Guidelines for Implementation of Public Health Measures

Introduction

The purpose of this document is to provide an operational framework for the university’s intermediate and long-term COVID-19 recovery in accordance with federal and commonwealth guidance and requirements. The university has set a priority on the public health and safety of our community and recognizes that we must operate inside our resource capacity while making continuous progress toward a return to campus for on-campus living, working, learning, teaching, and research.

The goal of this document is to provide a path forward so that areas can begin to plan for a transition as appropriate, from reduced operations to normal operations, amid an ongoing public health risk. We will adhere to proper public health practices and consider university resources as we transition to an on-campus learning and research environment that is as close as possible to the traditional Virginia Tech experience.

According to the World Health Organization (WHO), transitioning from a scenario of widespread community transmission to a steady state of low or no transmission is the best possible outcome since a vaccine has not yet been developed. As the country and the commonwealth transition to relaxing stay-at-home orders and gradually increasing operations following public health guidelines, the university must begin a phased return to normalcy. Focus will be given to limiting potential exposure and opportunities for community transmission on the Virginia Tech campuses and sites.

The university will have a consistent planning approach across all the workstreams, including academic programming, research, student services, human resources, and operations. Each area of the university will have specific plans to transition to the on-campus delivery of programs. Planning for an on-campus fall semester should begin now so that when our timeline becomes clear, we will be prepared.

As the COVID-19 pandemic evolves, challenges to reconstituting Virginia Tech operations will continue. To address these challenges across the enterprise, the following operational strategies provide a structure to support operational planning at the unit level.

Operational Strategies

**Physical Distancing and Hygiene**

Strict adherence to appropriate physical distancing requirements throughout each phase of the recovery process is necessary. Virginia Tech will promote proper hygiene practices for the whole community. Community members will be expected to:

- Wear face coverings/masks when in public or common areas, including indoor spaces (e.g., classrooms, laboratories, meeting/conference rooms, dining halls, residence halls, student centers, library, hallways, lounges, and atria and other gathering points), unless physical distancing is easily accomplished.
• Maintain at least a 6-foot physical distance from every person present at a location whenever possible. This includes hallways, atria, lounges, study spaces, and other gathering points.
• Wear a face covering/mask when a consistent 6-foot separation distance cannot be maintained.
• Use appropriate barrier protection when a minimum of 6 feet of separation is not possible and people must face each other, such as highly visited areas (reception desks and other check-in points).
• Conduct meetings virtually when possible, and limit occupancy when virtual meetings are not possible.
• Wash hands with soap and water for at least 20 seconds as frequently as possible or use hand sanitizer.
• Cover coughs or sneezes — cough into the sleeve or elbow, not into the hands.
• Regularly clean high-touch surfaces.
• Avoid shaking hands.
• Vulnerable individuals are encouraged to restrict activities as much as possible, and employees are encouraged to work remotely as much as possible.

**Indoor Space**
The Virginia Tech community should practice physical distancing and hygiene strategies for indoor spaces on campus to reduce exposure and limit the spread of disease. To support this community-wide approach, Virginia Tech will implement mitigation strategies supporting public health actions:

• **Access control:** Spaces will be cleaned and access restricted when not in use to further limit the potential for contamination and spread.
• **Furniture arrangements:** Where feasible, furniture will be positioned to encourage behavior consistent with physical distancing guidance.
• **Maintaining 6 feet of separation between occupants.** Occupancy will be determined through evaluation of maximum density, respecting the 6-foot rule.
• **In appropriate spaces (i.e., multiple points of ingress and egress),** signs will indicate entryways and exit-ways to minimize face-to-face interaction and support physical distancing when entering and leaving classrooms.
• **Space use:** To minimize the potential for exposure, contamination, and spread, all community members are encouraged to use virtual meeting options rather than physical gatherings. Virginia Tech provides tools to support virtual collaboration and meeting to all employees and students.
• **Virtual access:** Meetings, conferences, and any other appropriate gathering type that is conducted in-person should also include a virtual option when feasible to support and encourage participation of vulnerable individuals. The integration of in-person and online learning in each course will be designed by faculty in consultation with department heads, deans and the Provost's Office as appropriate.
• **Metered services:** Dining halls, student centers, the Newman Library, and other similar types of facilities will employ specific plans to meter the number of occupants and support physical distancing and virtual services where feasible.

**Scenarios for physical distancing best practices**

• **Classroom:** Sarah, a junior finance major, sits in her assigned seat, knowing that this will assist in contact-tracing if a classmate becomes ill. Her desk and chair were cleaned by staff members overnight. She wears a cloth face covering, given her proximity to
other students. She is careful to only touch her own belongings, and she has regularly disinfected items such as her smart phone. At the end of class, she gives others their space, maintaining 6 feet of separation, as she leaves the classroom through the door marked as the exit.

- **Outdoors:** At the building’s exterior doors, Sarah takes advantage of the hand-sanitizer station. As she begins to cross the Drillfield on a paved path, she finds herself momentarily alone and takes off her face covering while walking. As she nears an approaching group of students, though, she reapply her face covering and continues walking in the grass in order to yield the pavement to others.

- **Residence halls:** In her residence hall lounge, Sarah settles into a study space, where a clear plastic barrier separates her from the adjacent desks. Because she is indoors as others pass nearby, she opts to keep her face covering on. An hour later, she transitions to her room, where she washes her hands for 20 seconds with soap and then takes off her face covering. She and her roommate are both free of COVID-19 and been living together as a “family unit”, each responsible to the other for adherence to public health practices. From her room, she virtually participates in a committee meeting for her favorite student organization, knowing that it’s best to avoid in-person gatherings whenever possible.

**ENHANCED CLEANING**

To minimize spread and protect the most vulnerable populations, Virginia Tech will employ a consistent, thorough, and deliberate cleaning process. This process includes innovation and technology to minimize high-touch points across campus sites in combination with frequent cleaning of the remaining high-touch point surfaces. In addition, Virginia Tech will provide cleaning and disinfection actions aligned with the use and operational hours of building spaces. These guidelines apply to all facilities owned or leased by Virginia Tech.

**Building Space**

Virginia Tech will manage cleaning in indoor spaces through a combination of frequent and thorough cleaning and access control. Additionally, hand-sanitizer stations will be placed near on-campus entrances, exits, and elevators to mitigate the potential for contamination of high-touch points.

**Staffing**

Housekeeping staff are a first line of defense against the spread of disease. Virginia Tech will take necessary actions to mitigate the risks to housekeeping staff and establish appropriate staffing strategies to optimize cleaning and mitigation. All staff conducting cleaning and disinfecting will be provided appropriate personal protective equipment and necessary training consistent with the use of this equipment.

**SURVEILLANCE AND MONITORING**

Surveillance is the cornerstone of effective public health. Surveillance systems are designed to detect the emergence and spread of infection within both the general community and the Virginia Tech community. Virginia Tech will provide testing, contact-tracing, and case management.

**Screening**

Faculty, staff, and students should monitor their health and report any symptoms to Schiffert Health Center (students) or their primary care physician (employees). Employees should also report to Human Resources and/or Environmental Health and Safety if their health care provider
or the Virginia Department of Health indicate they should be tested for COVID-19. Students should inform the Dean of Students Office if Schiffert, their primary care physician, or the Virginia Department of Health indicates they should be tested for COVID-19. Virginia Tech has established a protocol to support off-campus students being tested for, or confirmed to have, COVID-19. Any students who are or have been quarantined, isolated, or confirmed to have COVID-19 should contact the Dean of Students Office as soon as they are able.

In some on-campus workspaces/facilities, employees may be screened when arriving to work for each shift. A survey and temperature scan may be implemented to prevent the risk of disease-spread based on the nature of the work being done.

No employee will be allowed in shared workspaces if they are exhibiting any symptoms of respiratory illness that the CDC associates with COVID-19.

Testing
Virginia Tech will support broad-scale access to testing for community members. Schiffert Health Center will lead this effort in supporting rapid viral testing and analysis.

1. Individuals who test positive for COVID-19 must remain in isolation for at least 14 days from symptom onset or until free from fever for 72 hours, whichever is longer — unless superseded by current public health guidance.
2. Individuals awaiting test results must remain in isolation.
3. Individuals who have close contact with confirmed cases must remain in quarantine for 14 days as directed by public health officials.

Tracing
Virginia Tech, in coordination with the Virginia Department of Health New River Health District, will manage a robust contact-tracing program to identify, test, and quarantine potentially affected individuals.

Case Management
In keeping with Virginia Tech’s commitment to the safety and wellbeing of all community members, Virginia Tech has established a case management system to track, provide service to, and support all affected community members.

Mitigation of COVID-19-like illnesses
Illnesses that are similar to COVID-19, or present with some of the same symptoms, pose a threat to the public health response to COVID-19, risk the consumption of resources required to manage the COVID-19 pandemic, and risk a secondary outbreak of COVID-19. Virginia Tech will implement measures to prevent the spread of existing COVID-19-like illnesses, or CLIs, and take proactive steps to reduce the potential for CLIs. Virginia Tech will facilitate flu-vaccine clinics for all community members in the fall of 2020 to minimize the community impact. In addition, Virginia Tech will conduct outreach campaigns to educate community members on CLIs, the benefits of flu vaccination, and encourage community-wide participation.

TRAINING
Virginia Tech will provide a virtual COVID-19 training course to promote accurate education on the disease, physical distancing, and recommended hygiene. This training course will include a general overview of COVID-19 and university-specific COVID-19 policies and practices, along with the associated expectations for all community members.
VISITORS TO CAMPUS
Programming that typically involves visitors should consider means to continue virtually to the extent possible. Where programming cannot remain virtual, mitigation strategies should be implemented to conduct the programming elements consistent with phasing guidance, including physical distancing. Strategies should seek to minimize gatherings, decrease exposure potential, and track participants.

All visitors are expected to comply with applicable guidance and requirements herein, public health requirements, and any policy or guidance that applies to Virginia Tech students and employees.

MANAGED OPERATIONS
Consistent with its Crisis and Emergency Management Plan (CEMP), Virginia Tech will manage recovery operations using an Incident Command System (ICS) to promote information-sharing, efficient communications, and rapid adaptability to the evolving situation. University leadership will continue to provide direction for the response and recovery efforts, and the Virginia Tech Incident Management Team (IMT) will implement policy in support of those efforts.

Adaptive Operations
Should surveillance and prevalence monitoring indicate the potential or actual spike in cases within (or immediately surrounding) the Virginia Tech community, university operations will adjust to address a reemerging public health threat. Operational adjustments may include, but not be limited to, further access limitations for public spaces, cessation of in-person classes, closing of recreational facilities and non-essential locations, and increased community outreach.

In support of imperative communications between Virginia Tech as an institution and the university community, a joint-information system will be active (within the ICS) throughout the phased recovery to support operations, community outreach, and COVID-19 public health education.

Supporting Operations
The Virginia Tech IMT will also serve as a body of subject matter experts to provide consultation services for units and faculty requiring situation-specific guidance related to operations. Virginia Tech Emergency Management will serve as the point of contact for all inquiries and requests for consultation, and will refer these to appropriate points of contact on the IMT.

TRAVEL
Virginia Tech will follow government guidelines for domestic and international travel. We strongly discourage any non-essential travel.

WORKFORCE
Transitioning from remote work to more traditional work settings requires a coordinated and careful approach. Virginia Tech Human Resources will work with business units as needed to phase in staffing. Expanding on-site staffing should be coordinated through, and approved by, unit senior leadership (e.g., deans, vice presidents).

Employees will often be in the best position to identify the means to limit their own exposure in context of their own work environment. Supervisors and managers should support reasonable requests for alternate operations, balancing mitigation with work demands. The Office of Equity
and Accessibility, Human Resources, and Environmental Health and Safety can support the design of appropriate accommodations for physical distancing practices in the workplace.

COMMUNICATIONS
University Relations will develop and implement a communications strategy to inform the community during reopening. Communications across campus will be managed through a coordinated effort led by University Relations. All official communications will be online on vt.edu.

Operational Definitions

Close contact: Individuals who were within 6 feet of the subject for a prolonged period (more than 15 minutes). Consideration should be given to proximity, duration, and whether the subject was wearing a face covering/mask during the potential exposure.

Physical distancing: Limiting one’s potential exposure through deliberate actions such as:
- Minimizing time in public spaces, both in frequency and duration.
- Maximizing distance from others, generally at least 6 feet of separation.
- Using physical barriers where feasible (e.g., masks, windows).

Vulnerable individuals: The CDC identifies vulnerable/high-risk individuals as older adults and people of any age who have serious underlying medical conditions. Those at high-risk for severe illness from COVID-19 are:
- People 65 years of age and older
- People of all ages with underlying medical conditions, particularly if not well-controlled, including:
  - People with chronic lung disease or moderate to severe asthma
  - People who have serious heart conditions
  - People who are immunocompromised
  - People with severe obesity (body mass index, or BMI, of 40 or higher)
  - People with diabetes (type 1, type 2, and gestational)
  - People with chronic kidney disease undergoing dialysis
  - People with liver disease

COVID-19 symptoms: At this time, symptoms include:
- Cough
- Shortness of breath or difficulty breathing
- Fever
- Chills
- Muscle pain
- Headache
- Sore throat
- New loss of taste or smell
- New gastrointestinal symptoms (e.g., nausea, vomiting, diarrhea)

Face coverings/masks: A cloth face covering/mask of a material such as cotton or a disposable surgical/procedural mask made of polypropylene material is worn to prevent the spread of droplets from the wearer to others. These do not include respirators (e.g., N95s).
Quarantine: Separating and restricting the movement of people who were exposed to contagious disease to determine if they are sick.

Isolation: The act of separating people with a contagious disease from people who are not sick, completely eliminating movement within the community while contagious.

Virginia Tech community: The employees and students of Virginia Tech. Visitors to Virginia Tech are also considered part of the community when on-campus, if not otherwise referenced in context.

Public health practices: The combination of physical distancing and hygiene practices conducted by the community to mitigate the spread of infectious diseases.