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# COVID-19 HEALTH AND SAFETY OPERATIONAL PLAN

UNIVERSITY OF OREGON

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## EXECUTIVE SUMMARY

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The University of Oregon is committed to safeguarding the health and safety of the campus community as it plans for in-person instruction and research, and as it prepares to welcome students back to campus. The UO COVID-19 Health and Safety Operational Plan outlines how the university will meet the Oregon Health Authority requirements for reopening. This document also details the many other health and safety measures underway that go above and beyond state mandates. The pages that follow explain how the UO plans to create and promote a healthy environment while providing effective instruction and continuing world-class research.

This plan takes a comprehensive approach to managing COVID-19 by monitoring health indicators, reducing the likelihood of the virus spreading through policy, physical and programmatic changes; requiring and reinforcing Center for Disease Control and Prevention-guided behavioral expectations and an ethic of personal responsibility; managing cases through testing, tracing, and treatment protocols, communicating and engaging stakeholders; creating supporting policies that apply to all individuals affiliated with or visiting the UO campus, and communicating about these activities and expectations.



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### GUIDING PRINCIPLES AND APPROACH

The comprehensive plan of activities is managed by nearly 200 campus experts that make up the Incident Management Team (IMT), in collaboration with public health agencies, local and state governments, and peer institutions. It reflects input from faculty experts, employee and student groups, and other experts and stakeholders. The plan adheres to public health orders, standards and guidance, and draws from sound science, scholar expertise, and emerging understanding of COVID-19. It is designed to be flexible to rapidly adapt to change as the university confronts these unprecedented and challenging times.

In executing the plan, the IMT is focused on these objectives:

- Reduce the likelihood of COVID-19 illness
- Manage positive cases
- Keep campus informed
- Reduce disruption to campus
- Inspire campus to engage in prevention and recovery
- Assess financial impacts
- Protect the long-term stability of the university



## MONITORING HEALTH TRENDS AND CAMPUS CAPACITY

The UO is closely monitoring indicators of COVID-19 and the capacity to manage the virus, in collaboration with local and state public health officials. The university has adopted alert systems, in coordination with public health experts, to determine when these indicators would trigger modifying operations on campus. The indicators include:

- Community disease control—incidence and prevalence of the virus, percent of positive tests, community spread, and hospital stress
- Capacity to limit spread and manage infections—status of prevention methods and adoption, access to quick testing and contact tracing, availability of treatment, quarantine space capacity, and status of county reopening



## REDUCING LIKELIHOOD OF COVID-19— HEALTHY ENVIRONMENT AND HEALTHY BEHAVIORS

The UO is actively working to reduce the likelihood of COVID-19 by establishing barriers to its spread on campus. This requires both university action and individual behaviors.

Institutional actions to promote a healthy environment:

- Creating physical distancing by reducing density of classrooms, offices, residence halls, common spaces, offices, dining areas, and other spaces
- Controlling foot traffic to limit gathering and create physical distancing
- Installing Plexiglas barriers in areas of high person-to-person interaction
- Cleaning frequently and installing hand sanitizing stations
- Upgrading restrooms with hands-free faucets and dispensers
- Improving air handling systems in all buildings where this is possible

Policies and expectations to influence and encourage individual health behaviors:

- Requiring face coverings inside and when near others outside
- Requiring self-symptom checks and staying home for prescribed time periods if sick
- Expectation of hand washing, covering mouth, not touching face
- Expectation of six-foot physical distancing and not gathering in groups
- Enforcing of safety policies through employment agreements and student code of conduct
- Providing education and community engagement to reinforce all of the above

Additional policy and programmatic activities to support a healthy environment:

- Bringing employees back to campus in a phased approach determined by each school, college, or unit in coordination with Human Resources (HR)
- Requiring all units to develop workspace plans that adhere to physical distancing orders and other safety requirements
- Adapting work and learning activities to meet the personal needs of employees and students
- Expanding employee leave and emergency sick leave programs
- Training employees and supervisors about healthy behaviors



## COVID-19 TESTING, CONTACT TRACING, AND SURVEILLANCE

The UO is planning for comprehensive virus testing for individuals both on and off campus, as well as supporting contact tracing and surveillance including:

- Requiring testing for students living in residence halls
- Providing access to diagnostic testing for students at University Health Services, supporting for county testing capacity through local hospital partnership
- Notifying community promptly when the university is informed that a student or an employee who has been on campus in the last 14 days is deemed positive for COVID-19
- Providing residence hall students affected by COVID-19 with isolation/quarantine space and food delivery, and other support and care until they have recovered. Affected off-campus students will be provided advice and support for care, food, healthcare, and financial resources while in isolation/quarantine
- Supporting contact tracing through an agreement with Lane County Public Health (LCPH), employing student workers to reach out to people who may have had contact with positive cases
- Building on-campus capacity for testing with a certified testing lab and pursuing FDA authorization for several new less costly, viral testing techniques



## ACADEMIC AND RESEARCH PROGRAMMING

The UO is planning for a hybrid approach to on-campus instruction, research, and experiential learning that supports student success and scholarly discovery. This will include:

- Academic instruction through a combination of remote, online and in-person classes determined by the COVID Alert Level
- Reduced density by moving in-person classes into larger classrooms
  - » For example, classes of 50 or more students would be taught remotely
  - » All classrooms or labs in use will be arranged with six-foot space between individuals
- Increased time between classes to allow for better traffic flow
- Expanded online opportunities and options
- Schedule options to reduce travel, for example, all instruction and finals after Thanksgiving could be remote through the end of fall term
- Supporting student success through additional and customized outreach and advising tailored to the unique circumstances facing students during the pandemic to support academic progress, retention, and time to graduation
- An updated course schedule that allows students with health needs or other concerns to access completely remote instruction and programming
- Ongoing training and resources to support instructors with remote teaching
- Research activities managed in a phased approach with all research units required to develop resumption plans that adhere to physical distancing orders and other safety requirements



## RESIDENTIAL HOUSING AND DINING

University Housing plans include high-quality, safe and supportive housing and dining options for students through programmatic and physical changes including:

- Limiting density in residence halls, eliminating triple rooms, and conducting activities in small group pods
- Limiting density and required physical distancing in common spaces, dining halls, and other public areas
- Increasing cleaning protocols
- Creating Plexiglas barriers in areas of high person-to-person interaction
- Requiring testing and providing case management and isolation/quarantine space and support for students affected by COVID-19
- Establishing clear behavioral expectations through comprehensive communications, healthy welcome kits, signage, and peer-to-peer education



## CAMPUS ENGAGEMENT

To address the diversity of stakeholders within the university, several work groups were established to focus on key aspects of engagement with students, faculty, staff, and the community. The goals include:

- Communicating to keep campus and the community informed about operational status, response, recovery, planning, and long-term stability
- Deploying an integrated communication and marketing effort to inform, engage, and influence individual actions and healthy behaviors
- Engaging with students to support student access and success in education while minimizing risks to students and staff, prioritizing equity, and addressing racial disparities on all responses
- Engaging with employees to provide support through challenges in support of retention and productivity
- Engaging with the community to improve communications, expedite processes, reduce duplication of work; collaborate on regional recovery efforts including support for economic recovery, applied research, partnerships, and equity and inclusion efforts

## COMMUNICATIONS AND MARKETING

Coupled with engagement are the strategic and tactical communications activities required to reach stakeholders. University Communications is providing communications and marketing counsel and support for the UO's plans to resume safe and responsible on-campus learning, working, living, research, and experiences. The group has several dozen communicators across campus who staff a daily IMT Communications command center as well as provide strategy, create content, deploy messages across channels, and measure success in support of the university's COVID-19 response and planning.

## ATHLETICS

University of Oregon Athletics has been working with various campus, public health, and medical advisory entities to implement a thoughtful, cautious strategy to support appropriate, phased progressions to return to sport and prioritizing the safety and health of the UO student-athletes while minimizing all public health risks.

## Table of Contents

1.0	Plan Overview .....	1
1.1	OHA and HECC COVID-19 Guidance.....	1
1.2	UO All-Hazard Incident Management Team for COVID-19.....	2
1.3	Communicable Disease Management Plan.....	2
2.0	Monitoring Health Trends and Campus Capacity during COVID-19.....	3
2.1	Monitoring Indicators .....	3
2.2	Operating Under COVID-19 Alert Levels.....	4
2.3	COVID-19 Situational Monitoring Matrix and Triggers to Move between Alert Levels.....	9
2.4	Triggers to Raise or Lower the Alert Level .....	10
3.0	General Mitigation for COVID-19 on UO Campuses.....	11
3.1	Establishing Barriers between COVID-19 and the Campus Community.....	11
3.2	Personal Hygiene.....	11
3.3	Personal Screening .....	12
3.3.1	Symptom Self-check.....	12
3.4	Faculty and Staff Health and Wellness.....	12
3.5	Face Coverings and Respiratory Etiquette on Campus .....	14
3.6	Testing and Contact Tracing .....	14
3.7	Isolation and Quarantine.....	14
3.8	Low Density.....	14
3.9	Physical Distancing.....	14
3.10	Physical Barriers .....	14
3.11	Increased Air Handling .....	15
3.12	General Campus Facilities Cleaning Guidelines.....	15
3.13	Campus Access.....	16
4.0	Academic and Instructional Activities .....	17
4.2	Physical Distancing in Instructional Spaces on Campus .....	17
4.3	Laboratory Instruction.....	18
5.0	Research Operations and Activities.....	19
5.1	Process for Reengagement in On-Campus Research Activities.....	20
6.0	University Housing and Residential Activities .....	21
6.1	Eugene Campus.....	21

- 6.2 Charleston Campus.....22
- 7.0 University Department and Research Unit Level Plans .....24
  - 7.1 Planning Templates.....24
  - 7.2 Planning Process.....24
- 8.0 University of Oregon Testing Strategy.....25
  - 8.1 Testing for Students Who are Symptomatic or Have a Potential Epidemiologic Link.....25
  - 8.2 The COVID-19 Monitoring and Assessment Program (MAP) Team .....26
- 9.0 Contact Tracing and Contact Monitoring .....28
  - 9.1 COVID-19 Campus Case Management Response and Support .....28
    - 9.1.3 Responding to Reports of Employee Cases and Exposures.....29
- 10.0 Concerns Specific to Off-Campus Students .....31
- 11.0 Athletics .....32
- 12.0 Non-Educational Public Health Guidelines for COVID-19.....33
  - 12.1 Non-Higher Education OHA Guidelines .....33
  - 12.2 Venue and Events .....33
  - 12.3 Travel.....34
- 13.0 Campus Engagement .....35
  - 13.1 Student Engagement.....35
  - 13.2 Employee Engagement.....39
- 14.0 Communications and Marketing Plan Summary .....40
  - 14.1 Integrated Communications and Marketing Objectives .....40
  - 14.2 Areas of Focus and Strategies .....40
- 15.0 Policies, Enforcement, and Complaint Process .....44
  - 15.1 Policies.....44
  - 15.2 Enforcement .....44
  - 15.3 Complaint Process .....44
- 16.0 Community Recovery and Engagement .....45
  - 16.1 Community Recovery and Engagement Mission .....45
  - 16.2 Community Recovery and Engagement Work Group’s Charge .....45
  - 16.3 Community Recovery and Engagement Workgroup’s Activities .....45
- Appendix A: University of Oregon Pandemic Plan .....47
- Appendix B: Governor Brown’s Executive Order N. 20-28.....47
- Appendix C: Oregon Health Authority’s COVID-19 Standards .....47

University of Oregon’s COVID-19 Health and Safety Operational Plan

Appendix D: Additional Information on Case Management and Case Response .....47  
Appendix E: COVID-19 Integrated Communications and Marketing Plan .....50  
Appendix F: Athletics General Resumption Information.....50

## 1.0 Plan Overview

The University of Oregon (UO)'s COVID-19 Health and Safety Operational Plan has been built to reflect the university's commitment to meeting its mission of exceptional teaching, research, and service in a safe and responsible manner. The plan outlines the UO's comprehensive layered prevention and holistic public health procedures and strategies at every stage and step of planning, including multi-modal instruction, research, residential, and administrative operations. The mitigation strategies outlined in this plan are informed by sound science, scholarly expertise and research, and a current understanding of emerging data about COVID-19. The plan covers property owned and operated by the UO and applies to faculty, staff, students, and visitors associated with the UO when engaged in university-related activities. The plan is intended to be agile, flexible, and dynamic and can rapidly be adapted as the university confronts changing conditions in these unprecedented and challenging times.

It is the intention of the Board of Trustees that, should any portion of this plan be held invalid by judicial or administrative ruling, such ruling shall not affect the validity of the remaining portions of this plan. Nothing in this plan should be construed in a manner that limits the use of good judgment and common sense in matters not foreseen or covered by the elements of this plan or its appendices. Nothing in this plan is intended, or should be construed, as creating a duty on the part of the UO toward any party for the purpose of creating a potential legal liability. The board of trustees will review this operational plan at each of its regular meetings and approve any amendments thereto.

The plan is designed to adhere to the Oregon Health Authority (OHA) standard for the conduct of in-person instructional, residential, and research activities at Oregon colleges and universities; the Centers for Disease Control and Prevention (CDC) considerations for institutions of higher education, and local public health authority's guidance. The Incident Management Team (IMT) also utilized the UO's Emergency Operations Plan and Pandemic Plan in the formation of this plan. In addition to the COVID-19 Planning Guide and Self-Assessment for Higher Education published on June 12, 2020, developed by Johns Hopkins Center for Health Security, Council for Higher Education Accreditation and the Tuscan Strategy Consulting; coordination with other universities nationally and on the West Coast through the Disaster Resilient Universities (DRU) Network; and coordination with Oregon's post-secondary institutions.

### 1.1 OHA and HECC COVID-19 Guidance

On June 12, 2020, the OHA and Higher Education Coordinating Commission (HECC) released the [Guidance for the Conduct of In-person Instructional, Residential, and Research Activities at Oregon Colleges and Universities](#)<sup>1</sup>. The new OHA standards apply to public universities listed in Oregon Revised Statute (ORS) 352.002, community colleges operated under ORS chapter 341, and degree-granting private colleges and universities that operate in Oregon ("colleges and universities").

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<sup>1</sup> OHA Standards can be found at the following link: <https://www.oregon.gov/highered/about/Documents/News-Updates/OHA-HECC-higher-education-health-standards-covid-FINAL.pdf>

## 1.2 UO All-Hazard Incident Management Team for COVID-19

The UO fully activated its IMT on February 28, 2020, to monitor and respond to an outbreak of a respiratory disease caused by a novel coronavirus, "SARS-CoV-2," with the disease it causes known as coronavirus disease 2019, abbreviated as "COVID-19".

The UO's All-Hazard IMT provides the command and control infrastructure required to manage the logistical, fiscal, planning, operational, safety, and campus issues related to any and all incidents/emergencies. In addition, the IMT manages all phases of an incident (e.g., response, mitigation, continuity, and recovery).

The UO IMT follows the requirements set forth by the National Incident Management System (NIMS) Incident Command System (ICS). NIMS and ICS provide a nationwide template enabling federal, state, local, and tribal governments and private sector nongovernmental organizations to work together effectively and efficiently to prevent, prepare for, respond to, and recover from domestic incidents regardless of cause, size, or complexity.

Using ICS at the UO allows the members of the IMT to coordinate across both academic and administrative units and departments, all schools and colleges, and the Eugene campus and satellite campuses through a common organizational structure. The hierarchical ICS system and chains of communication are designed to adapt to rapidly evolving incidents like COVID-19.

More information on the UO IMT as it has been deployed for the COVID-19 pandemic can be found at the following link: <https://coronavirus.uoregon.edu/imt>

## 1.3. Communicable Disease Management Plan

The UO maintains an Emergency Operation Plan which includes hazard specific annexes, including a [Pandemic Response annex](#). The annex was initially developed in 2009 in response to H1N1. That plan has been revised on several occasions and was updated in early 2020 to address COVID-19. During the university's COVID-19 response, a specific COVID-19 Case management protocol was developed, which is now an addendum to the overall pandemic annex.

## 2.0 Monitoring Health Trends and Campus Capacity during COVID-19

During the COVID-19 pandemic, the IMT is actively monitoring federal, state, and local health trends through a variety of community wide disease control indicators and university prevention and capacity indicators. Section 2 of the plan includes: definition of the monitoring indicators, overview of the four COVID-19 alert levels, the situation monitoring matrix, and the triggers that IMT and public health authorities will use to assess the COVID-19 alert levels. The monitoring tools and resources listed below will assist the IMT and the UO Policy Group in determining if current operational plans (e.g., percent of in-person instruction, hybrid or online courses) need to be adapted based on health and safety <sup>2</sup>capacity concerns. The university has adopted the indicator terminology from the COVID-19 Planning Guide, and Self-Assessment for Higher Education published on June 12, 2020. The UO is also working closely with LCPH to ensure the community data is accurate and reflects the community trends. UO campuses outside of Eugene follow their local public health authority data for disease control.

### 2.1 Monitoring Indicators

Multiple indicators have a significant impact on the COVID-19 environment. The UO needs to be familiar with and monitor key indicators to support the university’s planning and decision-making processes. There is a range of possible outcomes for each indicator, and while it can be assumed that each indicator will progress toward a best-case outcome in the long-term, it is essential to prepare for sudden regressions. Not all indicators are equal and one individual data point would not suffice to move between alert levels. The cumulative status of all indicators will influence the university’s continuity of operations and response at any point in time. Different indicators may move in opposite directions, which complicates the process, and the university’s plans need to be adaptive to the changing environment.

#### 2.1.1 Community Indicators of COVID-19 Status

<b>Incidence &amp; Prevalence</b>	The number of new and existing cases of COVID-19 on the campus, local, regional, national, and international levels will have implications for operating scenarios. Analysis of daily case numbers and deaths reported, as well as trends in reported numbers over time, will also influence decision making.
<b>Percent of Positive Tests</b>	Understanding the percentage of positive tests out of the denominator of total tests conducted for COVID-19, can help indicate both the prevalence of the disease in a community as well as the adequacy of testing capacity. The WHO and OHA both recommend that the percentage of positive tests should be at or below 5%.
<b>Percent of Cases Linked to Other Known Cases</b>	Data from testing and contact tracing can show what percentage of new cases are linked to other known cases. Providing an indicator of the amount of unrecognized and uncontrolled spread in a community. The higher the percent of cases linked to other known cases, the less risk of unrecognized spread.
<b>Hospital Stress</b>	Data related to local hospital inpatient and ICU bed availability and the percent of hospital beds occupied by COVID-19 patients can provide useful indicators of hospital stress due to COVID-19. Hospitals with low availability of beds and a high percent of COVID-19 patients would indicate that transmission in a community may be high and will be critical for informing decision-making.

<sup>2</sup> The guide was developed by Johns Hopkins Center for Health Security, Council for Higher Education Accreditation, and the Tuscany Strategy Consulting.

### 2.1.2 Indicators of Institutional Capacities to Limit COVID-19 Spread and Manage Infections

<b>Prevention Methods</b>	The capacity and degree of adoption for various prevention methods will impact the operating environment. Advancements in PPE, administrative controls, and engineering controls, as well as increased adherence to prevention methods, will be paramount.
<b>Testing Capacity</b>	Testing is a key measure to help reduce the impact of COVID-19. It is beneficial for institutions to have access to adequate testing, whether conducted by the institution or by other healthcare partners. At baseline, everyone with COVID-19 symptoms should be able to obtain a test. Testing should be done quickly and return results as quickly as possible to inform better medical decision making and decisions related to isolation and contact tracing.
<b>Contact Tracing Capacity</b>	Contact tracing is another vital capacity to control the transmission of the virus.
<b>Treatment Capacity</b>	The degree to which local hospitals can support community outbreaks should be monitored. The risk of reopening is increased severely if community members are unable to be treated.
<b>Quarantine Capacity</b>	The number of empty beds/rooms available to house students in self-isolation or quarantine. As the number of cases increases on campus, the greatest risk is in the ability to safely quarantine students identified during testing and contact tracing. This is a comparable metric to the number of available hospital beds in the community.
<b>Federal, State, and Local Policies</b>	Regulations and operating protocols are being developed at federal, state, and local levels. The status of those protocols will undoubtedly impact the degree to which institutions may operate.
<b>Comparators and Coordination</b>	Observing the operating protocols of similar institutions and leading institutions is a helpful exercise to understand how other professionals are thinking about operating scenarios. In this exercise, it is important to understand the unique characteristics that influence institutional decision making and to consider your institution’s unique characteristics.

Source: COVID-19 Planning Guide, and Self-Assessment for Higher Education published on June 12, 2020

### 2.2 Operating Under COVID-19 Alert Levels

The UO in partnership with LCPH has also adopted the four levels of operations as defined in the COVID-19 Planning Guide and Self-Assessment for Higher Education. The COVID-19 alert levels indicate the severity of COVID-19 transmission and implications for the university’s operations.

The COVID-19 alert levels are similar to the community air quality index, where each level has a specific color. The color makes it easy for people to quickly determine whether COVID-19 spread is increasing or decreasing in the community t also provides clear guidance on the actions that individuals and institutions should take based upon the level.

## 2.2.1 COVID-19 Alert Levels

### LOW ALERT LEVEL

#### What does it mean?

“New Normal” – Cases are rare and transmission is controlled. Health care facilities readily available.

Please note: Rates may be higher when students first return, but will be caught during arrival testing.

#### What to expect on campus?

##### **PHYSICAL SPACE**

- University can operate moderate-density environments, per relevant public health guidelines

##### **INSTRUCTION**

- Instruction is a mix of in-person and online, per relevant public health guidelines
- Some students and faculty will not be able to return to campus until there are reliable treatments and/or vaccine

##### **RESEARCH**

- Increased density in labs and research activities with some modifications

##### **EMPLOYEES**

- Some employees will not be able to return to campus until there are reliable treatments and/or vaccine

##### **RESIDENCE HALLS**

- Increased density in dining and residential activities with some modifications

## MODERATE ALERT LEVEL

### What does it mean?

Moderate number of cases, with most cases from a known source. Capacity in health care facilities is stable.

### What to expect on campus?

#### PHYSICAL SPACE

- Implementation of all current public health strategies
- University facilities closed to general public, per statewide executive order
- Most buildings open to student and staff with restricted flow of access
- Buildings that are open to (students and employees) operate with lower density Face coverings required in university buildings
- Enhanced cleaning

#### INSTRUCTION

- Instruction is a mix of in-person, remote, and online instruction
- All in-person instruction will operated at low-density with a minimum of 6 feet of distance per person

#### RESEARCH

- Reduced density for all onsite activities
- Conduct research remotely where possible
- Onsite work or presence requires an approved operational plan approved by the Office of Research and Innovation and UO IMT

#### EMPLOYEES

- Remote or telework is the preferred choice for as many employees as possible in accordance with state/local mandates
- Onsite work or presence requires a department level plan that has been approved by the UO IMT

#### RESIDENCE HALLS

- Dining with modified indoor seating options
- In-person social or co-curricular activities in small groups following all current public health authorities requirements

## HIGH ALERT LEVEL

### What does it mean?

Increased cases, including spread in the community. Available but stressed capacity in health care facilities.

### What to expect on campus?

#### PHYSICAL SPACE

- Implementation of all current local and state public health strategies
- University facilities closed to general public, per statewide executive order
- Limited access to university facilities
- Face coverings required in university buildings
- Barriers and physical distancing practices in place
- Enhanced cleaning

#### INSTRUCTION

- Instruction is primarily online or remote
- In-person instruction is limited to courses that are difficult to conduct remotely
- In-person instruction must seek appropriate dean approval and follow all current public health authority requirements and submit a plan to the UO IMT for approval

#### RESEARCH

- Reduced density for all onsite activities
- Conduct research remotely where possible
- Onsite work or presence requires an approved operational plan approved by the Office of Research and Innovation and UO IMT

#### EMPLOYEES

- Remote or telework is the preferred choice for as many employees as possible in accordance with state/local mandates
- Low-density operations for critical services (minimum 6 ft distancing per person)
- Onsite work or presence requires a department level plan that has been approved by the UO IMT

#### RESIDENCE HALLS

- Operational within local and Oregon public health standards
- Indoor, in-person social or co-curricular activities limited to small groups following all public health authorities requirements

## VERY HIGH ALERT LEVEL

### What does it mean?

Outbreak is growing and signs of community spread prevalent. Health care facilities at or near full capacity.

### What to expect on campus?

#### PHYSICAL SPACE

- Implementation of all current of all local and state public health strategies
- University facilities closed to general public, per statewide executive order
- All non-essential buildings closed
- Face coverings required in all UO buildings, a minimum of 6 ft physical distancing is maintained for those who need to be on campus
- Enhanced cleaning of the areas that need to be maintained

#### INSTRUCTION

- Nearly all instructional programming is online or remote
- In-person instruction is severely limited to only courses that can not be conducted online or remotely (labs, fieldwork, etc.)
- Those courses must seek appropriate dean approval and follow all current public health authority requirements and submit a plan to the UO IMT for approval

#### RESEARCH

- Onsite for critical research only at low densities and following all public health authorities requirements
- Onsite plans must be submitted and approved by the Office of Research and Innovation and UO IMT

#### EMPLOYEES

- Remote or telework is the preferred choice for as many employees as possible in accordance with state/local mandates
- Employees maintaining critical services onsite at low densities and following all public health authorities requirements
- Onsite work or presence requires a department level plan that has been approved by the UO IMT

#### RESIDENCE HALLS

- Very limited operation following all public health authorities requirements

2.3 COVID-19 Situational Monitoring Matrix and Triggers to Move between Alert Levels<sup>3</sup>

COMMUNITY DISEASE CONTROL	Key Question	Indicator	Triggers To Raise To A Higher Level	Triggers To Lower Level	Date of Assessment	LOW	MODERATE	HIGH	VERY HIGH
Monitored by: Lane County Public Health	What is the prevalence of new cases?	Weekly average new case count per 100,000	↑ Increasing more than 5% over a 14-day period	↓ Decreasing over a 14-day period.	11/19/20	< 10 per 100,000	11 - 20 per 100,000	21 - 50 per 100,000	> 51 per 100,000
Monitored by: Lane County Public Health	What is the overall rate of positive?	Percent of test results that are positive	↑ Increasing over a 7-day period	↓ Decreasing over a 14-day period.	11/19/20	< 5% or less	6 - 10 %	11 - 15%	15% or Higher
Monitored by: Lane County Public Health	Do we know if the new cases are connected?	Percentage of new cases linked epidemiologically to other known cases	Meet specified threshold over a 7-day period	Meet specified threshold over a 14-day period	11/19/20	95% or more linked to other known case	80 - 94%	30 - 79%	< 30% cases linked to other known case
Monitored by: Lane County Public Health	Do we have robust contact tracing?	Are we reaching new cases for follow-up within 24 hours?	↑ Increasing percentage reached within 24 hours	↓ Decreasing percentage reached within 24 hours	11/19/20	95% or more cases reached within 24 hours	80-94%	50-79%	<50% cases reached within 24 hours
Monitored by: Lane County Public Health	Are we testing enough to detect cases?	County-wide daily average (by week) test collection volume	Not meeting daily threshold (720 per day)	Meeting daily threshold over a 14-day period	11/19/20	> over 720 per day on a 7-day average	450 – 719 per day over 7-day average	360 - 449 per day over 7-day average	< 359 per day over 7-day average
Monitored by: The University of Oregon Institute for Policy Research and Engagement and Lane County Public Health	Is the community complying with face-covering requirements?	% of people complying with face-covering measures	↓ Decrease in compliance of face coverings over 7 day period	Stable or ↑ increasing compliance of face coverings over 7 day period	11/19/20	100% - 90% complying with face covering	75 - 89 %	60 - 74 %	< 59% complying with face covering
<b>UNIVERSITY OF OREGON : Monitoring and Capacities</b>	<b>Key Question</b>	<b>Indicator</b>	<b>Triggers To Raise To A Higher Level</b>	<b>Triggers To Lower Level</b>	<b>Date of Assessment</b>	<b>LOW</b>	<b>MODERATE</b>	<b>HIGH</b>	<b>VERY HIGH</b>
Monitored by: UO Incident Management Team-Case Management	How fast are we getting test results for student's tested at University Health Services?	Turnaround time on students tested at University Health Services	>48-72 hrs.	< 24 hrs.	11/19/20	< 24 hours	< 48 hours	< 72 hours	> 72 hours
Monitored by: UO Incident Management Team-Institute for Policy Research and Engagement	Is the campus community complying with face covering requirements on campus?	% of student and employees complying with face covering measures	↓ Decrease in compliance of face coverings over 7 day period	Stable or ↑ increasing compliance of face coverings over 7 day period	11/19/20	100% - 90% complying with face covering	75 - 89 %	60 - 74 %	< 59% complying with face covering
Monitored by: UO Incident Management Team - Monitoring and Assessment Program Testing	What is the UO residential facilities weekly testing telling us about prevalence in residential facilities on campus?	Percent of positive tests from UO residential facilities	↑ Increasing over a 7-day period	↓ Decreasing over a 14-day period.	11/19/20	< 2.5%	2.6 - 5%	6 - 9%	> 10% or Higher
Monitored by: UO Incident Management Team-Housing Workgroup	Is there sufficient capacity of isolation rooms for UO residential facilities ?	% of isolation rooms currently in use	↑ Increasing towards capacity limits	↓ Decreasing demands on capacity	11/19/20	@ or below 25 % capacity	26% - 50 % capacity	51% - 75 % capacity	76% - 100% capacity
Monitored by: UO Incident Management Team-Housing Workgroup	Is there sufficient capacity of quarantine rooms UO residential facilities ?	% of quarantine rooms currently in use	↑ Increasing towards capacity limits	↓ Decreasing demands on capacity	11/19/20	@ or below 25 % capacity	26% - 50 % capacity	51% - 75 % capacity	76% - 100% capacity
Monitored by: UO Incident Management Team-Logistics Section	Are there sufficient cleaning supplies for UO operations?	Inventory Levels for critical cleaning supplies	↓ Decreasing inventory	Stable or ↑ Increasing Inventory	11/19/20	Stable Inventory	Reduced Inventory, but new orders still arriving	Limited Inventory, delays in supply chains	No extra Inventory/ stockouts
Monitored by: UO Incident Management Team	What is the operational status units and departments providing essential services to campus?	Status of essential workforce reporting to work	↑ Increasing sick leave within essential units	Stable staffing within essential units	11/19/20	No significant increase in sick leave for units providing essential services	Moderate increase in sick leave reporting in essential units	High increase in sick leave reporting in essential units	Very High increase in sick leave reporting in essential units

<sup>3</sup> Adopted from Resolve to Save Lives/Vital Strategies Annex 1

## 2.4 Triggers to Raise or Lower the Alert Level

The following are examples of triggers that move the university between alert levels and alter campus operational plans; this enables the institution to react to changing COVID-19 conditions faster and with greater confidence.

### 2.4.1 Directional triggers to raise the alert level:

- Significant increases in COVID-19 transmission on campus, occurring at a greater rate than the local community
- Significant increases in COVID-19 transmission within the institution's local community, if it is impractical for the institution to minimize COVID-19 exposure between the institution and the local community
- Evidence that the university's community is disregarding face coverings or physical distancing requirements
- Insufficient availability of COVID-19 testing by the institution or local/state public health authorities, due to logistics, supply chain, or other factors
- Insufficient health care capacity, on campus or within the local health care facilities.
- Insufficient space to manage the number of in-residence students requiring quarantine rooms or self-isolation
- Other local/state/federal mandates

### 2.4.2 Directional triggers to lower the alert level:

- Significant decreases in COVID-19 transmission on campus
- Significant decreases in COVID-19 transmission within the institution's local community, if it was higher than transmission on campus
- Evidence that the university's community is following face coverings or physical distancing requirements
- Sufficient health care capacity, on campus or within the local/state health care facilities

A coalition of public health, education, and government leaders continuously monitors the prevalence of the COVID-19, regional prevention compliance and treatment capacities to determine the Lane County COVID-19 Alert Level. The partners include Lane County Public Health, University of Oregon, City of Eugene, City of Springfield, City of Florence, PeaceHealth Medical Group, McKenzie-Willamette Medical Center, and Lane Community College. Officials from each organization review current data at their weekly incident commander briefings to determine if the alert level should change.

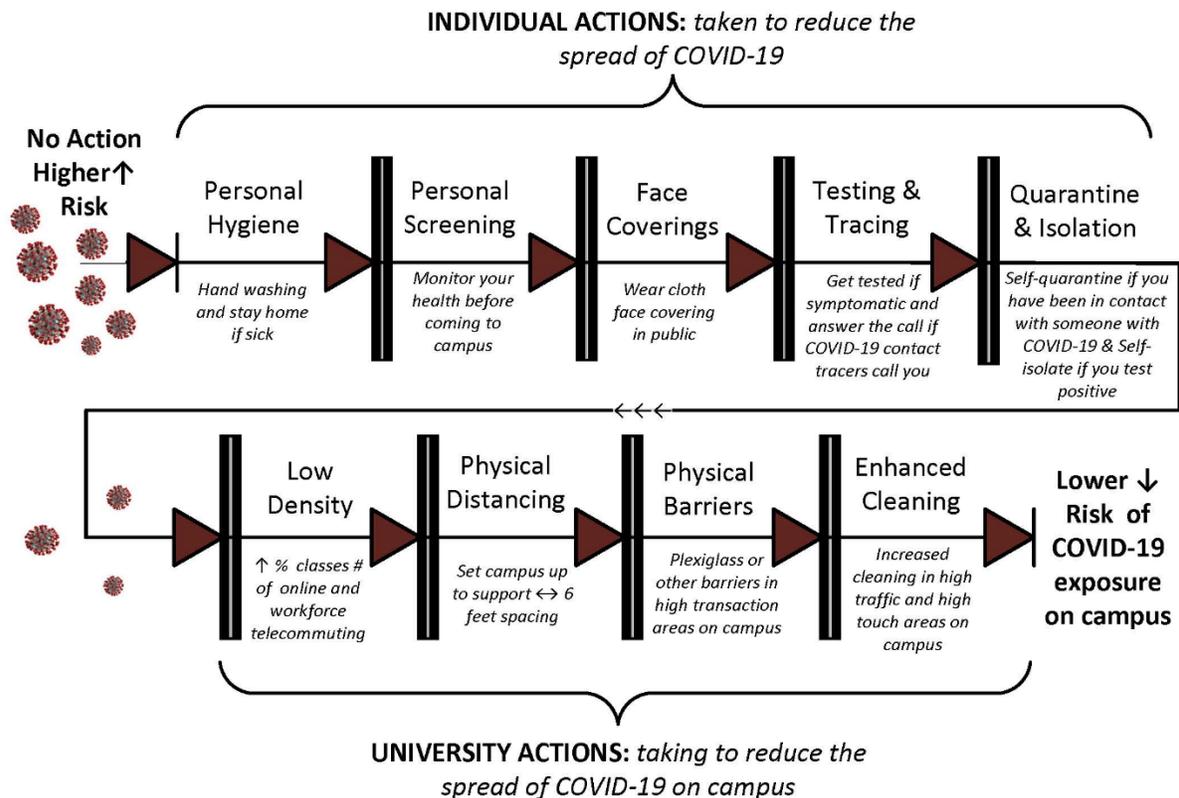
If the indicators warrant an elevation of the alert level and adjustment of the university's operational plans, the IMT will convene the policy group to share the information and make recommendations for operational adjustments of campus plans.

In addition to the disease control, prevention, and capacity indicators, the IMT will also monitor other community-wide indicators that have an impact on the campus operations. For example, the impacts of K-12 closures or remote status have significant impacts on the workforce of the university and need to be factored into its operational plans.

### 3.0 General Mitigation for COVID-19 on UO Campuses

The UO is actively working to establish barriers on campus to prevent the spread of COVID-19. Combatting COVID-19 is a shared responsibility. The following graphic depicts the steps individuals can take and barriers the university is putting in place to prevent the spread of the COVID-19 virus on the UO campus.

#### 3.1 Establishing Barriers between COVID-19 and the Campus Community



#### 3.2 Personal Hygiene

The best way to prevent the spread of respiratory illnesses, including COVID-19 and influenza, is to avoid exposure to the virus. The CDC-recommended precautions provide guidance on how to reduce the risk of exposure, including proper hand washing; avoiding touching your eyes, nose, and mouth; covering coughs or sneezes with a tissue, then throwing the tissue in a trash receptacle; cleaning and disinfecting frequently touched objects and surfaces; and avoiding close contact with people who are sick.

The university has deployed a number of hand washing stations across campus. Branded signage has been developed and deployed for: hand washing, staying home if ill, maintaining 6 feet of distance, face covering requirements, and floor stickers to mark distancing where lines form.

### 3.3 Personal Screening

Consistent with OHA guidance, students and employees are required to: (1) do a symptom self-check before coming in-person to campus; and (2) stay away from campus for the time periods identified below. The university does not collect health information from its employees or students under this regulation.

University departments are responsible for communicating with visitors, vendors, contractors, and guests that they should not come to campus if they have had any COVID-related symptoms in the last 24 hours.

Campus community members performing remote work or studies for the day are not required to do a symptom self-check if they are not coming on campus. If employees and students have symptoms, they can perform work or studies remotely, to the extent they feel well enough to do so and remote work is available. Employees and students who are well enough to work or study remotely when they are experiencing COVID symptoms, should work with their supervisor or professor to identify available work. Employees may also use available leave to cover these periods if they are unable to work. See reference materials below. Students should work with their instructors to identify make-up work or remote studies.

#### 3.3.1 Symptom Self-check

Every day before coming on-campus employees and students should assess whether in the last 24 hours they have had any COVID-19 symptoms as defined by the CDC that are different from their baseline. The university's symptom self-check regulation is posted online and includes a list of symptoms, employee leave information, and an optional tracking sheet that individuals can use to keep track of this daily activity. Self-check regulations can be found here: <https://coronavirus.uoregon.edu/regulations#self-check-regulation>

If any of these symptoms are present, the individual should stay home until at least **24 hours** after the fever (if present) has dissipated (without the aid of fever-reducing medication) and other symptoms have been relieved. Employees should contact their medical provider<sup>4</sup> and students should contact UHS if multiple symptoms are present.

<https://coronavirus.uoregon.edu/regulations#self-check-regulation>

### 3.4 Faculty and Staff Health and Wellness

The UO has the expectation that if an employee feels sick while on campus, they should let their supervisor know and leave campus. Supervisors should not make assumptions about illness or ask about an employee's medical condition. Supervisors are encouraged to talk with all employees about resources and expectations related to sick leave and illness prevention.

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<sup>4</sup> If an employee does not have a primary care physician, urgent care or any of LCPH's clinics can also be a resource. Benefits-eligible employees can also find a primary care physician by reviewing the options available through their UO health insurance plan. Information is available at: <https://hr.uoregon.edu/hr-programs-services/benefits/uo-group-insurance/medical-insurance>. Information about graduate employees' health insurance is available at: <http://gtff3544.net/health-care/summary-of-benefits/>

### 3.4.1 COVID-19 Employee Leave Options

The university recognizes the impact that COVID-19 may have on an employee's ability to work for various reasons, including:

- The need to care for children impacted by school and daycare closures
- The need to take time off due to personal illness
- The need to care for an ill family member/dependent

The first course of action is to explore [flexible work options](#) such as remote work or flexible schedules, where possible. Because flexible work arrangements are not always appropriate or viable due to personal and operational realities, the university has [leave programs](#) available during the UO COVID-19 response, which includes a new UO emergency sick leave program and an *expansion of FMLA and OFLA due to school closures*. Additional leave options are provided for employee's based on bargaining unit and are available for employees to review on the website noted above.

Employees and supervisors are being reminded of leave options and related resources in a "Protecting the Pond—Ducks look after the flock" workplace essentials checklist that is being communicated as part of the employee engagement campaign.

Leaves related to COVID-19 remain an active topic of review, including upcoming discussions with the COVID-19 Safety Committee to assist in informing and determining any additional steps the university may need to take with regard to employee leave.

### 3.4.3 Personal Protective Equipment including for University Health Services

All existing standards for worker protection continue to apply. Additional interim guidance applies for specific worker groups and their employers, such as health care, childcare, food service, and laboratories. Supervisors in these fields should review interim guidance and coordinate with UO Environmental Health and Safety to evaluate applicability to their employees. The Occupational Safety and Health Administration also provides details about guidance on control and prevention.

University Health Services (UHS) employees who wear N95 respirator masks, halo respirators, and Powered Air Purifying Respirators (PAPRs) are enrolled in the UO Respiratory Protection Program (RPP). They receive annual training and fit testing provided by Environmental Health and Safety (EHS). A registered nurse at UHS has been designated to track Personal Protective Equipment (PPE) levels. They coordinate with EHS staff regularly about current levels and orders of PPE needed for UHS staff. EHS retains all training records for employees in the RPP.

### 3.4.4 Faculty and Staff Health Trainings

Training is available to faculty and staff via MyTrack, the central HR management software system and Skillsoft, an external vendor used for training delivery. These trainings cover the different controls, such as physical distancing, that are needed to work safely. They also include health-specific trainings. The MyTrack training is updated regularly as state requirements change. Other training options include a [COVID-19 Packet](#) that EHS produced on various COVID-19-related safety topics and is available to faculty and staff as well as the campus community, and through the "Protecting the Pond—Ducks look after the flock" workplace essentials checklist, which includes reminders about the various COVID-19 related health regulations now in place.

### 3.5 Face Coverings and Respiratory Etiquette on Campus

The UO requires faculty, staff, students, visitors, and vendors to use face coverings (masks, cloth face coverings, and face shields) when in UO owned, leased, or controlled buildings EXCEPT when alone in a space (i.e., a room with four walls). Face coverings are required outdoors on UO property. More information on face covering regulations can be found online:

<https://coronavirus.uoregon.edu/regulations#face-coverings>

### 3.6 Testing and Contact Tracing

Faculty, staff, students, visitors, and vendors who develop COVID-19 symptoms, have been in close contact with a person known to have COVID-19, or have recently traveled from an area with widespread or ongoing community spread of COVID-19 should call their healthcare provider before going in person, and tell them about the recent travel or contact. Health care providers work with the local or state public health departments to determine if the person needs to be tested for COVID-19. Students in Eugene can call UHS at 541-346-2770. Students at the Portland campus can use the Portland State University Center for Student Health and Counseling, and Oregon Institute for Marine Biology students may contact the Bay Clinic in Coos Bay.

While the local public health authorities conduct all contact tracing in their respective counties, UO has set up a program to assist LCPH with the urgent work of contact tracing in Eugene.

<https://coronavirus.uoregon.edu/testing>

### 3.7 Isolation and Quarantine

UO departments are to identify designated isolation spaces in the event a student or employee becomes ill on campus and is unable to leave campus immediately. The UO has in place an isolation and quarantine plan specifically for residential students, outlined later in this document.

### 3.8 Low Density

In-person classes will be limited to 50 students or less to provide adequate physical distancing. Classes with more than 50 people will either be remote or hybrid, with lectures delivered online and smaller discussion sessions in person. Staff is returning on a unit-by-unit basis, with priority given to departments that require on-campus access; those who conduct research or work with students, for example, are among the first to return. Unless otherwise arranged on a case-by-case basis, the university has authorized remote work for every employee who is able to perform the functions of their job from a remote location.

### 3.9 Physical Distancing

Classrooms and shared workspaces have been set up and/or marked so that seating meets the physical distancing guidelines. Events and other official gatherings will also comply with physical distancing guidelines.

### 3.10 Physical Barriers

The UO has set up a process so departments can work with Campus Planning and Facilities Management (CPFM) to order Plexiglas and other barriers needed for high traffic and high transaction areas on campus.

### 3.11 Increased Air Handling

Air handling systems are being adjusted to maximize the circulation of outside air within buildings, wherever possible. There are approximately 259 air handling systems in campus buildings—84 percent of those systems have been adjusted to increase outside air. The remaining 16 percent either do not have capability to increase outside air or have some other system or operational limitation. Where applicable, individuals may be encouraged to open windows while they occupy a space and close them when they depart.

### 3.12 General Campus Facilities Cleaning Guidelines

The UO is following cleaning guidelines and protocols recommended by the CDC. Additional attention is being given to high touch areas such as door handles, handrails, and push bars on doors across campus.

Other measures include:

- Outdoor hand washing stations - The university has deployed and mapped out a number of outdoor, mobile [hand washing stations across campus](#).
- Restroom upgrades – CPFM is now upgrading restrooms (excluding auxiliary buildings) to include hands-free faucets and paper towel dispensers to help limit the number of touched surfaces in restrooms.
- Building lobbies – Hand sanitation gel dispensers will be in the lobbies of all buildings.
- Classrooms – Containers of individualized cleaning wipes will be available at the entrances of centrally managed classrooms. Additionally, custodial services provide daily cleaning and disinfection.
- Signage – Branded signage for: hand washing, staying home if ill, maintaining 6 feet of distance, face covering requirements, floor stickers to mark distancing where lines form, and COVID-19-related room occupancy signs are available.
- Elevators – It is recommended that no more than 2 people use elevators at one time. Signage to this effect is being posted.
- Hallways and stairways – It is recommended that individuals stay to the right when moving around in buildings. Directional signage will be provided. In addition, the face covering requirement assists in mitigating risk when people are navigating hallways and stairways.

### 3.13 Campus Access

In accordance with OHA Guidance UO spaces and buildings are open only for official university business. Campus buildings are not open to the general public.

#### Open Facilities

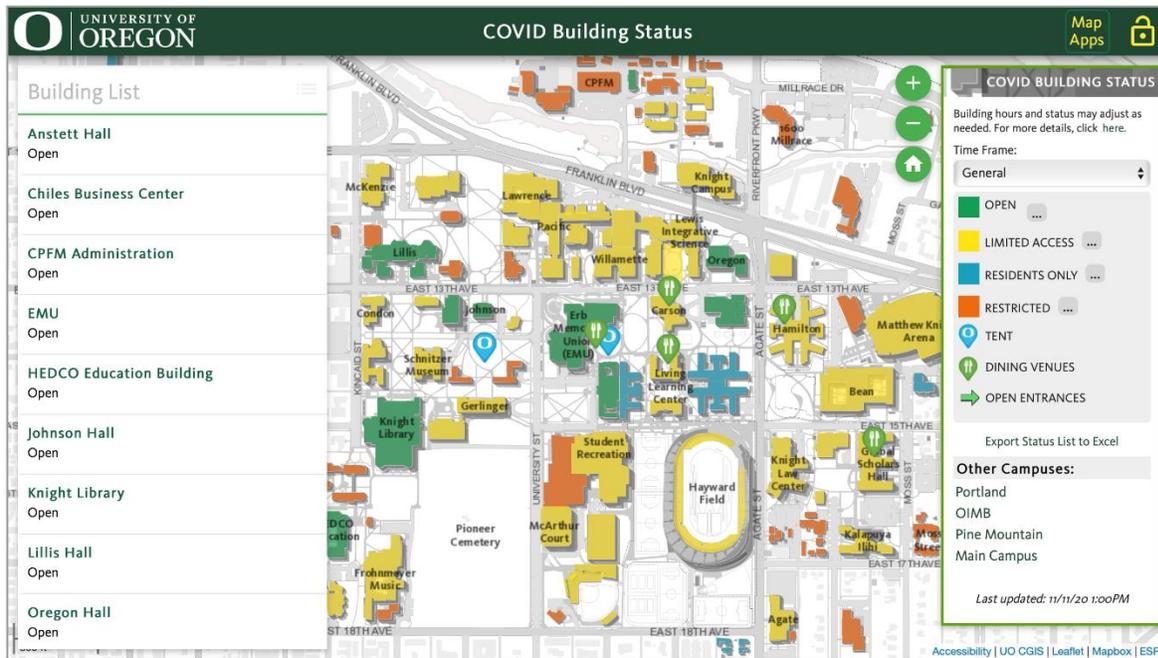
Open facilities will be physically unlocked at strategic entryways during the posted hours, and will be available to faculty, staff, and students for various activities.

#### Limited Access Facilities

Limited access facilities will remain locked and accessible to those faculty, staff, and students who need access through their UO ID card or via other controlled access.

#### Restricted Facilities

Restricted facilities will remain locked but will be accessible to faculty and staff through their UO ID card or other controlled access. These facilities will be available to students by appointment only.



## 4.0 Academic and Instructional Activities

The UO is committed to providing every possible opportunity for students to achieve degree or certificate requirements during the COVID-19 disruptions. The UO will resume on-campus academic and instructional activities that enable faculty, students, and staff to continue advancing the university's mission and their professional work and goals to the extent possible in a manner that is consistent with guidance from public health authorities and experts, using the best available scientific information.

The UO will deploy remote learning that engages students with each other and with faculty to provide a rich learning experience. Details on the fall course data is outlined in the Appendix B and is subject to change due to the dynamic nature of the COVID-19.

### 4.2 Physical Distancing in Instructional Spaces on Campus

Instructional spaces are being configured and marked so that seating meets the physical distancing guidelines. Furniture in common areas and informal learning areas be configured and marked with signage to indicate appropriate physical distancing. Fixed furniture is being decommissioned as needed to maintain 6 feet of distance and include signage for appropriate physical distancing.

#### 4.2.1. Example Image of UO ANVIL Application Used for the COVID Ready Campus Mapping

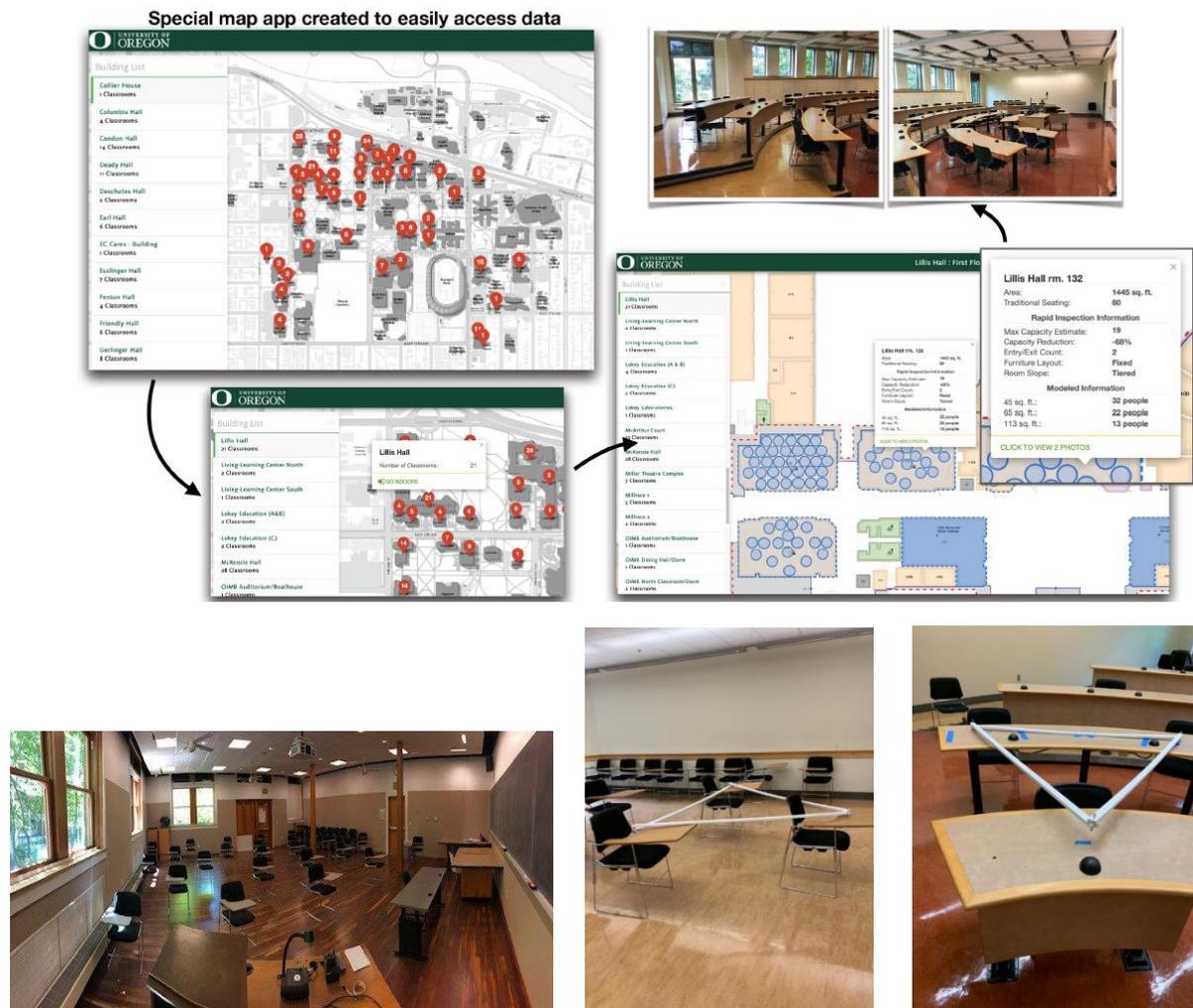
The following images are from the UO's in-house ANVIL application the IMT's campus readiness work group is using to assess, identify, and configure classroom spaces for appropriate physical distancing for in-person instruction.

**In-house ANVIL mobile app quickly enhanced to accommodate rapid room inspections by Fire Marshal and EHS teams. Over 350 classrooms inspected 5/12 - 5/15**



Initial classroom inspections by Fire Marshal's team indicate 40 sqft / person is possible when room has extreme flexibility with seating/furniture and room arrangement. When seating is fixed and other room layout conditions are present densities of 60-80 sqft / person are more likely or even as high as 110 sqft / person. Initial work focusing on classroom assumes: 1) limited overall duration in the room, 2) imperfect loading/unloading during very short time duration; 3) face covering highly encouraged and 4) non-fixed furniture can be moved/removed/replaced to achieve max density.





### 4.3 Laboratory Instruction

Laboratory personnel should follow all standard cleaning and operation protocols for working with infectious agents. In addition, all labs should follow these protocols:

- Wear PPE designated for the lab's operations and remove it safely.
- Routinely decontaminate surfaces that were used for lab work or were frequently touched (benchtops, equipment buttons/handles/lids, drawer pulls, workstations, doorknobs, faucets, etc.). Decontaminate surfaces using cleaners that the EPA has approved for other environmental surfaces, such as an [EPA-registered disinfectant](#) or 70 percent ethanol solution, following appropriate guidelines for safe use and storage.
- Prohibit activities including food, drink, and the use of cell phones or earbuds.
- Wash hands on entering and before exiting the lab.
- Ensure all staff are all following social distancing guidelines. This may require staggered shifts for team members.

## 5.0 Research Operations and Activities

The Office of the Vice President of Research and Innovation has developed a framework for phased re-engagement of on-campus research activities. Recovery will be a long-term transition with a restart process that is scaled gradually and aligned with public health conditions. The framework is informed by the following principles and observations:

- The UO must support and protect the safety, physical, and emotional health of the research workforce.
  - Practical and safety considerations will dictate which activities are allowed in any given UO stage, space, or site.
  - Plans must be designed to protect research personnel from transmission of COVID-19 from research personnel, other UO employees and human subjects involved in research programs.
  - Maximizing opportunities and engagement via remote work is critical and is expected to remain critical at least through 2020.
- The UO must support and protect the well-being of human subjects and research participants.
  - Practical and safety considerations will dictate which activities are allowed in any given UO stage, space or site.
  - Plans must be designed to minimize risks to human subjects, including minimizing exposure to and transmission of COVID-19 while maximizing the benefits to human subjects.
  - Plans for protecting at-risk populations, including those deemed higher risk for the impacts of COVID-19, must be strongly justified.
- Planning and execution of fair, transparent, and accountable processes for access should engage the research community to identify needs and to find solutions that support the research mission.
  - Research groups and Principle Investigators (PI) will need to prioritize their on-campus activities, focusing especially on those that enable further remote work.
  - It's vital to protect the careers of early stage faculty and researchers about to enter the job market.
  - It's vital to also protect significant investments within the research community, including prioritizing ongoing longitudinal studies, cohorts, and associated data, and prioritize efforts where clinical/direct public health services are benefiting the public.
- The UO will engage with leadership and health authorities regarding the best practices and will continue to comply with executive orders and health authority guidance from national, state, local, and university authorities.
  - Plans to re-engage research activities must anticipate changes in guidance and have provisions to adapt to new guidance, including the possibility that researchers may have to retreat to more conservative access to campus.
  - Plans will also need to describe procedures to ensure compliance with external orders/guidance and provide a mechanism for monitoring compliance internally.

### 5.1 Process for Reengagement in On-Campus Research Activities

Disruptions to different types of on-campus research varies significantly across research areas. This staged plan focuses on on-campus activities, with special focus on wet and dry lab access, as most of these must utilize on-campus research infrastructure. UO Research anticipates that subsequent plans will be developed for other areas of research as the recovery continues. All plans are required to enable strict adherence to governmental physical distancing orders.

PIs impacted by this plan must develop and submit a recovery plan for their research group that complies with the principles and rules below. These plans are reviewed through the Research Recovery IMT and Environmental Health and Safety (EHS), in coordination with faculty subject area experts, who determine whether plans are suitable or whether revision is needed.

Each new PI Recovery Plan undergoes this four-stage review process (compliance review by IMT, EHS review, subject review, final IMT review), after which PIs are asked to revise based on reviewer comments.

All research activities must comply with OVPRI enhanced cleaning and distancing guidance. All human subjects' activities must follow [Guidance on Engaging in Human Subject Research during OVPRI COVID-19 Recovery Stages](#). All research involving travel must seek approval from Travel IMT.

Please see the UO Research website for up-to-date information and guidance:  
<https://research.uoregon.edu/covid-19-plans-for-research-recovery>

## 6.0 University Housing and Residential Activities

The UO is committed to meeting or exceeding all of the standards and guidance of the OHA for residence halls and residential dining.

In coordination with other public Oregon universities and with guidance from the OHA, HECC, LCPH, and the CDC, the UO is implementing reduced density in the residence halls. Physical distancing will be implemented throughout common areas and dining halls. No students will live in triples in the residence halls.

University Housing is reducing density and making plans for extra cleaning, particularly in shared bathrooms. Housing is also setting aside entire sections of the residence halls for isolation should they be needed.

### 6.1 Eugene Campus

As part of the comprehensive university readiness planning, staff operating the residence halls/residential dining are following specific guidelines to ensure: maximized prevention efforts, adequate isolation and containment, and care.

#### Room Types

- Shared housing is considered a living unit for cohort isolation and quarantine
- Rooms will mostly be double rooms with some single rooms
- A minimum of 64 square feet will be ensured for each resident
- Some rooms have private bathrooms, some are shared

#### Room Details

- Furniture configurations maximize separation between residents in a shared room as feasible
- Ventilation provided through operable windows; residence halls do not have central ventilation
- Daily cleaning and surface disinfecting inside residence hall rooms is done by residents; cleaning supplies—including EPA-registered disinfectant will be provided by Housing

#### Bathroom Cleaning

- Community bathrooms
  - Deep cleaned and sanitized daily by custodial service and additional daily general cleaning along with sanitizing of touch points using EPA-registered disinfectants
  - Cleaning by students as they use restrooms is highly encouraged before and after use; EPA-registered disinfectants will be provided
  - Touchless soap and paper towel dispensers provided
- En-suite bathrooms
  - Shared by one, two, or three rooms (single or double occupancy)
  - Daily cleaning and surface disinfectant is done by residents; EPA-registered disinfectants will be provided
  - Housing custodial staff will inspect and clean quarterly
- Public bathrooms
  - Located near dining, academic residential community areas, and other areas generally open to the public and guests

## University of Oregon's COVID-19 Health and Safety Operational Plan

- Cleaned and sanitized daily by housing custodial staff; twice-daily sanitizing of touch points using EPA-registered disinfectants
- Self-service sanitizing by restroom users before and after use is encouraged; paper towels from touchless dispensers and EPA-registered disinfectants are provided
- Touchless soap and paper towel dispensers and air hand dryers are provided; use of paper towels to handle common touch points is encouraged

### Common Areas

- Signage and postings
  - Promote six-foot social distancing in all lounges, kitchens, lobbies, laundry rooms, and elevators (signs and floor stickers)
  - Promote hand washing in bathrooms
  - Arrange or remove furniture to promote social distancing
  - Laundry washing instructions
- Cleaning
  - Clean and disinfect high-touch surfaces regularly
  - Include sanitizing stations outside of lounges and/or in the lobby
  - Signage and increased cleaning for community kitchens

### COVID-19 Testing

- As a condition of living in the residence halls, students will be tested for COVID-19 (viral test). The University tentatively anticipates residents will be tested prior to checking into the residence halls and again within three to ten days after check-in. The timing of testing may change and additional testing may be required in response to changing circumstances. FAQs related to testing are available at <https://coronavirus.uoregon.edu/testing>.

### Student Expectations

- Keep six feet (about two arms' length) from other people
- Not gather in groups larger than UO or state guidelines provided
- Follow posted guidelines in laundry rooms, kitchens, lounges, and other common spaces
- Monitor their health, seek medical attention as appropriate, and stay in their residence hall rooms if they feel ill
- Hold oneself accountable to the guidelines.
- Hand washing hygiene
- Cover coughs and sneezes
- Cover mouth and nose with a closed face covering when other physical social distancing measures are difficult to maintain
- Read and follow: <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/index.html>.

## 6.2 Charleston Campus

The housing plan below exceeds the OHA and HECC guideline specifying 64 square feet of living space per person. Each student will have their own bedroom or living space and share a bathroom with only one other student.

Each housing arrangement will be considered a unit for the purposes of quarantine and isolation. Should one student in the unit test positive for COVID-19 and need isolation in a dorm, the other student will be effectively quarantined as well in the original housing unit.

All students will prepare their own meals in their respective housing unit. Dining hall facilities will only prepare meals for students who fall ill and require delivered meals.

Students will be reminded of proper hand hygiene and to complete a symptom self-check before going to class each day (according to the OHA self-check guidelines and UO health regulations).

#### Cleaning and Sanitation

- Living spaces - Students will be required to clean their own living space; OIMB will provide proper cleaning and sanitizing products.
- Classrooms – OIMB faculty, TAs and students will be required to clean and disinfect daily the inside of classrooms (e.g., door handles, tables, microscopes, light switches).
- Common areas – OIMB custodial staff will be required to clean and sanitize common areas (library, dining hall, door handles, light switches) daily according to CDC guidelines.
- PPE (including required face masks, gloves, and more extensive gear for custodial staff) will be available for anyone needing them.
- Sanitizing materials (e.g., hand sanitizer, sanitizing wipes) will be readily available in the OIMB office, classrooms, and common spaces (e.g., library, dining hall).

## 7.0 University Department and Research Unit Level Plans

The IMT Resumption Mitigation Team developed return-to-campus toolkits to assist departments as they develop tailored plans that allow them to slowly and deliberately move current remote operations back to campus over the coming weeks and months.

The guidelines for departmental plans are based on two key principles:

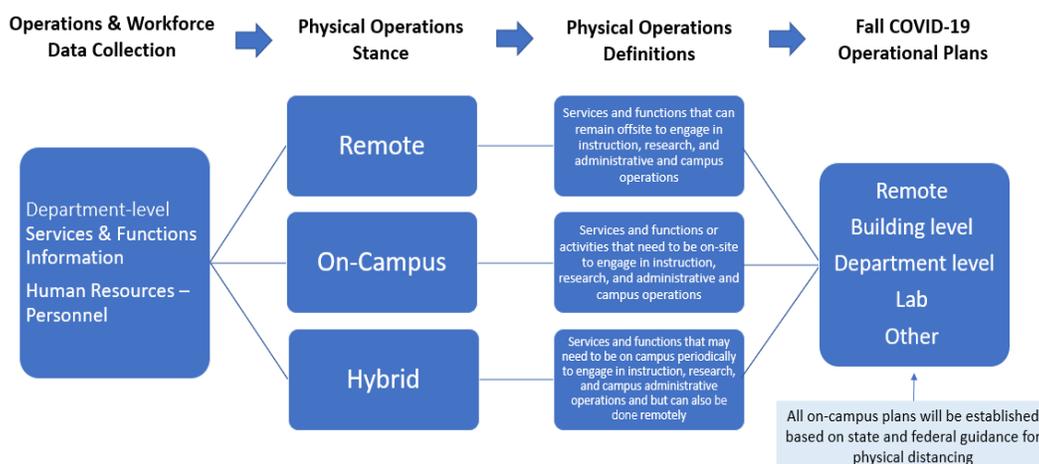
- Maintain the safety and health of the university community by focusing first on functions that are critical to the unit’s operations and that rely on in-person interactions to be most effective. This aligns with the president’s and provost’s stated goal of having students physically on campus in the fall.
- Ensure compliance with federal, state, and local guidance. This includes the State of Oregon’s Re-Opening framework, guidance from OHA specific to employers in general, and in sectors relevant to the work that some departments do (e.g., restaurants, camps, and childcare), and guidance from the CDC on many aspects of operating safely.

The toolkit includes guidance and a template. It provides questions and things to consider along with space to provide responses. The focus is on identifying the critical functions that should be prioritized to resume to in person instruction. The Toolkit lays out plans for how individual department spaces will be physically distanced and the requirement to identify isolation space for individuals who develop COVID-like symptoms and are unable to immediately leave campus. Plans are reviewed and approved by the Resumption Team and copies of departmental plans are kept on file with the IMT.

### 7.1 Planning Templates

- [Department/Unit Resumption Toolkit](#)
- [Centers and Institutes Administrative Return-To-Campus Toolkit](#)

### 7.2 Planning Process



The IMT Planning Section logs and tracks plans that are approved.

## 8.0 University of Oregon Testing Strategy

UO recognizes that the future of the university is interdependent with that of the surrounding community. Further, the UO acknowledges that testing provides a snapshot in time, giving information needed to identify pre-symptomatic and asymptomatic infections and apply individual or community interventions, including mask wearing and contact tracing. Testing does not prevent spread and is not a failsafe method. In collaboration with Lane County Public Health and reflecting FDA guidance on the three types of COVID-19 testing (<https://www.fda.gov/medical-devices/emergency-situations-medical-devices/faqs-testing-sars-cov-2>), UO's main testing efforts can be described in three "pillars":

### ***Diagnostic Testing***

Diagnostic testing is "intended to diagnose an infection in patients suspected of COVID-19 by their healthcare provider," per the FDA. University Health Services has been providing on-site diagnostic services to students. Diagnostic tests are performed when there is a reason to believe the individual may have contracted COVID-19 (e.g., they have symptoms).

### ***Screening Testing***

Screening testing is "looking for an occurrence at the individual level even if there is no individual reason to suspect infection such as a known exposure," per the FDA. Given the risks of congregate living, the UO used screening testing to identify infected residential students as they arrived on campus. UO MAP screening tests are expanding to other students and employees in partnership with Lane County Public Health.

This type of testing is not for symptomatic individuals. Those with symptoms or other indications of COVID-19 would be referred to a care provider for diagnostic testing.

### ***Community Testing***

Random community testing is "generally used to monitor for an occurrence, such as an infectious disease outbreak, in a population or community, or to characterize the occurrence once detected, such as looking at the incidence and prevalence of the occurrence," per the FDA. The UO is providing COVID-19 testing Monday through Thursday to students who live in the residence halls, with at least one student in each room tested weekly. In addition, we encourage the campus community to participate in widespread testing through our voluntary COVID-19 testing for students and employees, offered four days a week.

This type of testing is not for symptomatic individuals; those with symptoms or other indications of COVID-19 would be referred to a care provider for diagnostic testing.

## 8.1 Testing for Students Who are Symptomatic or Have a Potential Epidemiologic Link Eugene Campus

The University Health Services (UHS) is providing testing for students who are symptomatic or might have an epidemiologic link, such as being in close contact to a case. UHS has a separate entrance for individuals who are seeking COVID-19 testing or are experiencing viral symptoms. This entrance is facing Agate Street (the "Agate Street Entrance,") and enables UHS to separate the possibly COVID contagious individuals from other students and employees entering the main entrance to the building on 13th Ave.

Specimens are collected and sent to a reference lab, currently McKenzie-Willamette Hospital, for analysis by the UO- placed polymerase chain reaction (PCR) testing equipment. Results are returned to UHS within 24–48 hours, and students are immediately notified of their results. A student who tests positive is typically advised to isolate for 10 days and notified that they will be contacted by LCPH and will be asked to identify close contacts.

UHS providers and nurses follow up with students who are positive cases with daily calls and check-ins on their health until deemed stable. If a student does not answer the phone, a welfare check will be requested.

### Portland Campus

UO Portland students utilize Portland State University (PSU) Center for Student Health and Counseling (SHAC) for health, counseling, and dental services. The mandatory student health fee that is included with their UO tuition pays for the majority of services, which now includes COVID-19 testing. UO Portland students can call PSU's SHAC for triage on medical care and testing. Depending on this evaluation, students may make an appointment to see a medical provider and/or make an appointment for testing. SHAC will provide guidance to students on quarantine and isolation. PSU's medical director will contact UO's Case Management team director on any COVID-19 positive test results. Case Management, in conjunction with UO Portland staff, will focus on resource assistance, as UO Portland has no on-campus housing.

## 8.2 The COVID-19 Monitoring and Assessment Program (MAP) Team

The UO's COVID-19 MAP team is the group responsible for establishing a CLIA-certified laboratory at UO for processing and reporting test results, and creating processes for sample collections. COVID-19 MAP is co-led by an associate vice president for research and professor in the College of Education and Prevention Science Institute; the executive director of the presidential Data Science Initiative and professor of biology; and the university's chief procurement officer. It includes more than 50 additional UO members, including a lab director and lab technicians, a field collection team, a data science team, a community collaboration team, and graduate students and faculty from multiple departments. The COVID-19 MAP project plan includes the following elements:

- Create a baseline understanding of the prevalence of COVID-19 at UO and its surrounding community through regular surveillance testing;
- Employ epidemiological models to forecast the spread and prevalence of COVID-19 in the population as the level of public activity changes and as new students join the population;
- Use the results of the modeling to recommend strategies that local officials and university leaders can enact to suppress the spread of COVID-19 as activity and population changes occur; and
- Provide data that can be used to validate and improve the efficacy of intervention strategies through continued surveillance testing.

This project is the best way to both leverage UO's strengths and to fulfill UO's mission in its response to the COVID-19 crisis. It is hoped that the results of this project, along with other mitigation efforts, will create a pathway for UO to safely reopen for on-campus activity in the fall 2020 term. UO is not on an island; the success of the project is dependent on effective coordination with local health authorities and community partners and is meant to benefit the greater UO community as well.

### 8.2.1 MAP Capacity Overview

- The University of Oregon has established a CLIA certified laboratory.
- The laboratory presently has ability and capacity to run FDA-approved qPCR tests using swabs
- The laboratory is working to expand capacity in three ways:
  - Begin testing saliva with FDA authorization through SalivaDirect protocols as well as nasal swabs with qPCR and eventually with NGS
  - Increase lab automation through robotics and automation of sample tracking
  - Expand the number of tests that can be processed at a time by utilizing next generation sequencers (NGS) in addition to qPCR

## 9.0 Contact Tracing and Contact Monitoring

The UO supports the county’s contact tracing efforts through an intergovernmental agreement with LCPH by which the UO provides its Student Corps to Combat Coronavirus (or “Corona Corps” for short) to reach out to contacts of positive cases in Lane County (which includes the UO community) to monitor symptoms, connect contacts to testing if warranted, and to connect contacts to case managers who can help them with resource assistance for the duration of their 14-day or longer quarantine period. The contacts are assigned to the Corona Corps by LCPH and may include UO students or employees. If a Corona Corps member knows a contact, they are asked to abstain from calling the individual and another caller would be asked to do so. LCPH and UO partnered on extensive training for the Corona Corps members, and the work commenced July 1, 2020. HIPAA and FERPA regulations are a focus of the training.

The Corona Corps call center is located inside the UHS building, and is staffed from 8:00 a.m. to 5:00 p.m., seven days a week. Staffing reserves are recruited, trained, and prepared to scale-up should the cases in the county surge. Surge deployment of the reserves is at the direction of LCPH. The Corona Corps is a collaboration between the Global Health Institute and the UHS, co-directed by a faculty member from the psychology department and a public health professional from the UHS.

### 9.1 COVID-19 Campus Case Management Response and Support

Students and employees impacted by COVID-19 may need support for daily living in order to comply with isolation (for those individuals testing positive for COVID-19) or quarantine (for those individuals who have been within close contact of someone with confirmed COVID-19). Isolation and quarantine can have a serious impact on students living on and off campus, as well as on employees. Social services and wraparound support that UO can uniquely provide to its students and employees to help keep them in isolation and quarantine will help UO control the spread of COVID-19. Employees—and supervisors—also need help in navigating the human resources processes related to COVID-19. More information about the campus case management response and support can be found in Appendix D.

#### 9.1.1 Support for UO Students and Employees: The COVID Care Response Team

As a result of the community’s experience in early summer 2020 with the “college-age cluster” of cases, which included students from the UO community and large numbers of contacts associated with cases in this age population, LCPH asked the UO to help with supporting its students and employees with case management (resource assistance). Furthermore, an enterprise-wide system of support for students and employees is needed to support university activities related to COVID-19, including through the creation of a sustainable structure for managing cases and contacts and providing assistance not only to students and employees but also to supervisors.

The IMT Case Management Team (CMT), is working to develop a centralized structure or hub called the COVID Care Response Team. This team would be created through a collaboration between the UHS, the DOS, and HR, and would work at the direction of the branch director of the CMT (who also is a public health professional and leader within UHS). To meet LCPH’s interests, this team can become a resource to not only the university but also to members of the university community, by LCPH request and as capacity warrants. Should excess capacity be available, case management services also could be provided to members of the broader Lane County community.

The COVID Care Response Team will handle intake of information regarding cases and perceived/possible exposures on campus, provide first-tier guidance with regard to workplace issues, and provide resource assistance to UO community members identified as cases and contacts to properly isolate and/or quarantine, which may include referrals and support related to basic needs, such as access to food, health care, mental health, and financial support (these vary depending on the individual's affiliation (student vs. employee), as well as referrals to more extensive support (e.g., the Employee Assistance Program for employees).

### 9.1.2 Isolation and Quarantine Protocols for Residential Students

Isolation is used for individuals who test positive for COVID-19, and its purpose is to slow the spread of the disease by separating positive individuals from people who are not infected.

Quarantine is used for individuals who may be exposed to a positive case, and its purpose is to slow the spread of the disease by separating and restricting the movement of individuals who were exposed to minimize the exposure of others and to monitor them if they become symptomatic.

University Housing has set aside an inventory of 245 isolation/quarantine rooms for students living in UO residence halls (about 4 percent of total inventory, in accordance with national guidelines). When a UO Housing student is identified as a confirmed COVID-19 case or contact, or has symptoms without a better explanation, the student is assigned to a new isolation or quarantine space with a private bathroom. If there are multiple students who have tested positive at the same time, in selected cases, it may be possible to cohort them in rooms with a shared bathroom. Students who are positive cases or contacts are instructed to not leave the isolation or quarantine space unless they are instructed to do so by the UHS, their medical provider, or LCPH. Isolation procedures are coordinated between the CMT, the COVID Care Response Team, UHS, LCPH, and University Housing. University Dining Services provides food delivery in a way that requires no contact between delivery person and isolated resident. Custodial staff will use appropriate PPE when cleaning isolation and quarantine spaces. Residence Life staff will provide appropriate community care and programming remotely. UHS staff provide daily health checks for isolated students who are positive cases. If the UHS cannot reach a student, a welfare check will be conducted only after the following has been determined:

- Depending on the scenario, if the student has not been reached by anyone within the past 2-4 hours.
- Dining Services confirms that they have missed a meal.
- Professional staff on call have knocked on the door and put a note under the door to try to contact the student and ask the student to state verbally that they are there and okay.

Residential students at OIMB will isolate in their own room with food delivery provided by OIMB management. If they do not have their own room, they will be moved to the residential dining hall so they may isolate there. OIMB management will contact the student once they are isolating to review the information about isolation and confirm that meal delivery needs will be met.

### 9.1.3 Responding to Reports of Employee Cases and Exposures

HR and UHS have developed a set of case/contact scenarios, with associated action steps to be taken. These scenarios will be shared with employees and supervisors. Supervisors are also advised to contact the Employee and Labor Relations team in HR for further assistance as needed. The COVID Care

Response Team outlined above is also an initial resource for supervisors, employees, and employment-related concerns.

## 10.0 Concerns Specific to Off-Campus Students

The Dean of Students office coordinates educational communications to students living off-campus, in partnership with University Communications. This includes, but is not limited to, expectations on student behavior and campus support referrals.

- Respond to “student of concern” reports submitted by local community members. This includes outreach to students as well as reporting parties.
  - Send out educational notice for first-time offense. Track receipt of messages and respond to follow-up questions.
  - Forward to Student Conduct and Community Standards for multiple offense, egregious behavior, or student group situations.
- Assist students living off-campus who become impacted by COVID-19: communicate university resources, coordinate care efforts, and respond to student inquiries. Coordinate outreach efforts with the CMT and the COVID Care Response Team.
- Serve as a liaison between the UO campus and local area landlords and property managers to address student concerns. Coordinate monthly briefings for this group to foster a positive, collaborative relationship.
- Conduct assessment to determine the number of students living off-campus and their needs of the university.
- Serve as point of referral for Parent and Family Programs when parents reach out for student assistance off-campus.

## 11.0 Athletics

UO Athletics has been working with various campus, public health, and medical advisory entities to implement a thoughtful, cautious strategy to support appropriate phased progressions to return to sport prioritizing the safety and health of the UO student-athletes while minimizing all public health risks. The entities include the NCAA, Pac-12 Medical Advisory Board, and UO IMT, who also insure collaboration and compliance with directives from LCPH and OHA.

Student-athletes have been invited back in small groups to manage a measured onboarding process, which includes seven days of self-isolation upon return to Eugene, conducting an antibody test to direct additional medical assessment, PCR test for coronavirus, and a health assessment and physical examination by athletic medicine staff prior to initiating activity.

Practices include directed traffic flow through facilities to maintain physical distancing, requiring face coverings, scheduling access to limited facilities, conducting activities in small groups, sanitizing equipment after each use and facilities throughout the day, as well as multiple education opportunities to emphasize the importance of following established health and safety requirements.

Physical activities have been initiated through a staged approach starting with voluntary strength and conditioning workouts in consistent cohorts over the past few weeks. A protocol to begin sharing equipment with additional sanitation was recently implemented, with plans to progress training in functional units and gradual exercise progressions; the goal is to implement all safety recommendations when it is permissible to move to full practice. UO Athletics continues to receive updated guidance from the NCAA and Pac-12 Medical Advisory Board and their experts to monitor testing methodologies, implement serial testing protocols, and to follow all best practices as we move toward returning to competition. These include established sport classifications based on contact risk to determine testing frequency and timing based on types of activities and competition considerations, universal masking, protocols for game officials, and team travel. Strategies for resumption of activities following a positive test have been established for asymptomatic and symptomatic individuals and those who are quarantined as a high-risk contact.

Criteria to continue training progressions are defined relative to ability to limit and isolate new cases, perform adequate contact tracing, and ability to quarantine high-risk contact cases, availability and ability to perform symptomatic surveillance or pre-competition testing when warranted, campus-wide or local community test rates that are considered safe by local public health officials, local public health officials state that there is an ability for the hospital infrastructure to accommodate a surge in COVID-related hospitalizations. Finally, the importance of risk reduction for student-athletes when away from the athletic arena cannot be overemphasized.

## 12.0 Non-Educational Public Health Guidelines for COVID-19

UO operations, beyond in-person instruction, research and residential activities (including but not limited to on-campus childcare, youth camps, administration, athletics, retail businesses, and restaurants), must comply with other applicable Executive Orders and sector-specific OHA guidance, including guidance applicable to the re-opening phase where the county, college, or university is located. With regard to industry-specific guidance, namely retail, restaurants, childcare, and camps, the IMT works with, and serves as a resource for, the relevant units outlined below as they work to ensure compliance with COVID-19 related changes to the existing industry specific standards they typically follow. New processes have been implemented to ensure compliance with guidelines for venues, events, and travel. These are outlined below.

### 12.1 Non-Higher Education OHA Guidelines

The UO will adhere to all sector guidance as it is updated. Effective November 18 – December 2, 2020, [Executive Order 20-65](#) Temporary Freeze to Address Surge in COVID-19 Cases in Oregon.

OHA COVID-19 Guidance	UO Operations
Guidance for Employers	All UO employees, contractors, and vendors.
<a href="#">Retail</a>	All retail operations on UO owned, controlled, or leased property, e.g., EMU and café shops.
<a href="#">Outdoor Recreation</a>	All outdoor recreation activities on UO owned, controlled, or leased property, e.g., Student Recreation Center and EMU.
<a href="#">Restaurants</a>	All restaurants on UO owned, controlled, or leased property, e.g., EMU, Living Learning Center, and University Catering.
<a href="#">Childcare</a>	All childcare facilities on UO owned, controlled, or leased property, i.e., Vivian Olum and Moss Street Child Development Centers and the Co-op Family Center at Spencer View Apartments.
<a href="#">Camps</a>	All UO affiliated camps held on UO owned, controlled, or leased property.
<a href="#">Venue and Event</a>	All events held on UO owned, controlled, or leased property, e.g., Jordan Schnitzer Museum of Art, Matthew Knight Arena, and EMU.
<a href="#">Travel</a>	All UO related travel, e.g., domestic and international travel for faculty, staff, and students.

### 12.2 Venue and Events

The criteria set forth in this section is subject to change dependent on guidance from the OHA and the CDC. The IMT will continue to monitor guidance and update this section as needed.

Campus spaces and buildings are only open to members of the general public that are involved in an approved university endeavor. Only UO-affiliated programs will be allowed to host educational or research camps, clinics, and activities on campus.

Criteria for resumption of campus events includes the following:

- Activities on the UO campus or UO-managed properties. If seeking approval for an event that involves travel, refer to UO Travel Waiver.
- The university department that manages the property providing the event venue must have its resumption plan approved by IMT before the event may be considered. Approved venue staff

will be trained in current OHA guidelines and UO procedures to assist event organizers through the planning process.

- Single-day activities only. Overnight activities are not permitted in the current phase.

In the process of planning the event, organizers must:

- Develop physical distancing plans based on current requirement of 35 square feet per person as outlined in OHA Guidance for Gatherings. Most spaces on campus have already been assigned new capacity numbers based on IMT's accepted practices.
- Develop cleaning and disinfecting plan for high touch points and equipment.
  - Restrooms will be the responsibility of building custodial staff at the cost of the event.
- Develop plan, including adequate and visible signage throughout the venue, to actively promote COVID-19 prevention activities to staff and participants:
  - Encourage people to stay home if they have COVID-19 symptoms and/or if they are at risk for severe complications (over age 65 or have underlying medical conditions).
  - Require people to wear a face covering as currently ordered by the OHA.
  - Encourage guests to practice good hand hygiene with frequent handwashing for at least 20 seconds or use hand sanitizer (60-95 percent alcohol content).
  - Encourage guests to cover coughs/sneezes with elbow or tissue. If a guest uses a tissue, they should immediately discard the tissue in garbage and wash their hands.
  - Encourage guests to avoid touching their face.

Campus event resumption requests are evaluated based on:

- Compliance with university core mission of education and research.
- Physical distancing and cleaning/disinfecting plans.
- Facility availability, with attention to rooms and/or buildings that may not be available due to preparation for fall term.
- Availability of custodial staff to support cleaning and disinfecting requirements.
- Current OHA phase guidelines.

### 12.3 Travel

The criteria set forth in this section is subject to change dependent on guidance from the OHA and the CDC. The IMT will continue to monitor guidance and update this section as needed. Effective March 15, 2020, all non-essential university travel, both international and domestic (including local travel by motor vehicle), was suspended until further notice. Faculty and staff may submit a travel waiver petition for essential travel—with the approval of their respective dean or vice president—to the IMT Travel Advisory Group using the travel waiver request form. The UO IMT tracks the COVID-19 situation for campus and responds as quickly as possible to sudden changes in travel restrictions.

<https://coronavirus.uoregon.edu/travel>

## 13.0 Campus Engagement

The UO established several work groups to focus on key aspects of engagement, including student engagement, student crisis response, and employee engagement. The goals for the engagement work groups were to:

- Develop agile strategies and direct action to minimize the disruption to UO students, faculty, and staff through effective communication, engagement, academic planning, research, and service; and
- Identify opportunities to inspire UO students, faculty, and staff to actively engage in and accelerate the university's recovery and strengthen its mission.

The work of an academic continuity work group, which is described elsewhere in this plan, includes a focus on faculty/instructor engagement as part of its work. The work of a research continuity work group, also described elsewhere, includes a focus on researcher engagement as part of its work.

### 13.1 Student Engagement

The student engagement work group, along with partners across the university, is working to ensure that the UO provides “the greatest level of choice and flexibility to equitably support student access and success in their education while minimizing risks to students and staff.” (*HECC-OHA Guidance, Key Principles, p. 1*). Throughout this work, the group is committed to “prioritizing equity and addressing racial disparities on all responses,” as encouraged by the *State of Oregon Equity Framework in COVID-19 Response and Recovery*.

With respect to student engagement, efforts include:

- The promotion of safe, physically distanced small-group engagement opportunities that are face-to-face (preferably outdoors), remote, and/or hybrid;
- Alternative programming that allows students to engage with UO and be constructively and creatively connected to peers and faculty, whether on campus or remote;
- Inclusive communication to various stakeholders using multiple methodologies and accessible formats and messaging that reinforces the importance of ways to reduce health risks;
- Targeted student advising and student support services that are conducted remotely or safely distanced when in-person;
- Supporting student-sponsored groups so they may hold safe, successful engagement activities by developing tools, providing infrastructure and access to appropriate space, and logistics, etc.;
- Engaging with and empowering a diverse range of student advisory groups to inform and influence planning and implementation;
- Disaggregated data-informed decision making on student engagement strategies; and
- Widespread campus consultation on planning, implementation, assessment, and improvement.

The primary objective with student engagement is to achieve institution-wide coordination and alignment of student outreach and engagement strategies and tactics to ensure student retention and success are not disrupted by COVID-19.

The student engagement work group is charged with the following:

- For academic year 2020-21, envision the future of student engagement at UO, through:

- Creation of an evidence-based, student engagement theoretical framework that informs decision-making, including operational changes and new offerings;
- Enhancing strategic collaboration and campus partnerships; and
- Ensuring academic and social integration through effective student engagement experiences, with attention to the creation and management of students' expectations.
- For academic year 2020-21, create meaningful connection opportunities and community for students to improve student retention and success. In doing so:
  - Ensure support and care are provided to undergraduate and graduate students, paying special attention to the unique needs of underserved and underrepresented students.
  - Establish a system and process for tracking and sharing student outreach and engagement activities.
  - Ensure students are aware of and connected to resources and engagement opportunities.
- Explore and execute strategies to link, align, and leverage outreach and engagement initiatives including coordinated outreach and inter-unit referrals.
  - Develop and implement cross-functional initiatives as appropriate to maximize student engagement impact.

There are three sub-groups within this work group engaged in the following areas:

#### Engagement Initiatives and Events Tracking and Coordination

- Develop a system or process to document and share comprehensive student engagement activities and opportunities between campus offices. This involves:
  - Developing a master calendar that includes 2-3 large programmatic efforts each week of fall term that can be promoted in advance to incoming and returning students.
  - Identifying overlap and gaps in student opportunities and offerings.
  - Considering opportunities that provide faculty connection and peer-to-peer connections.
  - Increasing intentional collaborations across key units in order to increase creative offerings for students that increase their sense of belonging.
  - Aligning co-curricular efforts in a collaborative manner as to honor a potentially reduced work force.
  - Considering an assessment framework for a student engagement program or activity to understand impacts and effectiveness and inform improvements to current practices.

#### Operationalizing Student Co-Curricular Connections and Logistics

- Consider implications of a modified fall term, develop a logistical approach, while maintaining effective connections, equity, and health and safety:
  - How can programming shift to accommodate smaller-sized crowds?

- What infrastructure, technology, or tools are needed to successfully deliver engagement opportunities while maintaining physical distancing?
- How can we align promotional efforts to students in a virtual format?
- How to ensure opportunities are designed with equity in mind (e.g., universal design, the Division of Equity and Inclusion's LACE Framework).
- Serve as consultants for creative adjustments to programming for student groups and others planning events including providing support to ensure they are active and actively engaging students.

#### Stakeholder Outreach

- Coordinate and align outreach to students in a virtual format.
- Coordinate stakeholder outreach around student engagement.
- Identify and target students who are not engaged by:
  - Inter-unit referrals and partnership.
  - Student engagement capacity building, growth mindset, help-seeking.
  - A framework of Love Authenticity Courage and Empathy (LACE)

#### 13.1.1 COVID-19 Student Crisis Response

The primary objective of the student crisis response work group is to ensure intra-institutional awareness of various student crisis support strategies and tactics to allow for better prioritization, collaboration, and resource allocation, and to create opportunities to link, leverage, and align university resources and stakeholders.

This work group's charge is to:

- Serve as an advisory team focused on coordinating emergency funding for students across campus.
- Take stock and inventory of crisis funds available across campus.
- Develop materials to make students aware of fund availability and eligibility criteria.
- In collaboration with the Office of the Vice President for Finance and Administration/CFO, the Business Affairs Office, the Office of Student Financial Aid and Scholarships, monitor available federal CARES Act emergency funds for students, developing programs to assist students, and monitoring usage of the funds.
- Assist the Office of Development in fundraising for the Students in Crisis Fund as requested. This fund is a program through which gifts may be made to support UO students in need during this critical time.
- Refer to financial literacy resources and advise financial wellness center (when up and running) of trends noticed in students.
- Advise on assessment needs to measure impact of granted funds.
- Serve as an advisory group to campus.

#### 13.1.2 Student Community Behavior Expectations

A work group has been convened to consider the community standards and behavior expectations for students that support health and safety during the COVID 19 pandemic.

The UO has identified the need to fully communicate broadly what the expectations are for the campus community regarding health and safety in relation to COVID 19. A key part of this is ensuring that student behaviors and activities support the institutions goals for personal and public health.

The work group's charge includes the following:

- Ensure that health and safety standards are communicated effectively to students.
  - Anticipate and prepare for implications of, and reactions to, COVID-19 public health mandates (e.g., face covering requirement, physical distancing).
  - Civil rights and equity considerations related to such mandates or new standards.
  - How to get buy-in from students related to the new health and safety standards.
- Implications of a modified fall term in advance.
  - Communication about community COVID-19 safety standards.
  - Work with Communications staff to set a campaign focused on education and enculturation.
  - Enforcement of COVID-19 safety standards and discipline process.
  - Partnering with other IMT work groups to infuse community expectations in the classroom, at events, and in off-campus environments that involve large numbers of students.
- Coordination and engagement of off-campus housing (including FSL chapter houses). This work group is also the primary point of contact for those with a stake in the behavior of students who live in off-campus, non-UO housing. The work group plans to host a series of virtual meetings with these stakeholders to present community expectations and communication strategy and campaign information, and to share campus resources as ways to increase partnerships. Meetings will be sought with the following constituents:
  - Property managers
  - Neighborhood association board chairs
  - Board of the University District Business Association
  - Mayor and city council
  - UO's Religious Director's Association

### 13.1.3 Fraternity and Sorority Life (FSL) Engagement

The university, through a dedicated team in the Office of the Dean of Students maintains regular contact with fraternities and sororities, as well as individual members. Many have been looking to the UO for guidance. Within the context of the pandemic, the FSL team created a [section on its blog](#) where resources and local, state, and federal guidance are shared.

While limited in terms of regulating FSL chapter facilities, the current Student Conduct Code failure to comply violation gives the university some ability to extend oversight to organizations as it relates to behavior.

The DOS is works with LCPH to arrange a meeting between LCPH and the FSL facility on periodic basis to share information and resources on prevention.

In the fall-term, the DOS asked presidents of fraternities and sororities to complete a workbook, modeled after a similar document at Washington State University, that covers several areas related to the pandemic, i.e., behavioral expectations, meetings and social activities, communications related to

COVID-19 cases and exposures, meal service, sleeping arrangements, cleaning, restrooms, and visitors/guests.

## 13.2 Employee Engagement

Employee engagement efforts assist in supporting an inclusive campus environment that values diversity. This work includes:

- Share and track what existing programs and policies can be leveraged to increase individual employee engagement as well as empower and assist managers and supervisors to increase and enhance the engagement of those they supervise.
- Collect and communicate:
  - Ideas for engaging and motivating a creative workforce via a variety of relatively low-cost solutions along with providing resources and templates;
  - Approaches to consistently recognize and value employees in both large and small ways at all levels of the organization;
  - Methods and resources so that engagement and recognition ideas may be adapted for individual units, and
  - Resources for supervisors to build their skills to support innovation, creativity, and engagement.
- Link, align, and leverage employee engagement efforts, resources, and initiatives to complement and enhance each other and their impact on the campus community.

### 13.2.1 COVID-19 Employee Safety Reopening Committee

The UO COVID-19 Employee Safety Committee is an ad-hoc joint university committee consisting of members of the administration and representatives of the various employee groups. This includes five unions: the Graduate Teaching Fellows Federation, United Academics (faculty), Service Employees International Union, UO Police Association, and Teamsters. Other employee groups represented include the Officers of Administration Council (non-union association for UO administrative staff) and unrepresented faculty.

The committee meets to discuss and provide feedback on safety and planning issues related to reopening that involve employees. The institution also provides regular planning updates to the group, engages them on implementation questions, and seeks their feedback on policy concepts and how to best educate UO employees with respect to reopening and the various health and safety strategies and protocols.

## 14.0 Communications and Marketing Plan Summary

University Communications is responsible for communications and marketing counsel and support for the UO's plans to resume safe and responsible on-campus learning, working, living, research, and experiences. This is vital to meet the UO's mission of teaching, research, and service, and ensure the institution's long-term success.

A leadership team is overseeing the work several dozen communicators across campus who staff daily an IMT Communications command center as well as provide strategy, create content, deploy messages across channels, and measure success in support of the university's COVID-19 response and planning.

### 14.1 Integrated Communications and Marketing Objectives

- Meet requirements – Meet OHA state requirements in COVID-19 plan for communicating about health guidance, control measures, policies, and expectations about personal health behaviors, positive cases, and case management.
- Influence health behaviors – Educate and inspire individuals to take personal actions that safeguard themselves and community members.
- Instill confidence and trust – Demonstrate expertise, care, coordination, and best practices for resuming on-campus activities and continued response to COVID-19.
- Enhance and protect reputation – Demonstrate the UO's impact and importance in educating students and creating discovery.

#### 14.1.1. Key Messages

- Health is our top priority – The UO cares about its community. The university is safeguarding health and safety by taking measures to reduce the spread of COVID-19.
- Protect yourself, protect your community – Each of us can help limit the spread of COVID-19 by taking personal responsibility to:
  - Wash your hands. Don't touch your face
  - Wear a face covering when inside or near others while outside
  - Check for symptoms and stay home if you are sick
  - Keep 6 feet apart. Avoid large gatherings
- We care about our students' futures and our community's recovery – We are working hard not to disrupt the educational journeys of our students. Safe, responsible in-person learning, living, and research are important for student success, innovation, and the community's economic health.
- We help solve COVID-19 challenges – The UO is taking a lead role in helping our community respond to COVID-19, recover, and get back to life, through activities and research.
- We value and appreciate our faculty, staff, and employees – We are grateful to employees' resilience, recognize their challenges, and are working to address their concerns and engage them in solutions.

### 14.2 Areas of Focus and Strategies

#### 14.2.1 Operations and Resumption

Communicating about COVID-19 impacts on operations and plans and messengers designed to help limit the spread of COVID-19.

The university is communicating regularly and consistently about the following topics to plan for in-person activities:

- Health authority guidance and state orders
- Status of university operations and activities and alert levels
- University actions, policies, and space or scheduling modifications to help limit the virus' spread
- Expectations and polices related to personal health behaviors
- Information on positive cases, testing, and contact tracing

*Strategies for sharing information:*

- Direct emails from leadership to faculty, staff, GEs, and students related to major operational status decisions, and targeted email to supervisors, deans, and directors.
- COVID-19 Updates – Twice weekly (or more frequently) emails to all faculty, staff, and students about regulations, planning, positive cases, technology support, and other COVID-19 issues
- *Around the O* and *Workplace* emails – Weekly email on employment-related COVID-19 news, daily stories explaining actions, operations, or regulations
- Dedicated webpages – Regular updates to webpages and FAQs to reflect any new information
- Social media – Regular updates to all UO channels about operations
- Town hall meetings and webinars
- Signs, posters, stickers, and banners that make clear operational stance, physical distancing, and other regulations or expectations
- Dedicated feedback/questions email – We staff a dedicated email web form to answer questions from staff, students, parents, faculty, and the community about the impact of COVID-19 on the university and how we are responding.

#### 14.2.2 Health Behaviors Communication

Communicating policy and influencing UO community members to take actions that protect themselves and others through their personal health behaviors.

University Communications is producing a comprehensive marketing and communications campaign to reinforce adherence to the federal and state guidelines promoting safety on the UO campus.

Communications will provide a toolkit of resources, reminders, advertising, and guidelines to support key health behaviors. The campaign will leverage existing communications channels to amplify the core messaging to resuming in-person activities.

Strategies for influencing behaviors:

- Design surveys and closely monitor channels to keep relevant data coming into the team.
- Normalize behavioral change on and off campus. Increase individual awareness of community participation in behavioral change. (e.g., via social media campaign, making masks available, releasing survey data).
- Leverage social media channels and peer influencers to bring relevance to the situation and personalize for individuals and specific student groups. (e.g., illustrate the chain of infection, the severity of what is going on, facts and information campaign).
- Produce videos that supply facts but also engage with students.
- Provide tools, data, and talking points for individuals to participate in health-promoting behavior.

- Design opportunities for peer-to-peer influence.

### 14.2.3 Case Management, Testing, and Contact Tracing Communications

Informing the UO community and public about positive cases at UO and related impacts. Communicating about the COVID-19 Monitoring and Assessment Program (MAP) and how it is helping the UO community and beyond.

Campus positive case response: University Communications works in collaboration with the UHS to provide timely updates on all positive and presumptive positive COVID-19 cases among UO students and employees who are in Eugene, Portland, or Charleston. Information is posted on the dedicated UO COVID-19 Cases webpage and shared via email in the COVID-19 Update as soon as cases are confirmed by the county health authorities and conveyed to Communications via the UHS.

Contact tracing: University Communications has two representatives on the UO COVID-19 case management branch to guide the group in communications protocols for UO cases on and off campus in Eugene, Portland, and Charleston, and the UO-guided contact tracing associated with those cases.

Testing: University Communications supports the UO COVID-19 Monitoring and Assessment Program with message development, participant communications, media relations, and talking points. Communications also works with University Advancement in donor-focused messaging to raise funds for the program.

### 14.2.4 Research and Community Impact

Communicating about UO research, instruction, and services that help create COVID-19 solutions and knowledge. University Communications is sharing through owned, shared, and earned channels the stories of COVID-19 research by faculty and service projects by the university.

### 14.2.5 Examples of Campus Communication



We all have a role in protecting the health and safety of the University of Oregon community.

The UO is committed to safeguarding our community and creating a healthy campus environment by monitoring COVID-19's prevalence, adapting our operations and programs, requiring healthy behaviors, and working with public health partners to reduce the virus' spread.



Here is the current information related to university operations and programs. The latest information is available on the [UO COVID-19 information](#) and our [COVID-19-related FAQs](#).

**NEW:**

- Two additional University of Oregon students are determined to be positive COVID-19 cases in Eugene, for a total of 32 cases. The students are recovering in isolation. Lane County has confirmed that the cases are connected to the college-age cluster reported by Lane County Public Health (LCPH). LCPH officials are conducting contact tracing and monitoring for individuals associated with these positive cases.
- LCPH reported today in their press conference that they are seeing an increase in travel-related cases, household transmission, small group transmission, and signs that new cases in the college cluster have been slowing down.

### 14.2.6 Examples of Campus COVID-19 Prevention Posters



## 15.0 Policies, Enforcement, and Complaint Process

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***Internal enforcement and complaint process:** Each college and university must designate an employee or officer to implement and enforce, or supervise the implementation or enforcement of, the requirements in paragraph 3, the written plan described in paragraph 4, and such other related guidance as the HECC may promulgate. Each college or university must establish or designate a complaint process or processes for receiving and responding to concerns regarding these matters.*

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EXECUTIVE ORDER NO. 20-28 OPERATION OF HIGHER EDUCATION INSTITUTIONS DURING CORONAVIRUS PANDEMIC

### 15.1 Policies

Safety is the responsibility of all UO employees and students. Observations of unsafe actions or conditions should be reported to the university. The following UO policies outline the responsibilities and expectations for the campus community around safety compliance.

Below are links to two of the primary policies:

[Policy Number IV.05.10 Pandemic Response Regulations \(Temporary Policy\)](#)

[Policy Number IV.05.01 Safety - Physical Space and Environment](#)

### 15.2 Enforcement

The IMT's Incident Commanders are designated to implement and enforce, or supervise the implementation and enforcement of, the standards and requirements provided by OHA and established in this plan.

Human Resources is designated to oversee the implementation and enforcement of the OHA standards and requirements for all employees. Employees who do not comply with these safety policies and expectations are subject to progressive discipline in accordance with any collective bargaining agreements and/or employment contracts in place.

The Office of Student Conduct and Community Standards is designated to oversee the implementation and enforcement of the OHA standards and requirements for all students. Students who do not comply with these safety policies and expectations are subject to progressive discipline in accordance with the Student Code of Conduct.

### 15.3 Complaint Process

COVID-19 related safety complaints or concerns can be directed to a centralized [reporting form](#) located on the UO Coronavirus website. Any type of safety concern can be reported: face covering violations, not maintaining physical distancing, or other concerns. Reporting parties can leave their name or remain anonymous. The reports are routed in the following ways: reports about students go to the Office of Student Conduct and Community Standards, reports about individual employees go to Employee and Labor Relations, and reports about departments or non-individual reports are routed to Environmental Health and Safety.

## 16.0 Community Recovery and Engagement

The Community Recovery and Engagement branch has convened several local meetings between the City of Eugene, City of Springfield, and Lane County. These meetings have been designed to bring recovery efforts together to improve communications, expedite processes, reduce duplication of work, and find opportunities to collaborate on regional recovery efforts between the public agencies.

The Institute of Policy Research and Engagement (IPRE) and its program Resource Assistance for Rural Environments (RARE) have developed strong partnerships with seven of Oregon's 12 [Economic Development Districts](#), reaching about three quarters of the state's geographic area. Through RARE's partnership with Ford Family Foundation, Oregon Main Street, Travel Oregon, Oregon Food Bank, and Energy Trust of Oregon, RARE's AmeriCorps members will be working across the state helping to build economic recovery and resiliency plans in rural communities. IPRE is working with Business Oregon, League of Oregon Cities, and Association of Oregon Counties to develop recovery and resiliency frameworks in support of member communities and businesses. Additionally, there are plans to engage further with Oregon Business Industry, Greater Portland Inc., and the various chambers and business associations across the state to support a statewide economic recovery that will be critical to the long-term health of the state of Oregon.

Published white papers from IPRE on economic recovery and testing and contact tracing have received wide distribution and sparked questions and conversations about the most effective ways to rebuild the economy and keep Oregon open and healthy. More white papers are in the works.

Below are the mission, charge, and objectives of the division.

### 16.1 Community Recovery and Engagement Mission

- Broadly supporting response and recovery efforts throughout the state

### 16.2 Community Recovery and Engagement Work Group's Charge

- Conveners, connectors, partnership builders, boundary spanners
- Connect across disciplines
- Convene people and create a framework for statewide recovery
- Create partnerships around needs that can create significant impact
- Use expertise to develop recovery frameworks that we can share with others
- Align existing efforts to reduce duplication of effort
- Leverage university's knowledge and connections to support recovery

### 16.3 Community Recovery and Engagement Workgroup's Activities

#### 16.3.1 Economic Impact and Recovery

- White paper: [\*The Roadmap to Keeping Oregon Open Part I: Establishing the COVID-19 Capacity for Testing and Contact Tracing Required to Keep the State Safe and Open\*](#)
- Modeling out scenarios, convening experts on economic topics
- Developing and supporting public-private sector models that support private business activity
- White paper: [\*Responding to the Economic Impacts of Coronavirus: A Proposed Oregon Economic Recovery and Resilience Framework\*](#)

#### 14.3.2 Applied Research

- Offer community organizations and municipalities research expertise to address complicated issues and support policy
- Equity and inclusion professionals, both administrative and research
- [Institute for Policy Research and Engagement](#) / [Resource Assistance for Rural Environments](#)

## Appendix A: University of Oregon Pandemic Plan

[https://www.uoregon.edu/sites/www2.uoregon.edu/files/uo-eop\\_part-111\\_annex-i-pandemic\\_060514\\_rev02-2020.pdf](https://www.uoregon.edu/sites/www2.uoregon.edu/files/uo-eop_part-111_annex-i-pandemic_060514_rev02-2020.pdf)

## Appendix B: Governor Brown's Executive Order N. 20-28

[https://www.oregon.gov/gov/admin/Pages/eo\\_20-28.aspx](https://www.oregon.gov/gov/admin/Pages/eo_20-28.aspx)

## Appendix C: Oregon Health Authority's COVID-19 Standards

<https://www.oregon.gov/highered/about/Documents/News-Updates/OHA-HECC-higher-education-health-standards-covid-FINAL.pdf>.

## Appendix D: Additional Information on Case Management and Case Response

### The COVID Care Response Team

As a result of the community's experience in early summer 2020 with the "college-age cluster" of cases, which included students from the UO community, and large numbers of contacts associated with cases in this age population, LCPH asked the UO to help with supporting its students and employees with case management (resource assistance). Furthermore, an enterprise-wide system of support for students and employees is needed to support university activities related to COVID-19, including through the creation of a sustainable structure for managing cases and contacts and provide assistance not only to students and employees but also to supervisors.

The IMT Case Management Team, has developed a centralized structure or hub called the COVID Care Response Team. This team was created through a collaboration between the UHS, the DOS, and HR, and would work at the direction of the branch director of the CMT (who also is a public health professional and leader within UHS). To meet LCPH's interests, this team can become a resource to not only the university but also to members of the university community, by LCPH request and as capacity warrants. Should excess capacity be available, case management services also could be provided to members of the broader Lane County community.

The scope of work for the COVID Care Response Team for students, employees, and supervisors will include the following:

- Intake of notifications from supervisors, UHS, and LCPH regarding cases and perceived/possible exposures on campus. This information would be input into an existing confidential system for tracking purposes.
- Work with University Communications to adequately communicate about the cases on the UO website and via COVID-19 email updates, in accordance with Clery Act reporting requirements.
- Navigation of HR policy surrounding leave and remote work for employees and supervisors.
- Provision of guidance to supervisors on how to manage individuals who test positive in the workplace.
- Wraparound services or resource assistance that helps UO community members identified as cases and contacts to properly isolate and/or quarantine for the correct amount of time as prescribed by LCPH. This assistance can include referrals and support related to basic needs:

- Food – Guide individuals on how to order groceries online or from local grocery stores. Refer qualified individuals to the Student Sustainability Center, UO Food Pantry, or the Duck Nest to apply for food security resources such as SNAP.
- Housing – Provide support to students who are able to quarantine in their existing home and how they need to disinfect the household. As needed, provide individuals who have housing needs with housing options when they need to relocate for isolation/quarantine.
- Health care – Assist students with accessing health care providers at the University Health Services or within the local community.
- Mental health – Connect students to counselors at the University Counseling Center to discuss stress, anxiety, depression, and other mental health issues emanating from the isolation/quarantine.
- Financial support – Refer individuals to emergency funding, including filing for unemployment or advising students how to access the DOS Students in Crisis emergency fund and other potential funding sources such as CARES Act funding.

Some individuals may need more complex and ongoing resource management services and will be connected to other resources as needed (e.g., anti-discrimination resources, domestic violence resources, Department of Human Services, or other entities where specialized knowledge and expertise can be obtained. Students requiring a higher level of support could be referred to the existing DOS Student Care Team, which is comprised of representatives from across the UO community. Employees requiring a higher level of support could be referred to the Employee Assistance Program or other employee support assistance resources.

The work of the COVID Care Response Team would be jointly funded by LCPH and the UO.

### Campus Case Notification

The following takes place once a positive case has been determined on campus:

- The individual receiving the information alerts the branch director of the CMT or their designee. Incoming notifications of positive cases come from the UHS, Athletics, Employee and Labor Relations, a local public health department, or any supervisor in touch with an employee.
  - UO only tracks cases of students and employees who are on campus or within the nearby campus community. UO doesn't track cases of students and employees who are out of the area or studying/working entirely remotely.
- The CMT director or their designee contacts the local public health authorities to confirm the positive case and determines when the local public health department is announcing the case. UO can only announce the case after the public health authorities have announced it.
- Once the case or cases have been confirmed, the CMT director or designee alerts the IMT Operations Section Chief. No protected health information is shared via this interaction.
- The IMT Operations Section Chief or their designee alerts UO leadership of the number and type of cases, e.g., student or employee and general information about the cases that the health department might share about the cases (e.g., part of a cluster, travel-related). No protected health information is shared via this interaction.

- Once UO leadership is notified, the CMT director or designee alerts University Communications. No protected health information is shared with this interaction.
- University Communications does the following:
  - Updates the UO case count website and provides a brief description of the case or cases and updates the UO homepage in accordance with the Clery Act. No protected health information is included in the web posting.
  - Issues a periodic email notice, listing all the cases since the most recent email notice, including a brief description of the case or cases. No protected health information is included in any website updates or email notices.
  - Prior to publication, the case count website and the email notices are reviewed for accuracy and compliance with the Clery Act by the CMT director, the IMT Operations Section Chief, and UO General Counsel.
  - Messaging to remind the community about best health-related practices and precautions is often included.

#### Isolation/Quarantine Resources for Off-campus Students in Eugene

The university has coordinated with several local hotels to provide single occupancy rooms available on an as-needed basis to provide isolation/quarantine space to students who are unable to isolate/quarantine in their current living situation. Individual stay duration to be determined on a case-by-case basis in consultation with Lane County Public Health. Stay duration could be one night or longer, depending on need. Length of stay may not be known at time of arrival.

## Appendix E: COVID-19 Integrated Communications and Marketing Plan

[https://uoregon-](https://uoregon-my.sharepoint.com/:w:/g/personal/jwinters_uoregon_edu/EeAvR1qCrstFrwbWX2zZ17kBScJiCkc3-wm9nGzoZp-P6g?e=ZSJCoP)

[my.sharepoint.com/:w:/g/personal/jwinters\\_uoregon\\_edu/EeAvR1qCrstFrwbWX2zZ17kBScJiCkc3-wm9nGzoZp-P6g?e=ZSJCoP](https://uoregon-my.sharepoint.com/:w:/g/personal/jwinters_uoregon_edu/EeAvR1qCrstFrwbWX2zZ17kBScJiCkc3-wm9nGzoZp-P6g?e=ZSJCoP)

## Appendix F: Athletics General Resumption Information

- Gradual return for student-athletes to athletic facilities with priority for sports with required summer Countable Athletically Related Activities (CARA) and fall competition seasons, including: Football, Volleyball, Women's Soccer, Cross Country and Men and Women's Basketball. Local student-athletes will also complete onboarding to permit access to weight room and medical facilities.
- Student-athletes returning to Eugene will be required to isolate for a prescribed period of time (minimum of seven days) before entering athletic facilities.
  - This is the protocol every time they leave Eugene and return from out-of-state.
- All student-athletes will be required to receive COVID-19 safety training before entering the athletic facilities to ensure education and compliance.
- All student-athletes will be required to undergo a physical (newcomers and returners) and given a COVID-19 screening questionnaire. During this process, high-risk student-athletes will be identified and counseled. This process will be time-consuming and requires scheduling with athletic medicine staff.
- Centralized health and daily symptom checkpoints for student-athletes will be established and required prior to entering all athletic facilities.
  - If an individual displays symptoms, has a temperature >100.3 °F, or otherwise indicates high risk for possible infection (i.e., new close exposure), he/she will not be allowed to access the facility, and a phone consult will be initiated with athletic medicine staff.
  - If an individual is not feeling well or experiencing symptoms, he/she should contact athletic medicine staff **by phone** prior to arriving at athletic facilities to evaluate the individual and determine the appropriate action (return home, seek immediate medical care, etc.) following CDC guidelines.
- Specific access plans and schedules will be created for all facilities to ensure student-athletes and staff use designated entrances and exits. These plans also maintain physical distancing and mandate functioning in small groups as required by room size, etc.
- Access plans include visual signage at each student-athlete checkpoint and staff entrances that will instruct all individuals to maintain minimum 6 feet of distance with others and 10 feet when exercising in a gym or outside.
  - Do not enter any facility if you have symptoms of illness.
  - Wear face covering at all times, including during indoor workouts. Face coverings may be temporarily removed for outdoor running with increased physical distancing (10 feet). Face coverings must be maintained on person (not thrown on the ground) and replaced when not actively running.
  - Wash hands/use hand sanitizer frequently.
  - Sneeze or cough into cloth, tissue, elbow, or sleeve (not hands).
  - Avoid hand shaking or unnecessary physical contact.

### Precautions within Gyms and Practice Facilities

- Athletic trainers and strength and conditioning coaches will ensure daily symptom checks are completed by those entering the practice facilities and will maintain a log that can be reported to the health department, if necessary.
- Everyone must wear face coverings while they are on site and in all facilities.
- Staff and student-athletes must maintain a minimum of 6 feet of distance at all times during strength training and 10 feet when doing aerobic activity.
- Adequate space is required within the facilities in order to provide opportunities for required distancing.
- Phasing requirements will determine the number of people that may occupy an indoor space simultaneously with Phase 1 being 25 people; actual capacity for each space is defined by square footage and may be less than maximum allowed.
- Every facility and outdoor space will be scheduled to provide training and conditioning for teams in a manner that creates appropriate distancing opportunities and minimizes contamination between teams.
- Hand sanitizer or hand-washing stations are located at each entrance and exit.
- Doors propped open when possible.
  - Fingerprint readers and other access controls that require touching for access will be deactivated.
  - Card reader access will be deactivated to ensure facility schedule is being monitored to minimize risk.
- Strict hygiene and cleaning regimen will be implemented to disinfect areas that may have been touched (i.e., cleaning of surfaces and equipment after use).
  - Each piece of equipment must be cleaned in between different users.
  - Select areas to be cleaned by the athletic trainers or strength and conditioning coaches.
  - Other areas to be cleaned by custodial staff to minimize number of individuals in those spaces.
- All food will be provided as grab-and-go option only, including snacks. The nutrition fueling stations will remain closed.
- Group gathering spaces such as locker rooms, team lounges or Marcus Mariota Sport Performance Center (MMSPC) recovery area will be closed during Phase 1.

### Student-Athlete COVID-19 Testing

- Testing with 24-hour turnaround is currently available on campus at UHS and McKenzie-Willamette Medical Center through specific protocols to minimize use of PPE and limit exposure to staff and students. Testing requires a physician's order.
- Confirmed symptomatic (fever, cough, shortness of breath, or diarrhea) COVID-19 cases should remain under home isolation for at least 10 days after illness onset and 72 hours after fever is gone without use of antipyretics (i.e., Tylenol), and no COVID-19 symptoms of fever, cough, shortness of breath, or diarrhea.
- Close contacts of confirmed cases will be contacted by LCPH (contact tracing) and educated regarding 14 days of self-isolation and symptom monitoring.

- If a confirmed case is asymptomatic or only has symptoms other than fever, cough, shortness of breath, and diarrhea (i.e., someone who is COVID-19 positive and only has fatigue and a runny nose), they should be isolated for 10 days after the collection of the specimen that tested positive.
- A close contact is defined as being within 6 feet of a COVID-19 patient for a prolonged period of time. The CDC has not defined "prolonged".
- For the purpose of LCPH investigation, prolonged is defined as greater than 15 minutes.

Close contact can include caring for, living with, visiting, or sitting within 6 feet of a confirmed COVID-19 patient; **OR** having direct contact with infectious secretions of a COVID-19 patient (i.e. being sneezed on).

As recommended guidelines are evolving, implementation will be adjusted to ensure compliance with the most recent directives with the health and safety of student-athletes and staff as the top priority. As more information becomes available, all necessary steps will be implemented in accordance with the state of Oregon, the UO, and the CDC.