same. If sufficient supply is available, the University clinics will make surgical-style masks available to patients and their guests who do not bring their own approved masks.

C. **Masks for Vendors and Others in Patient-Facing Areas/Buildings** - Departments should advise their visitors, vendors, and service providers that they are expected to provide their own masks when in
patient-facing areas and in buildings where the primary function is patient care. Staff may provide
masks if sufficient supply is 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. Department/Area Responsibility – As was the case prior to COVID-19, each department/area
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 what, if any, interim disinfecting is
appropriate. The supervisor should follow any 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 was the case prior to COVID-19, individuals are responsible for
cleaning their personal and shared spaces and office equipment.

V. Testing, Isolation, and Contact Tracing

A. Positive COVID-19 Tests - If an employee or student tests positive for COVID-19, they and the
University will cooperate with the appropriate health department in its contact tracing efforts.

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 https://covidreporting.ouhsc.edu/ 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 in certain University settings, 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 this 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.

A. Mandatory Vaccine: Effective June 1, 2021, the following individuals (current and newly hired) are required to submit a completed COVID-19 Vaccine Documentation Form and proof of vaccine:

1. 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.

2. Individuals who will observe, shadow, or volunteer in an area where patients are reasonably expected to be.

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. Documentation:

1. At a minimum, vaccine documentation must include the recipient's first and last name, recipient’s date of birth, vaccine manufacturer, date(s) for each dose, and healthcare professional or facility that administered each dose.

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

   a. 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. Vaccine is available at no cost in various locations on the Health Sciences Center campus, including Student and Employee Health (405-271-9675), OU Children’s Pharmacy, Sooner Pediatrics (405) 271-6827, and Family Medicine (405) 271-4311, as well as in the

5 https://osiis.health.ok.gov/osiis_public/LoginPublicPortal.aspx
community.\textsuperscript{6} OU-Tulsa students and employees may schedule a vaccine in the Internal Medicine clinic at covidvaccine.ou.edu/tulsainternalmedicine or check their local health department website.

D. Vaccine Completion Dates: During the implementation phase, current faculty, staff and students who had not yet completed a \textbf{World Health Organization (WHO) approved} COVID-19 vaccine series had until June 30, 2021, to complete at least the first dose of or submit the declination form.

1. Current faculty, staff, and students who had completed only the first dose of a 2-dose WHO-approved vaccine series as of June 30 had until July 31, 2021, to complete the series and provide documentation via the COVID-19 Vaccine Documentation Form. As of August 1, a completed COVID-19 Vaccine Documentation Form must be on file for all individuals described in Paragraph A 1-3 above.

2. Faculty, staff, and students who are hired or begin classes after June 1 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, volunteers) or of the first day of classes (students) and must complete the series no later than 60 days from then. 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 facility where the individual will perform academic or employment responsibilities. Process and forms are available here:

Employees and student employees: \url{https://apps.hr.ou.edu/DMS/documents/files/COVID-19_Declination_Form/COVID_Declination_06012021.pdf}

Students: \url{https://students.ouhsc.edu/Current-Students/Student-Wellbeing/Health-Clinic/required-immunizations}

F. Vaccine FAQs: FAQs regarding vaccine requirements will be posted on the OUHSC COVID-19 webpage.

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

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

\textbf{Vaccinated Person - Defined}

- 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
- A person who completed a one-dose WHO-approved COVID-19 vaccine series at least 14 days ago

\textbf{Unvaccinated Person - Defined}

- A person who has not received any Organization (WHO)-approved COVID-19 vaccine doses.

\textsuperscript{6} See, for example, vaxokc.com.
• A person who has received only one dose of a two-dose WHO-approved COVID-19 vaccine series.
• 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.
• A person who is not at least 14 days past receipt of a one-dose WHO-approved COVID-19 vaccine series.
• A person who has completed a non WHO-approved COVID-19 vaccine series.

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:
• You have symptoms that are consistent with COVID-19. For a list of symptoms, click here.
• You have tested positive for COVID-19 within the past 14 days or are awaiting COVID-19 test results from a facility outside of OUHSC.
• You have been in close contact within the past 14 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:
• You have symptoms that are consistent with COVID-19. For a list of symptoms, click here.
• You have tested positive for COVID-19 within the past 14 days or are awaiting COVID-19 test results from a facility outside of OU Health.
• You have been in close contact within the past 14 days with someone who is COVID-19 positive or who is awaiting COVID-19 results.
• You have a household member who has tested positive for COVID-19 in the past 14 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 provide 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.

Individuals who believe domestic or international travel is mission critical must contact their dean/vice president, 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.
institutions, and make a written recommendation to the Senior Vice President and Provost for approval.

C. FAQs on domestic and international travel are available here.

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 - Each college, clinic, and department will ensure its employees and students also receive COVID-19 training specific to their areas on as needed.

X. Enforcement

Employees and students who refuse to comply with this Response Plan are subject to disciplinary action, in accordance with the applicable faculty, staff, or student 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 should 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).

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