# TABLE OF CONTENTS

CSU PANDEMIC INFLUENZA RESPONSE PLAN ........................................ 4

FOREWORD .................................................................................................. 4
OVERVIEW ................................................................................................. 4

ESTABLISHMENT OF THE PANDEMIC INFLUENZA COMMITTEE .......... 5
DEFINITIONS ............................................................................................ 6

STAGE I – PREPLANNING AND PREPARATION ..................................... 7

ASSUMPTIONS .......................................................................................... 7
NATIONAL ASSUMPTIONS ....................................................................... 7
UNIVERSITY ASSUMPTIONS .................................................................... 9
CSU EVENT LEVELS – WHO PHASES ......................................................... 10
PLAN OBJECTIVES .................................................................................. 12
COMMAND STRUCTURE ........................................................................ 12

APPOINTMENT OF OPERATIONAL COMMANDERS ............................... 12
DIRECTOR OF STUDENT HEALTH SERVICES .......................................... 12
ASSISTANT VICE PRESIDENT FOR UNIVERSITY RELATIONS ............ 13
CHIEF OF UNIVERSITY POLICE ............................................................. 14

UNIVERSITY POLICIES FOR DEALING WITH THE PANDEMIC .......... 14
CAMPUS ACCESS RESTRICTIONS ............................................................ 14
EXCUSED ABSENCES ............................................................................. 14
RETURN TO WORK POLICY ..................................................................... 15
CAMPUS CLOSING ................................................................................... 15
CRITICAL STAFF ..................................................................................... 16
REASSIGNMENT ....................................................................................... 16
MEDIA CONTACT ...................................................................................... 16
TRAVEL ....................................................................................................... 16

ADDITIONAL CONCERNS ..................................................................... 17

UNIVERSITY COMMUNITY PANDEMIC FLU EDUCATION ..................... 17
DEPARTMENT PANDEMIC FLU EDUCATION .......................................... 17
SUPPLIES – PURCHASE AND POSITION ............................................. 17
SURGICAL FIT TESTING .......................................................................... 17
<table>
<thead>
<tr>
<th>STAGE II - OPERATIONAL</th>
<th>19</th>
</tr>
</thead>
<tbody>
<tr>
<td>COMMAND CENTER ACTIVATION</td>
<td>19</td>
</tr>
<tr>
<td>UNIVERSITY INFORMATION EXCHANGE MEETINGS</td>
<td>20</td>
</tr>
<tr>
<td>IMPLEMENT UNIVERSITY COMMUNICATION PLAN</td>
<td>20</td>
</tr>
<tr>
<td>CAMPUS MONITORING</td>
<td>21</td>
</tr>
<tr>
<td>ATTENDANCE POLICY</td>
<td>21</td>
</tr>
<tr>
<td>SOCIAL DISTANCING – EVENT/CLASS CANCELLATION</td>
<td>21</td>
</tr>
<tr>
<td>STUDENT HEALTH CENTERS – 24 HOUR OPERATION</td>
<td>22</td>
</tr>
<tr>
<td>SITE SECURITY / ACCESS RESTRICTED</td>
<td>23</td>
</tr>
<tr>
<td>TRANSPORT / PATIENTS &amp; MEDICATIONS</td>
<td>23</td>
</tr>
<tr>
<td>CUSTODIAL SERVICES</td>
<td>24</td>
</tr>
<tr>
<td>PARENTAL NOTIFICATION</td>
<td>24</td>
</tr>
<tr>
<td>DEATHS</td>
<td>24</td>
</tr>
<tr>
<td>FOOD SERVICE</td>
<td>25</td>
</tr>
<tr>
<td>COUNSELING</td>
<td>27</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>STAGE III – REMEDIATION AND DEBRIEFING</th>
<th>28</th>
</tr>
</thead>
<tbody>
<tr>
<td>CLEANING</td>
<td>28</td>
</tr>
<tr>
<td>COUNSELING</td>
<td>28</td>
</tr>
<tr>
<td>AUDIT</td>
<td>28</td>
</tr>
<tr>
<td>DEBRIEFING</td>
<td>28</td>
</tr>
</tbody>
</table>
Columbus State University
Pandemic Influenza Response Plan

Approval Date: August 2016

Foreword

This document is part of the Columbus State University Emergency Action Plan, and should be viewed as one component of a larger, more extensive emergency response plan.

Overview

A pandemic is defined as a global disease outbreak. An influenza type pandemic occurs when a new influenza virus emerges with the following characteristics: humans have little or no immunity, the virus causes serious illness and it spreads easily from person-to-person.

The best known pandemic in recent history occurred in 1918. This pandemic was able to spread across the world in less than two months and caused more than 20 million deaths. That event happened when the fastest means of crossing between continents was by ship. With modern air travel, a pandemic could cross the world in a matter of weeks, again causing millions of deaths.

The cause for our current concern is that recently discovered strains of avian influenza show the potential to cross over into humans and create a new, deadly influenza strain, to which we have no effective treatment or vaccine.

Since December 2003, the World Health Organization (WHO) has received reports of confirmed cases of humans infected with avian influenza A (H5N1) in Asia. Although the human cases are thought to have resulted from direct exposure to infected live poultry or their contaminated environment, limited human-to-human transmission may be possible. The exposure of humans to ongoing poultry outbreaks is a grave concern. It enhances the potential for avian influenza A (H5N1) viruses to undergo genetic changes. It is also possible for the virus to recombine with human influenza viruses and result in a new virus that is easily transmitted human-to-human, thus triggering an influenza pandemic.
In 2009, a H1N1 Influenza A outbreak introduced a novel Influenza virus to the human immune system. A novel virus means that there is no immunity in the human population and it is one of the first warning signs of a pandemic influenza. In response to this new virus, Mexico closed all schools, universities, and public events between April 24 and May 6, 2009. In the United States, more than 400 schools closed for a period of time including an entire school district in the state of Texas. These numbers demonstrate that a planned response to an influenza outbreak is necessary.

The 2009 H1N1 Influenza A outbreak exposed some challenges for planning for a disease pandemic. As the 2009 outbreak began, the severity of the virus was not known. Many similarities between the 2009 and the 1918 Influenza outbreak existed causing many to fear widespread problems might occur. While the 2009 outbreak did not cause classes or events to be cancelled, it did have an effect on the CSU campus. The fear of the unknown created apprehension and caused a great deal of alarm among faculty, staff, students and parents.

The 2009 H1N1 Influenza A outbreak exposed some flaws in planning for a pandemic. Many of the triggers for response at CSU were based on phases established by the World Health Organization (WHO) and stages established by the United States federal government. The federal government stages assumed that a pandemic would begin in Asia and spread to the United States. The 2009 H1N1 Influenza A outbreak began in North America making the federal stages difficult to use. Not only were these stages difficult to use, they disappeared from the government websites without explanation. The phases created by the World Health Organization reflected the spread of the virus, but did not correspond with the impact of the virus. As the World Health Organization updated the phases of the pandemic, Columbus State University did not implement the actions outlined in the 2008 version of the CSU Pandemic Influenza Emergency Plan because the impact on the CSU campus was not significant.

It is the consensus of the public health community that another pandemic is a matter of when, not if. It has been suggested by public health professionals, based on historical data, that the age group to be most seriously effected will be in the 16 to 24 age group. Though this is not guaranteed, since this age group represents a significant portion of our student population, it is imperative we develop a procedure to assist those who become ill and to protect our personnel who will have to interact with them.

**Establishment of the Pandemic Influenza Committee**

The Columbus State University Pandemic Influenza Committee’s purpose is to provide a multi-discipline approach to dealing with the pandemic and its effect on the Institution.

The Committee is charged with response planning, recommending needed purchases, and providing information to the University community on preventing the spread of the disease. The committee will also serve as a resource to the President on all matters dealing with the pandemic.
Definitions

**Pandemic Influenza** - A virulent human flu that causes a global outbreak, or pandemic, of serious illness. Because there is little natural immunity, the disease can spread easily from person to person. Currently, there is no pandemic flu identified in the world, nor is there a vaccine available to prevent it.

**Student Health Services** – located in the Students Health Centers on the Main Campus and Riverpark campus of Columbus State University.

**Board of Regents (BOR)** – the governing body of the University System of Georgia, which has control and operational authority over Columbus State University.

**Chancellor** – Chief Executive Officer for the University System of Georgia

**University President** – Chief Executive Officer for Columbus State University

**President’s Cabinet** – Advisory Council comprised of the following:
- Provost and Vice President for Academic Affairs
- Vice President for Business and Finance
- Vice President for Student Affairs
- Vice President of Information Technology/CIO
- Dean, Turner College of Business/Bill Heard Professor of Finance
- Executive Director of Leadership Development
- Director of Human Resources
- Assistant Vice President for University Relations
- Director of Intercollegiate Athletics
- Chair, Chairs Assembly
- Executive Officer, Faculty Senate
- Chair, Graduate Council
- Chair, Staff Council
- President, Student Government Association

**Operational Commanders** – the Director of Student Health Services, Assistant Vice-President for University Relations, and Chief of the University Police.

**Protective Equipment** – items which when properly used will protect the wearer from exposure to the pandemic flu virus. Examples include the face mask (N-95), nitrile gloves, and protective glasses.

**Call Center** – phone center operated by the Columbus State University Office of University Advancement which is located in Richards Hall.
Stage I – Preplanning and Preparation

1) Assumptions

Columbus State University is taking steps to prepare and plan for the possibility of pandemic influenza emerging across the earth. As part of the planning process, the following assumptions have been used to base some of the planned actions. These are only assumptions—pandemics are unpredictable, and there is no way to know the characteristics of a pandemic virus before it emerges. The following specific assumptions have been gleaned from a variety of sources or developed from campus consensus. Many of the assumptions were taken from the US Department of Homeland Security’s National Strategy for Pandemic Influenza Implementation Plan, World Health Organization Global Influenza Preparedness Plan, US Centers for Disease Control Pandemic Preparedness Plan and the University of West Georgia’s Pandemic Plan, some verbatim.

The planning assumptions below are reasonable worst-case assumptions. It is hoped that the next pandemic is no worse than the one in 1968, which had a relatively small impact on the University. However, the plan will be most useful if we prepare for the high risk pandemic predicted by reasonable public health experts. An extreme 1918-like scenario is not considered here. So, keep in mind that these assumptions depend on the severity of the pandemic. It is hoped the assumptions are pessimistic, and feared that they are not optimistic.

a) National Assumptions (U.S. Government National Implementation Strategy Pandemic Influenza Plan)

Pandemics are unpredictable. While history offers useful benchmarks, there is no way to know the characteristics of a pandemic virus before it emerges. Nevertheless, it is necessary to make assumptions to facilitate planning efforts. Federal planning efforts assume the following:

1. Susceptibility to the pandemic influenza virus will be universal.

2. Efficient and sustained person-to-person transmission signals an imminent pandemic.

3. The clinical disease attack rate will be 30 percent in the overall population during the pandemic. Illness rates will be highest among school-aged children (about 40 percent) and decline with age. Among working adults, an average of 20 percent will become ill during a community outbreak.

4. Some persons will become infected but not develop clinically significant symptoms. Asymptomatic or minimally symptomatic individuals can transmit infection and develop immunity to subsequent infection.
5. While the number of patients seeking medical care cannot be predicted with certainty, in previous pandemics about half of those who became ill sought care. With the availability of effective antiviral medications for treatment, this proportion may be higher in the next pandemic.

6. Rates of serious illness, hospitalization, and deaths will depend on the virulence of the pandemic virus and differ by an order of magnitude between more and less severe scenarios. Risk groups for severe and fatal infection cannot be predicted with certainty but are likely to include infants, the elderly, pregnant women, and persons with chronic or immunosuppressive medical conditions.

7. Rates of absenteeism will depend on the severity of the pandemic. In a severe pandemic, absenteeism attributable to illness, the need to care for ill family members, and fear of infection may reach 40 percent during the peak weeks of a community outbreak, with lower rates of absenteeism during the weeks before and after the peak. Certain public health measures (closing schools and quarantining household contacts of infected individuals) are likely to increase rates of absenteeism.

8. The typical incubation period (interval between infection and onset of symptoms) for influenza is approximately 2 days.

9. Persons who become ill may shed (i.e. spread) virus and can transmit infection for one-half to one day before the onset of illness. Viral shedding and the risk of transmission will be greatest during the first 2 days of illness. Children will play a major role in transmission of infection as their illness rates are likely to be higher, they shed more virus over a longer period of time, and they control their secretions less well.

10. On average, infected persons will transmit infection to approximately two other people.

11. Epidemics will last 6 to 8 weeks in affected communities.

12. Multiple waves (periods during which community outbreaks occur across the country) of illness are likely to occur with each wave lasting 2 to 3 months. Historically, the largest waves have occurred in the fall and winter, but the seasonality of a pandemic cannot be predicted with certainty.
b) University Assumptions

1. The first pandemic impact on Columbus State University will most likely be to students and faculty who are studying or traveling abroad, most likely in Southeast Asia.

2. Columbus State University will assume—for planning purposes—that the wave will occur during the fall or spring semester.

3. The first outbreaks in the United States will occur in major metropolitan areas where there is a high rate of international travel. The proximity of the campus to Hartsfield/Jackson International Airport makes the possibility of the campus being exposed to the pandemic in its early stages more likely.

4. The greatest threat to Columbus State University is an easily transmissible virus with 1,500 students living in residence halls in close proximity.

5. If a severe outbreak were to occur, Columbus State University would expect to suspend classes for 7 to 10 weeks.

6. Because of travel restrictions, financial restrictions, local employment commitments, apartment and house leases, etc., not all students will leave the campus or community.

7. Projections are that 1,500 students will remain in residence halls and in the Columbus community.
   - 500 students in residence halls
   - 1,000 students in off-campus housing: apartments, houses etc.

8. Projections of morbidity, outpatient visits, hospitalizations, and mortality on the campus community are charted below. The range represents a 25% rate (1968 pandemic) to a 35% rate (1918 pandemic).

<table>
<thead>
<tr>
<th></th>
<th>ALL STUDENTS</th>
<th>RESIDENCE HALLS</th>
<th>FACULTY/STAFF</th>
</tr>
</thead>
<tbody>
<tr>
<td>POPULATION</td>
<td>8,500</td>
<td>1,500</td>
<td>900</td>
</tr>
<tr>
<td>0 to 18 years old</td>
<td>1,000</td>
<td>750</td>
<td>0</td>
</tr>
<tr>
<td>19 to 64 years old</td>
<td>7,500</td>
<td>750</td>
<td>850</td>
</tr>
<tr>
<td>65 + years old</td>
<td>0</td>
<td>0</td>
<td>50</td>
</tr>
<tr>
<td>OUTPATIENT VISITS</td>
<td>1112 to 1557</td>
<td>207 to 290</td>
<td>115 to 162</td>
</tr>
<tr>
<td>HOSPITALIZATIONS</td>
<td>23 to 33</td>
<td>2 to 3</td>
<td>3 to 5</td>
</tr>
<tr>
<td>DEATHS</td>
<td>4 to 5</td>
<td>1</td>
<td>1</td>
</tr>
</tbody>
</table>

*Source: Center for Disease Control FluAid Model 2.0*
9. The Columbus State University Student Health Centers on Main Campus and the Riverpark Campus are designated as the University Flu Centers. The Centers are assigned the responsibility of providing treatment to all students as well as faculty, staff and their dependents. Even if classes are canceled, the Health Centers will remain open to provide treatment to those students who remain in the area, as well as the faculty, staff and dependents.

c) Columbus State University Event Levels - World Health Organization Phases

The following diagram indicates the University’s Emergency Event Levels, with Event Level Three the highest event level in the emergency management system. Columbus State University (CSU) levels correspond with the World Health Organization (WHO) Phases.

<table>
<thead>
<tr>
<th>CSU Event Level Zero</th>
<th>WHO Phase Three</th>
<th>CSU Actions</th>
</tr>
</thead>
<tbody>
<tr>
<td>• No current hazards to persons</td>
<td>• Human infections with a new subtype, but no sustained human-to-human spread</td>
<td>• Pre-event assessment and planning</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CSU Event Level One</th>
<th>WHO Phase Four</th>
<th>CSU Actions</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Minimal hazard to students, faculty and staff</td>
<td>• Small highly localized clusters anywhere in the world with limited human-to-human transmission</td>
<td>• Intense planning and preparation</td>
</tr>
<tr>
<td>• Can be resolved with minimal outside agency assistance</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CSU Event Level Two</th>
<th>WHO Phase Five</th>
<th>CSU Actions</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Endangers students, faculty and staff</td>
<td>• Large clusters but still localized</td>
<td>• Activation of Emergency Operations Team</td>
</tr>
<tr>
<td>• Requires coordination with outside agencies</td>
<td></td>
<td>• Preparing to suspend classes</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CSU Event Level Three</th>
<th>WHO Phase Six</th>
<th>CSU Actions</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Significant risk to students, faculty and staff</td>
<td>• Increased and sustained transmission in the general population</td>
<td>• Emergency Action Plan operating</td>
</tr>
<tr>
<td>• Requires substantial coordination with outside agencies</td>
<td></td>
<td>• Suspension of classes for period of 4 to 8 weeks</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Possible closure of the University</td>
</tr>
<tr>
<td>PHASE</td>
<td>DESCRIPTION</td>
<td>PLANNING AND COORDINATION</td>
</tr>
<tr>
<td>-------------</td>
<td>-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
<td>---------------------------</td>
</tr>
<tr>
<td>PHASE 1</td>
<td>No animal influenza virus circulating among animals have been reported to cause infection in humans.</td>
<td></td>
</tr>
<tr>
<td>PHASE 2</td>
<td>An animal influenza virus circulating in domesticated or wild animals is known to have caused infection in humans and is therefore considered a specific potential pandemic threat.</td>
<td>Develop, exercise, and periodically review national influenza pandemic preparedness and response plans.</td>
</tr>
<tr>
<td>PHASE 3</td>
<td>An animal or human-animal influenza reassortant virus has caused sporadic cases or small clusters of disease in people, but has not resulted in human-to-human transmission sufficient to sustain community-level outbreaks.</td>
<td></td>
</tr>
<tr>
<td>PHASE 4</td>
<td>Human to human transmission of an animal or human-animal influenza reassortant virus able to sustain community-level outbreaks has been verified.</td>
<td>Direct and coordinate rapid pandemic containment activities in collaboration with WHO to limit or delay the spread of infection.</td>
</tr>
<tr>
<td>PHASE 5</td>
<td>The same identified virus has caused sustained community-level outbreaks in two or more countries in one WHO region.</td>
<td>Provide leadership and coordination to multilateral resources to mitigate the societal and economic impacts.</td>
</tr>
<tr>
<td>PHASE 6</td>
<td>In addition to the criteria defined in Phase 5, the same virus has caused sustained community-level outbreaks in at least one other country in another WHO region.</td>
<td></td>
</tr>
<tr>
<td>POST PEAK</td>
<td>Levels of pandemic influenza in most countries with adequate surveillance have dropped below peak levels.</td>
<td>Plan and coordinate for additional resources and capacities during possible future waves.</td>
</tr>
<tr>
<td>POST PANDEMIC</td>
<td>Levels of influenza activity have returned to the levels seen for seasonal influenza in most countries with adequate surveillance.</td>
<td>Review lessons learned and share experiences with the international community.</td>
</tr>
</tbody>
</table>
d) Plan Objectives

1. Reduce risk of pandemic influenza to students, faculty and staff.
2. Reduce the rate of illness and loss of life.
3. Provide information and family emergency planning assistance to students, faculty and staff to minimize mental and emotional stress.
4. Support remaining students on campus in the event of suspension of classes.
5. Support Columbus State University Student Health Services.
6. Minimize the impact of ill students on the Columbus State University Student Health Centers.
7. Sustain some level of academic research, particularly critical research.
8. Minimize instructional and academic credit loss.
9. Maintain essential functions in the event the University closes.
10. Reduce the risk of damage to critical infrastructure.
11. Minimize financial loss to the University.
12. Minimize the economic impact on the community and state.

2) Command Structure

The President of the University is in overall command for dealing with the crisis. In the event that the President is away, the standard line of succession will be followed.

The President’s Cabinet will provide counsel to the President and direction for their respective areas as required.

3) Appointment of Operational Commanders

Operational Command for dealing with the crisis will be divided among the following Directors who will act as Operational Commanders.

a) Director of Student Health Services will possess operational authority for dealing with all medical issues related to the pandemic. This includes but is not limited to:

1. Providing medical counsel to the President on all matters dealing with the pandemic.
2. Monitoring of the illness on campus and advising the President of the current effect of the disease on the campus population.
3. Provide patient treatment and patient support
4. As needed, facilitate establishing and staffing a Call Center where individuals can
be screened and treated remotely rather than having them come to the Student Health Centers.

5. Coordinating on medical matters with local medical and public health agencies.
6. Communicating with the Assistant Vice President for University Relations in providing relevant information concerning the current status of the pandemic and its effect on the campus population.

b) The Assistant Vice President for University Relations will coordinate the dissemination of all information dealing with the pandemic. This includes but is not limited to:

1. Providing counsel to the President on all matters dealing with the media.
2. Communicating an education campaign prior to the onset of the pandemic to inform the University community about the pandemic, what it is and methods to protect themselves and their families.
3. Identify a Communications Center where the campus community can obtain information about the pandemic, its effects on the campus and our student population and other information as needed. Staff the center until the pandemic subsides. When the Center is closed for the night, the lines will be transferred to the University Police Dispatch Office. Publish all phone numbers and web sites where information can be obtained.
4. Identify and plan for the proper use of Campus media resources that can be used to provide current information to the staff, students, and parents in a timely manner. These include but are not limited to:
   a. University Radio - WCUG
   b. Student/Faculty/Staff e-mail
   c. Social Media
   d. University Web Page
   e. The Sabre
   f. CougarAlert

5. Identify and plan for the proper use of off-campus media resources that can be used to provide current information to the staff, students, parents and community in a timely manner. These include but are not limited to local television / radio stations and newspapers.

6. Identify a location for press conferences and other events dealing with the pandemic. When choosing a site, consideration should be given to the availability of parking for the media, availability of a/v equipment, and sufficient space so as to lessen the possibility of spreading the disease. The Assistant Vice President for University Relations will conduct press conferences on a regular basis to keep the public informed as to the status of the pandemic on campus.
c) **Chief of University Police** will be responsible for coordinating resources in support of the medical and communication segments of this plan. This includes but is not limited to:

1. Providing counsel to the President on all matters dealing with the Public Safety.
2. Maintaining security at the Student Health Centers and around campus.
3. Coordinating the supply of personnel and supplies to the Student Health Centers as requested by the Director of Student Health Services.
4. Coordinating the transport of patients to and from the Student Health Centers and/or local hospitals.
5. Coordinating with County and State officials in matters dealing with the pandemic. These agencies would include but are not limited to the Columbus, GA Office of Homeland Security, County Coroner, Public Health and Midtown Medical Center.
6. Monitor the World Health Organization’s Pandemic Alert Status and notify the President’s Cabinet and Pandemic Influenza Committee of any change.

4) **University Policies for Dealing with the Pandemic**

In the event that the pandemic results in the absence of 15% of the student body, faculty and/or staff, the President will declare that a pandemic emergency exists on campus. Once this declaration is made, the following policies will be put into effect. These policies will remain in force until campus absenteeism drops below the 15% level and the President rescinds the emergency declaration.

a) **Campus Access Restrictions**

Any individual who is displaying symptoms of the flu is not to come to work or class until he/she is no longer contagious. This is normally from 7 to 10 days. Anyone who comes to work or class while in a contagious state will be ordered to leave. Failure to do so will result in a criminal trespass warning being issued by the University Police as well as disciplinary action within existing University policy.

b) **Excused Absences**

Once a pandemic emergency declaration is made, the number of classes which a student is allowed to miss during a semester will be unlimited. The student will consult the instructor and develop a work-plan to complete all missed classes and assignments. Students failing to provide the required work will be given an *Incomplete* in accordance with established University policy.
c) Return To Work Policy

No employee will be allowed to return to work until they are no longer contagious. Student Health Services must clear any employee who has had the pandemic flu prior to returning to their work site. Employees affected by the pandemic will be charged leave in accordance with the policy established by the Board of Regents.

d) Campus Closing

It is probable that the pandemic will become so significant that it is necessary to suspend classes and/or close the campus completely. The Board of Regents may choose to close all institutions simultaneously or provide each President with the authority to do so as his/her campus becomes affected.

If the authority is given to the President, the decision to suspend or close will be made based on information received from various entities/individuals including: university personnel with expertise in the field, county, state and national authorities, and other advisories gathered during the pandemic.

The following decision points are provided as a guide in the decision-making process and may not be the only considerations. As the pandemic unfolds, new information may provide alternative choices.

**Decision Points**

- Transmissibility
- Morbidity
- Mortality
- Geographic spread
- Proximity of confirmed cases
- Muscogee County Health Department recommendations
- Closing of K-12 public schools
- Falling class attendance
- Rising employee absenteeism
- Assessment of stake holders’ risk perception

In the event the campus is closed, certain staff will be required to come to work on a limited basis. (See Critical Staff Policy)

Issues concerning pay, sick leave use and other matters will be decided by the Board of Regents and disseminated to the campuses.
e) Critical Staff

Critical staff are all employees whose positions are needed to maintain services to those stricken by the pandemic. These positions include:

- Student Health Services
- University Police Officers & Dispatchers
- Human Resources
- Custodial
- Student Development Counselors
- Maintenance
- ARAMARK
- Residence Life

Critical staff are required to come to work and may be required to work extended hours. Failure to report *when and where* assigned could result in disciplinary action up to and including termination. ARAMARK will handle the discipline of their employees.

*Note:* Student Health Services will provide treatment to ARAMARK employees during the pandemic.

If the University is ordered closed by the Chancellor, some critical staff will be required to report to the campus.

Supervisory personnel will alter schedules so as to have the least numbers of employees on duty as possible. In the event the campus is ordered closed, the staff, which is required to report, will be compensated within the guidelines established by the Board of Regents.

f) Reassignment

Personnel shortages may require the reassignment of personnel from their normal work location and or duties. Failure to report as directed will result in disciplinary action.

g) Media Contact

The Assistant Vice President for University Relations is the official spokesperson for the University during the pandemic. All inquiries from the media will be directed to University Relations and the Director or designee must approve all information provided to the public before distribution.

h) Travel

In the event of a pandemic outbreak, the University reserves the right to recall or prohibit university related or sponsored overseas travel by faculty, staff and students to affected areas. In the event a pandemic outbreak in the US, all travel will be canceled until the threat has passed.
5) Additional Concerns

a) University Community Pandemic Flu Education

The Committee will organize an educational campaign using the various media sources available to it to educate the campus community on the disease and means of preventing its spread. This campaign will be under the direction of the Assistant Vice President for University Relations. The goal is to educate for the purpose of reducing the mystery of the disease and prepare the community for what will happen if the pandemic becomes a reality. It is to be a gradual roll out using various forms of media including pamphlets, web pages, radio announcements and local television.

The program will be under the direction of the Assistant Vice President for University Relations with the Director of Student Health Services serving as technical advisor. The education program is to begin as soon as the President approves this plan.

b) Departmental Pandemic Flu Education

Each department whose staff members will have direct contact with the flu virus (at minimum, Student Health, Public Safety, Support Services and Plant Operations) will develop an educational program that will protect the staff and prevent further spread of the disease. The Director of Student Health Services, prior to it being presented to staff, must approve all training, including handout materials. This is to ensure consistency in the information presented and control techniques utilized. The education program is to begin as soon as the President approves this plan.

c) Supplies – Purchase and Position

The Committee will identify a list of materials and the necessary quantities that will be needed to deal with the pandemic. These items include but are not limited to surgical masks, rubber gloves, and alcohol gel wipes. Since each Department will face different demands during the pandemic, the supply list will be reflective of those demands. The individual departments will be responsible for the cost of those supplies. In the event that the cost exceeds the department’s current funding, a request will be made to the President for additional resources.

d) Surgical Fit Testing

The N-95 mask is designed and constructed to prevent the inhalation of microscopic particles. This level of mask is capable of protecting the wearer from the pandemic virus. OSHA regulations require “fit testing” prior to the wearing of this mask. Once the virus is identified in the world, Student Health and Risk Management will begin fit testing all personnel who may be required to wear the mask. (Note: Due to the vast numbers this regulation will affect, Risk Management will check with OSHA to see if the requirement has been relaxed before actual testing begins.)
e) Development of Alternatives to Standard Classes

Faculty will be requested to determine methods in which their courses can be taught without or with limited classroom time. This may include independent study, sending the class lecture via e-mail, social media, converting the class to an on-line course or any other approach that would allow the class to continue.

It is unlikely that the University will have sufficient bandwidth to teach all classes on-line. It is also unrealistic to assume that all classes lend themselves to on-line instruction. For that reason it is important to examine any and all possibilities.

f) Physical Redesign of Student Health Centers

In the event that the pandemic flu strikes the campus, it may be necessary to increase the bed space at the Student Health Centers. Student Health Services, working with Support Services prior to an outbreak, will designate areas where cots may be placed and what furniture will be removed from the facility. When completed, the design will be reviewed by Risk Management to ensure that the design meets fire and Life Safety Code requirements. Once approved, the design will be provided by Support Services and made part of this plan.

g) Event Contracts and Refund Policies

In the event that the pandemic flu is found in Georgia, it will be necessary to cancel all public events. Those departments that book events and sell tickets (Theatre Department, Athletics, etc) are to review and or create, as needed, policies and procedures to refund tickets within State accounting guidelines. These departments should also work with the university attorney to include in all contracts a clause to allow the event to be cancelled due to the pandemic without liability to the University.
Stage II – Operational

The most important step in controlling the pandemic will be to identify as soon as possible when it has been detected overseas and then in the United States. The World Health Organization (WHO) is responsible for monitoring the disease and notifying member nations when there is an increase in the threat level. WHO uses a series of six phases of pandemic alert (previously discussed) as a system for informing the world of the seriousness of the threat and of the need to launch progressively more intense preparedness activities.

The designation of phases, including decisions on when to move from one phase to another, is made by the Director-General of WHO. Each phase coincides with a series of recommended activities to be undertaken by WHO, the international community, governments, and industry. Changes from one phase to another are triggered by several factors, which include the epidemiological behavior of the disease and the characteristics of circulating viruses.

The Centers for Disease Control (CDC) is the US agency tasked with coordinating the American response. Once the disease is identified as a pandemic by WHO, CDC will notify the Georgia Department of Public Health who in turn will notify the local public health offices. Once local public health is notified, this will result in the activation of the Muscogee County and Columbus State University Pandemic Flu Plans.

As soon as the implementation order is received, the following steps will be taken:

**Command Center Activation**

The Command Center will be activated and staffed by University Police as needed. Hours of operation will be determined by the impact the disease is having on the campus.

The possibility for disease transmission precludes gathering key personnel in one area.

Therefore, personnel who normally report to the Center will continue to represent their department/unit during the response phase/pandemic period but will do so from their appropriate department operating centers or home. Coordination will be accomplished via telephone, email and/or other means. Police personnel assigned to the Command Center will exercise “social distancing” to limit/prevent spread of the disease within the Center.
The phone number for the Command Center will be provided to all directors who are part of this plan. A public information number will be disseminated by University Communications and handled by the Command Center. If the Command Center needs to expand staffing to handle the operations of the Campus, the public information line will be transferred to the Call Center at Richards Hall.

**University Information Exchange Meetings**

Once the pandemic is identified, the Operational Commanders will begin meeting on a regular basis to discuss the effect the pandemic is having on campus. They will also assess current actions being taken to control the spread of the disease and evaluating their effectiveness. The frequency of the meetings will be determined by the effect the pandemic is having on the university community. As the impact of the disease grows, the Pandemic Influenza Committee will be requested to attend the meetings.

These meetings will be handled as conference calls to lessen the chance of spreading the disease.

Staff who have been issued communication technology (cell phones, electronic tablets, etc.) will leave them on campus if they become ill so that they will be available to the staff that is assigned to replace them.

The Operational Commanders will keep the President, the President’s Cabinet and the Pandemic Influenza Committee informed as to the impact the disease is having on the campus. The Director of Student Health Services will be the lead spokesperson when communicating with the President, the President’s Cabinet and the Pandemic Influenza Committee.

These meetings will continue until the Director of Student Health Services determines the disease has run its course.

**Implement University Communication Plan**

Once the University is made aware that the pandemic has been identified, the Assistant Vice President for University Relations will begin a constant flow of information to the University Community via CougarAlert, Student/Faculty/Staff e-mail, the University Web Page, and WCUG.

The press releases will include the status of the pandemic at Columbus State University as well as relevant information that the University President, Muscogee County/Georgia Public Health Departments, or the BOR wishes disseminated. Information on how to prevent the spread of the disease will also be distributed on a continuous basis.
Campus Monitoring

It is vital that the University monitor the personnel and students to determine how the pandemic is affecting the Campus. Once CDC identifies the disease is present in the United States, the University will begin monitoring those who have been affected by the flu. The Departments, which will be responsible for monitoring the health of the Campus, include:

1. **Student Health Services** – identify and record all students and employees by name and ID number who seek treatment for the disease.
2. **Public Safety** – record all transports to Student Health Centers and or local hospitals for students suffering from flu like symptoms.
3. **Human Resources** – monitor absenteeism within the faculty and staff on a daily basis.
4. **Residence Life** – identify students who are ill or have gone home for safety reasons or treatment of the illness.
5. **Faculty** – monitor the number of students in class and identify, if possible, any that may have the illness.

The data will be forwarded to the Command Center where it will be collated and delivered to the Director of Student Health Services. The Director of Student Health Services will be responsible for analyzing the data and reporting the impact the pandemic is having on the University to the President and Muscogee County Public Health Department.

Attendance Policy

All faculty, staff and students will be advised that anyone who shows signs of the flu are to go to Student Health Services for a diagnosis. If diagnosed with the flu, they are not to report to work or attend classes for the period of time specified by the Student Health Services staff. Student Health Services will provide each patient with a slip stating how long the person is to be away from campus. This slip must be presented to the department supervisor or instructor prior to the person being allowed to resume work or attend classes.

Social Distancing - Event/Class Cancellation

Once the CDC/State Public Health Department confirms the existence of the pandemic in Georgia, all events, other than classes, will be canceled. Student Activities will ask that all off-campus events that student organizations are planning also be canceled until the threat has past. The ban will remain in effect until the CDC advises it is safe to resume normal activities.
Those Departments, which have scheduled events, will notify the public of the cancellation using whatever media is available. The department will also inform the performer/speakers of the cancellation and arrange for refunds for any tickets, which may have been purchased.

Classes will be canceled either on order of the Board of Regents or if in the opinion of the President, there is insufficient faculty and staff present to properly operate the Institution.

**Student Health Centers – 24 hour Operation**

Due to limited staffing, Student Health Centers will attempt to treat and send patients back to their residence halls or homes to recuperate. However, it may become necessary for Student Health Services to monitor the patients full-time, which will require a 24-hour operation. If this occurs the following actions will be taken:

A. **Supplementing Medical Staff**

The Director of Health Services will coordinate existing medical personnel’s schedules to provide adequate coverage. Faculty from the CSU School of Nursing as well as nursing students will supplement the Student Health Services staff. The Director of Student Health Services will coordinate with the Chair of the Department of Nursing to ensure that there will be no interruption of classes so long as the University is in operation. In the event the University is closed, Nursing Faculty will transfer to Student Health Services to work as needed.

Staff from other departments will be reassigned to Student Health Services to provide clerical support in order to free up medical staff for patient care. Reassignments will be handled through the Command Center.

B. **Expanding Bed Space/Refrigeration**

Once the existing beds in the Student Health Centers are full, the Director of Student Health Services will request through the Command Center that cots be installed. Support Services will be notified to begin transporting the cots to the Student Health Centers or designated locations, removing unnecessary furniture to storage and setting up the cots according to plan. Student Health Services will provide sheets and pillows for the cots.

When a patient leaves the Student Health Center, the sheets and pillowcases will be changed. Soiled items will be washed/dried or disposed of using established procedures at the Student Health Centers. Reassigned staff will take care of the laundry so that medical staff can concentrate on patient care.
If the Director of Student Health Services determines that additional refrigeration is needed, the Command Center will be notified. The Command Center will request Support Services transport the number of units needed and place them in the locations designated.

**Site Security / Access Restricted**

Once Student Health Centers begin seeing Pandemic Flu patients, it is likely that a panic may develop on campus. When Student Health Services confirms the existence of Pandemic Flu on campus, the University Police will begin posting police officers on site as needed. Current conditions and the number of police officers available will determine how many will be assigned to the facility. The officer(s) will be on post to act as a calming factor or to assist with unruly people. The officer(s) assigned to the detail will not leave the facility except under an extreme emergency and then only with the permission of a University Police Supervisor. Once the emergency is under control, the officer(s) will return to their assigned post.

In order to prevent the spread of the disease and allow for the unrestricted movement of the staff, it may be necessary to limit the number of patient visitors. The Director of Student Health Services will determine the number of visitors each patient can have and when the restriction is to begin. This information will be forwarded to the Command Center for implementation.

Lot 2A on the North side of the main campus facility will be kept clear at all times. Parking for medical staff and others assigned to the Student Health Center on main campus will be reserved in Lot 2 throughout the event.

**Transport / Patients & Medications**

When practical, all patients who are too sick to be treated by Student Health Services will be transported to the Midtown Medical Center or whatever facility is capable of taking them. If an ambulance is not available, University Police will transport them in a patrol car but only as a last resort.

The University Police will also provide transport and security for all medications that are being supplied to Student Health Services if no other transport system is provided by the State of Georgia or Columbus Consolidated Government. Medications will be secured in Student Health Centers and University Police will be posted there at all times.
**Custodial Services**

Custodial Services will assign sufficient staff to constantly clean the Student Health Centers with the intent of lessening the spread of the disease. If the Student Health Centers go to a 24-hour operation, Custodial personnel will be assigned around the clock. All custodial personnel working in the Student Health Centers will wear protective gloves, masks and eye protection when cleaning. The gloves are to be changed regularly and discarded in a proper manner. Prior to putting on new gloves, the custodian will wash his/her hands with soap and water.

Waste - Trashcans will be emptied continuously, with the contents being placed in plastic bags, sealed and removed from the building immediately. Medical waste will not be allowed to stay in the building or collect on site. A dumpster is to be placed at the site or a system established where non-medical waste is transported to a dumpster at Plant Operations on a regular basis. Those responsible for transporting the waste are to wear rubber gloves whenever touching the bags. Once the waste has been placed in the dumpster, the gloves are to be discarded in the dumpster as well. The staff member will then wash his/her hands with soap and water.

Safety and Environmental Services (SES) will arrange for additional medical waste pickup if needed. In the event that the University’s normal medical waste hauler is incapable of providing normal, or enhanced service is needed but not possible, SES will designate a safe site at which the excess waste can be stored.

Examination Tables will have the paper changed and sprayed with an antiviral spray prior to the next patient being seen.

**Parental Notification**

In the event that a student becomes extremely ill with the pandemic, his or her parents will be notified. It would then be up to the parents to determine if they wish to move the student closer to home or leave him/her on the Campus.

**Deaths**

In the event that a patient dies from the pandemic, the individual will be pronounced by the Director of Student Health Services.

The body will be removed to a room close to the designated ambulance entrance and will remain there until removed by the transport vehicle for transfer to the morgue.

The patient room will be cleaned and the room sprayed with an antiviral spray.
The Command Center will be notified. The Command Center staff will:

1. Notify the Muscogee County Coroner of the death and provide all requested information about the deceased.
2. Arrange for transport of the body to the location designated by the Coroner.
3. Assign a police officer to standby at the Student Health Center to assist the unit sent to transport the body.
4. Make arrangements to notify the next of kin of the death. The notification will be made in person if practical and according to the Death Notification policy.
5. Make the following notifications:
   - The President
   - Vice President for Student Affairs
   - Assistant Vice President for University Relations
   - The Counseling Center, if there are friends present who may need counseling.

**Food Service**

The provision of food service during the pandemic will be a medical necessity for those students remaining on campus. For that reason, ARAMARK personnel will be consider part of the critical staff and will be provided the same access to vaccinations, Tamiflu and protective equipment as Columbus State University staff.

As soon as the pandemic has been identified in the United States by the Centers for Disease Control, ARAMARK will increase its inventory of food & supplies so that it can operate for at least three days without being re-supplied. This will be done to compensate for any interruption that may occur in the supply network as a result of the pandemic.

Health Services currently has a staff of 10. In the event that the pandemic strikes the campus/Muscogee County, that number could swell to 100 with diverted employees. ARAMARK will be responsible for the preparation and delivery for all meals to Health Services for all employees.

In the event the University is closed and the students sent home, Dining Services will determine how those holding a meal plan will be compensated for unused meals and Cougar Cash.

**Food Service Operations**

*Scenario One:*

*The University remains in full operation but a significant number of students become ill.*

ARAMARK will maintain full operation during this time period. In the event that its staff is
significantly reduced due to absenteeism, ARAMARK will reduce its hours of operation and/or
discontinue some or all satellite functions while keeping the Cougar Café and Rankin Den fully
operational. If its staffing level falls below that which is needed to remain fully functional, the
Command Center is to be notified and University personnel will be assigned to assist.

If food service operations are altered in any manner, the Assistant Vice President for University
Relations will be notified and will communicate the changes to the campus community.

The menu, number of meals per day and delivery times will be determined by the Director of Dining
Services in conjunction with the Director of Student Health Services and Support Services.

Healthy students will continue to dine at the Cougar Café and Rankin Den. Those without meal
plans will be charged the door rate.

Food Delivery

Student Health Services will provide a list to Residence Life, ARAMARK, University Police, and
Support Services noting the name of the ill student, where they are lodging (residence hall name,
building, floor, and/or room number) and the meal type needed.

Students with confirmed flu diagnosis and have been placed on bed rest by Student Health Services
will have meals delivered to their rooms. ARAMARK will deliver the meal to the lobbies of the halls
and volunteers or CSU staff will take the food to the rooms. Only students living on campus and
under the care of Student Health Services will be provided this service.

*Scenario Two:*

The University is closed and all classes canceled. Some residence halls remain open for sick
individuals or those who can’t go home.

ARAMARK will maintain the Cougar Café and Rankin Den in full operation during this time period.
In the event that its staff is significantly reduced due to absenteeism, ARAMARK may reduce its
hours of operation but will keep both locations fully operational (i.e.: provide 3 meals per day). If its
staffing level falls below that which is needed to remain fully functional, the Command Center is to
be notified and University personnel will be assigned to assist.

Students who remain on campus or in the area and have a meal plan will be provided meals at the
Cougar Café or Rankin Den. Students who do not have a meal plan can eat but will be charged the
door rate. Dining Services will determine menu and meal times.
Food Delivery

Student Health Services will provide a list to Residence Life, ARAMARK, University Police, and Support Services noting the name of the ill student, where they are lodging (residence hall name, building, floor, and/or room number) and the meal type needed.

Students with confirmed flu diagnosis and have been placed on bed rest by Student Health Services will have meals delivered to their rooms. ARAMARK will deliver the meal to the lobbies of the halls and volunteers or CSU staff will take the food to the rooms. Only students living on campus and under the care of Student Health Services will be provided this service.

Food Waste

Since some of those who will be eating in the Cougar Café and Rankin Den will be infected and therefore shedding the flu virus, the virus may end up on the food trays and part of the waste stream. Therefore during the time period in which this plan is in effect, those Food Service workers who are responsible for emptying the trays and cleaning the tables will wear rubber gloves and face masks.

Counseling

As the numbers of individuals become ill, and in the event that members of the University Community begin to die, The Counseling Center will begin to provide counseling to those in need. It will be up to the Director of the Counseling Center to determine the frequency, time and location of the counseling. If it is determined that group counseling is to be provided, the Command Center will be notified and the information publicized throughout the campus.
Stage III – Remediation and Debriefing

Cleaning

Once the Centers for Disease Control confirms the pandemic is over, the following steps will be taken:

1. Student Health Centers and any other facility utilized for patient treatment will be thoroughly cleaned and disinfected. Safety and Environmental Services will test to ensure that the locations are cleaned within national guidelines.

2. If a dumpster was moved to the Student Health Centers or elsewhere, SES will ensure that it is cleaned and returned to the vendor.

Counseling

The Counseling Center will:

1. Continue to provide counseling as needed

2. Monitor those students and staff who were emotionally impacted by the pandemic and arrange for long term follow as needed.

Audit

The Director of Human Resources will perform an audit of the personnel records to tally how many hours were lost to the pandemic. The personnel records will also be audited to ensure that leave time was correctly applied according to the guidelines provided by the Board of Regents.

The University’s Auditor will perform an audit of those Departments that spent funds in order to contain the pandemic. The audit will be conducted to ensure that funds were spent properly and are all accounted for. A total cost and an opinion as to how the funds were spent will be provided to the President.

Debriefing

Once the Campus is clear of the pandemic, the President’s Cabinet and Pandemic Influenza Committee will meet with the President to discuss the University’s response. The plan will be altered to reflect what was learned from the experience so the response can be improved for the next event.