OU-Tulsa COVID-19 Response Plan

Effective and Approved May 6, 2020 from Combined Norman and Oklahoma City Guidance

Last Updated and Approved on June 7, 2021

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

Revised versions of this Plan will be distributed to appropriate campus groups and posted on the OU-Tulsa COVID-19 Updates and Resources page (http://ou.edu/tulsa/coronavirus) and is also accessible from the OU-Tulsa home page. This Plan applies to all Tulsa-based OU and OUHSC students and employees. For the purpose of this plan, “employees” includes Residents, Fellows, trainees, and volunteers. The plan includes the following sections:

I. Telecommuting in response to COVID-19: Phase Out
II. Reopening Buildings, Common Areas, Resuming Services
III. Events, Social Distancing and Gatherings
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 and Employees
VIII. Travel
IX. Training
X. Enforcement

I. Telecommuting in response to COVID-19: Phase Out

OU-Tulsa has encouraged telecommuting where possible since early 2020 as a mitigation strategy to minimize the risk of spread of COVID-19. 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 OU-Tulsa based programs and areas will be phased out as described below.

There are differences between our HSC programs and Norman programs in terms of return to work processes and timelines, but the basic guidance for each is outlined below.

A. Health Sciences Center Programs/Employees — Telecommuting arrangements that were put into place as a COVID-19 mitigation or accommodation measure are to be phased out as follows:

1. Telecommuting Phase-Out Schedule (HSC programs)
   a. By June 2, 2021, at least 50% of the program’s/area’s workforce will have resumed their regular (pre-COVID) schedule on campus.
   b. By July 1, 2021, at least 75% of the program’s/area’s workforce will have resumed their regular (pre-COVID) schedule on campus.
   c. By August 1, 2021, 100% of the program’s/area’s workforce will have resumed their regular (pre-COVID) schedule on campus.
B. **Guidelines - 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 telecommuting phase-out schedule. The current 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).

C. **Staffing Plans** – During the telecommuting phase-out period, each college dean and area vice president (or their designees) will determine the telecommuting phase-in plan for their respective areas and will advise employees of their date of expected return from telecommuting, generally at least two work weeks prior, but not less than one work week prior, to that date.

d. **COVID-19 Resurgence** - Each area must be prepared to slow or stop the telecommuting phase-out and/or to fully return to telecommuting as soon as possible, if the University deems it necessary.

e. **Screening** – Employees returning from a telecommuting period who meet any of the instances described in Section VIII below must complete the online COVID-19 Screening and Reporting Tool [https://covidreporting.ouhsc.edu/](https://covidreporting.ouhsc.edu/) and email the results to their immediate supervisor prior to returning to campus.

D. **Norman-based Programs/Employees** - All Norman-based employees are expected to return to working their full schedule on campus by August 2, 2021.

   1. Managers may notify employees to begin returning to their campus workspaces between June 7 and Aug. 2, if they have not already done so.

   2. The Executive Policy Group will conduct status checks for this return to campus fully in-person work plan on June 21 and July 19. Any changes to the current plan will be communicated by July 23.

   3. Any faculty or staff who had existing telecommuting agreements on file PRIOR to the onset of the pandemic will need to complete a new Remote Work Plan and receive requisite approvals on the date their existing telecommuting agreement expires. Remote Work Plans must be submitted to HR for review.

II. **Reopening Buildings, Common Areas, Resuming Services**

OU-Tulsa facilities are open and accessible on the pre-COVID schedule. Common areas and services that have been closed or had substantially reduced operations as a result of COVID-19, such as the fitness center and eating areas, may reopen/resume full services without further action. Masking remains required as described in Section III below, in patient care areas.

III. **Events, Social Distancing and Gatherings**

A. Events and social gatherings may resume on campus in accordance with all pre-COVID policies and in accordance with current CDC guidance. Provided, however, that in-person on-campus summer camps and in-person on-campus summer internships in patient care areas, may not resume until August 1, 2021.

B. **Masking protocols:**
a. **General Facilities** – The University strongly recommends masking for all unvaccinated individuals when inside general facilities, including OU-Tulsa’s academic and administrative facilities.

C. **Health Care Facilities** – OU continues to require masking for all individuals in patient-facing settings, including in clinical research participant areas and in facilities and areas where patient care is the primary function. 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 (within 6 feet for 15 minutes) to a patient.

D. **Disability Accommodation:**
   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.

E. **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.

F. **Third Party Events** – Events unaffiliated with the University are allowed to be booked and hosted on campus. Contact LaDeana Bolton for more information.

**Obtaining Masks**

A. **Masks for Students and Employees** - The University will make masks available to employees and students appropriate to their on-campus, non-clinical responsibilities.
   1. **Employees** - Masks for employees outside of clinical areas may be obtained from the central inventory. Managers should complete this form to obtain surgical-style masks for their employees; managers should select “OU-Tulsa” as the campus location within the online form. Masks for employees within clinical areas should be obtained through the normal clinic supply chain.
   2. **Students** - Masks for students who are on campus may be obtained from OU-Tulsa Student Affairs during normal operating hours. Students in off-campus rotations who need masks should contact 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 Contract Workers, Vendors and Visitors** - Departments should advise their visitors, vendors, and service providers that they are expected to provide their own masks when on campus. 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 its shared office equipment, furniture, surfaces, and environment (to include non-centrally-scheduled conference rooms).

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 the OU-Tulsa Operations Department at 918-660-3555 to confirm when disinfecting the space last occurred. If the positive individual has been in the space since it was last disinfected, the OU-Tulsa Operations Department will, in consultation with EHSO, assess what, if any, interim disinfecting is appropriate. The supervisor should close off affected areas and/or open outside doors and windows, if instructed by the OU-Tulsa Operations Department/EHSO 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 Tests** - If an employee or student tests positive for COVID-19, the University will cooperate with the appropriate health department in its contact tracing efforts.

1. All employees and students who test positive must obtain clearance from the OU-Tulsa Student & Employee Health Clinic via the Online COVID-19 Screening and Reporting Tool before returning to on-campus University responsibilities. Clearance may require proof of a negative COVID-19 test. **PLEASE NOTE**: At this time, 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, but 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 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 will be updated as appropriate, based on guidance from public health agencies and officials.

A. Mandatory Vaccine: Effective June 1, 2021, the following individuals are required to submit a completed COVID-19 Vaccine Documentation Form:

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 (6 feet for 15 minutes) to a patient. Supervisors are responsible for determining whether the individuals in their area are patient-facing.

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 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 and booster. Student and Employee Health (918-660-3102) 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. OU-Tulsa students and employees may schedule a vaccine in the

1 https://osiis.health.ok.gov/osiis_public/LoginPublicPortal.aspx
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 have not yet completed a World Health Organization (WHO) approved COVID-19 vaccine series have until June 30, 2021, to complete at least the first dose of or submit the declination form.

1. Current faculty, staff, and students who have completed only the first dose of a 2-dose WHO-approved vaccine series as of June 30 have 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 does 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. Reasons for declining include medical condition and non-medical bases. Process and forms are available here:

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

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:

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

Unvaccinated Person - Defined

- A person who has not received any Organization (WHO)-approved COVID-19 vaccine doses.
- 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 in the past 14 days or are awaiting COVID-19 test results from a facility outside of OUHSC.

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. “Close contact” is defined as being within 6 feet of that person for approximately 15 minutes or more.
- You have a household member who has tested positive for COVID-19 in the past 14 days.
- You have returned to the United States following international travel.
- You have returned from a domestic or international cruise.

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.

B. University Domestic and International Travel - Domestic and international air travel by OU-Tulsa 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.

C. 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, State Department/CDC travel advisories for the
destination(s), impact on competitive advantage, and actions of peer institutions, and make a written recommendation to the Senior Vice President and Provost for Norman or Health Science Center campuses and the OU-Tulsa President for approval.

D. Frequently Asked Questions - FAQs on domestic and international are available on the OUHSC website, linked 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 as needed.

X. Enforcement
Employees and students who refuse to comply with this Return 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 or the Accessibility & Disability Resource Center for students).

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