

UMCES

**Avian Flu Pandemic
Plan**

OCTOBER 1, 2006

INTRODUCTION

As public health studies and news reports indicate, a pandemic, or worldwide outbreak of a new influenza virus, could overwhelm health and medical capabilities globally. This type of outbreak could potentially result in hundreds of thousands of deaths, millions of hospitalizations, and hundreds of billions of dollars in direct and indirect costs. This impact will likely be felt on all UMCES facilities, as well as across the nation. This summary statement will provide an overview of UMCES' preparedness and response activities to mitigate the impact.

The Pandemic Threat

Pandemics occur when a novel virus emerges that infects and can be efficiently transmitted between humans. Animals are the most likely reservoir for these emerging viruses; avian viruses played a role in the last three influenza pandemics. The current pandemic threat stems from an unprecedented outbreak of avian influenza in Asia and Europe, caused by the H5N1 strain of the Influenza A virus.

While the H5N1 Avian Flu virus is not currently easily transmissible between people, the spread of earlier global pandemic influenzas and the outbreak of SARS in Asia during the 20th Century illustrate how large an impact the spread of infectious, and sometimes fatal, viruses can have on populations. The extremely high rate of mortality with the current H5N1 virus only serves to heighten the need for proper planning for the next new global pandemic. Should a highly contagious and highly fatal form of the H5N1 virus enter the global community, it may be only a matter of time before the virus enters the United States.

Consistent with *Guidance for College and Universities* found within the *Implementation Plan for the National Strategy for Pandemic Influenza* ("the National Plan"), the UMCES plan addresses different outbreak scenarios including different levels of severity of the virus and rates of transmission. To prepare for the most severe health scenario – that of a highly infectious and fatal virus entering the United States – the plan developed for UMCES is based upon the assumption that all UMCES facilities will close and all research will be suspended for the duration of the pandemic.

Given the ease in which seasonal viruses spread each year among the population, it is assumed that the academic and research environment cannot be maintained in the face of this new global pandemic without putting faculty, staff and others at risk of infection and possibly worse. The National Plan and other health sources recommend taking steps toward social distancing, minimizing public assemblies, proper cough/sneeze etiquette, increased hand washing, and other actions, in order to slow, but never stop, the spread of the virus.

The decision to close UMCES laboratories and Center Administration (Sea Grant College will follow the guidelines established for College Park) will be made by Dr. Donald Boesch, President of UMCES. It will occur at a point after the first verified case is discovered in North America and be based upon a combination of the following decision criteria/factors:

- World Health Organization declaration of Phase 6—Pandemic period: Increased and sustained transmission in the general U.S. population
- Confirmation of a high rate of infectivity, morbidity (rate of infection) and/or mortality (death rate)
- Rate/speed of disease spreading

- Local public health recommendations to curtail/cancel public activities in the county or state
- Rising employee absenteeism
- Transportation systems closing/curtailing interstate travel
- Cases in the local Mid-Atlantic area occurring early versus late in the overall U.S. experience with the unfolding pandemic

During the period when UMCES facilities are closed, all research and administrative activities will be curtailed. Minimal utilities will be supplied to buildings, but all routine, normal daily housekeeping and maintenance activities will cease until such a time when the re-opening of facilities has been announced. Buildings will be secured in a way to prevent re-entry by all but approved essential staff. Facilities staff, and a small number of other essential employees will be needed to maintain safe, secure, and hazard-free buildings; however, the way in which these essential staff members conduct themselves while on campus will be done in a manner to minimize exposure to others who may be carrying the virus.

Assumptions Underlying the Avian Flu Pandemic Plan of Action

- The institution's response to the Avian Flu pandemic will be managed by the Incident Response Team (IRT). The IRT will be comprised of the President of UMCES, the Vice President for Administration, and the Lab Directors. It will meet weekly, daily, or more than daily as issues unfold. A location will be determined and expanded opportunities for conference call meetings have been established when group meetings are no longer advisable or possible.
- Prior to the onset of the pandemic, officials will monitor the information available via the internet and other sources.
- An outbreak could interrupt normal University functioning for a period of two to four weeks up to several months.
- The University has existing communications resources that can be mobilized for quick response in the event of an Avian Flu emergency.
- Essential employees may need to function from remote facility locations to maintain services. Options for limiting exposure of essential employees to the virus might be beneficial. Staff may be requested to work multiple shifts and critical staff may need to be on campus to service critical systems.
- Some level of loss of essential employees to illness or care for a loved one will require back up options for essential functions. Absenteeism attributable to illness, the need to care for ill family members, and fear of infection may reach 40% with lower but still significant absenteeism both before and after the peak (www.pandemicflu.gov). Also, absenteeism may be affected by the closing of public schools, quarantines, and other measures taken in the community.
- Those affiliated with the University, even if they are not employed or enrolled, will require information on the University's plans and implementation during the crisis. The surrounding community, governing bodies and elected officials will all require periodic updates.

- At all times, the health and safety of the UMCES community will be of paramount importance. Protocols for health and safety measures have been developed and are included in this document.
- This plan will apply to the initial outbreak, as well as subsequent waves of the Avian Flu Pandemic.

Areas of Institutional Response

If a case of Avian Flu contracted by human-to-human transmission is identified anywhere in the world, the Incident Response Team will be activated. The regular membership of the team will be supplemented with other individuals as necessary.

Communications – Communication will be maintained via the use of the web, e-mail, telephone, and the media, depending upon the continued availability of each of these options. Coordination of this area of response will be handled by the Chief Information Officer and the Director of Communications and Marketing. Communication will be needed for various audiences at different stages of the pandemic. Specific plans for communication are outlined in the six Avian Flu phases in the following sections of this report. For each of these phases, draft communications will be developed in advance for use as needed.

Web – An Emergency Preparedness Web Site, will be developed and linked to UMCES’ top level page, and will be used for broadcast information of a general nature, including specific Avian Flu information. As needed, the Webpage will include links to other useful information. Updating can be done either on or off campus as conditions dictate.

E-mail – Existing mechanisms are in place for authorizing and sending mass e-mail (mega mail) to the UMCES community. As the situation develops, e-mail services for general use will be supported with essential staff and will include all faculty and staff accounts as well as listserv services.

Telephone – Land line telephones will be supported with essential staff and will include all current telephone lines. These telephones can be used to disseminate critical information via recorded voice mail messages. Cell phones may also be used for direct communication with critical employees as needed, depending upon continued service by such service providers.

Media – Critical messages may also be disseminated by the Director of Communications and Marketing via newspaper advertising, commercial and public radio broadcast messages.

Research – Continuity of research will be coordinated by the IRT.

Administrative Services - Policies and procedures related to staff functions will be coordinated by the Office of Human Resources. The Office of the Comptroller is responsible for providing financial services. This includes processing employee pay, paying bills, and ensuring funds can be procured for any necessary outside vendors.

Avian Flu Phases

As the disease progresses and becomes more widespread, the danger to the UMCES community will increase. Planning has been organized based upon the following levels. The progression of these levels may occur rapidly and may be altered due to the recommendations of county, state, or federal authorities. A brief overview of these levels is provided here, with more detailed plans outlined in the sections of this report that follow.

Pre-Level 1: Prior to efficient human-to-human transmission

This phase of the Avian Flu plan begins at the present time and continues until there is a reported and substantiated first case of efficient human-to-human transmission somewhere in the world. It is a time for all communication plans to be finalized and Laboratories to complete plans for research interruption. Other administrative departments will finalize closure protocols, and order necessary supplies and plan for their distribution.

Level 1: First cases of efficient human-to-human transmission internationally - UMCES open, business as usual, enhanced planning

At Level 1, the Incident Response Team will begin to meet on a regular basis to fine-tune all plans for responding to the Avian Flu pandemic. All operations will continue as usual, but more specific steps will be taken to prepare for Level 2. Communication with the UMCES community will increase to keep everyone informed of plans being implemented.

Level 2: First verified case in North America AND one or more other triggering events (listed below) – Implement social distancing measures; cancel scheduled activities; prepare for closing; begin liberal leave for non-essential employees, healthy essential employees report

Decision criteria/triggering events:

- World Health Organization declaration of Phase 6—Pandemic period: Increased and sustained transmission in the general U.S. population
- Confirmation of a high rate of infectivity, morbidity (rate of infection) and/or mortality (death rate)
- Rate/speed of disease spreading
- Local public health recommendations to curtail/cancel public activities in county or state
- Rising employee absenteeism
- Transportation systems closing/curtailing interstate travel
- Cases in the local Mid-Atlantic area occurring early versus late in the overall U.S. experience with the unfolding pandemic

At Level 2, social distancing measures will be adopted including the cancellation of all activities. Administrative departments, and all research programs will begin the process of shutting down.

Level 3: Within 1-5 days of declaring Level 2 and depending on national and local conditions – Most administrative offices and research buildings will close

At Level 3, All research operations, except those with critical facility needs (e.g., animal care) will be interrupted until the pandemic period has passed. All administrative departments will be shut down.

Level 4: As soon as practicable following Level 3 – UMCES facilities closed; declared emergency condition; evacuation all facilities closed.

During Level 4, all facilities will be closed. No vehicles or pedestrians will be permitted on campus unless approved as essential employees for tasks related to maintaining and securing facilities. All service contracts and construction projects will be put on hold.

Recovery Level: Recovery stage once pandemic is under control – Facilities poised to re-open.

Once the danger of the Avian Flu pandemic has passed, UMCES will re-open for business. As services return to normal, accommodations for concerns that arose as part of the period of closure will be addressed.

These six levels of response (from Pre Level 1 through Recovery) provide the basis upon which the remainder of this report is organized. Each level is presented with specific actions that will occur in each of the identified areas of institutional response.

PRE-LEVEL 1

Pre-Level 1: Prior to efficient human-to-human transmission

Communications:

Institution Wide:

- The Incident Response Team will meet regularly to discuss preparations for each level and to confirm the designation of responsibility for specific types of communications.
- Faculty and staff will be encouraged to become familiar with details of the Avian Flu Plan.
- The new Emergency Preparedness Website will be communicated to faculty and staff and updated information will be posted on it as needed. This resource will be used during the Pre-Level 1 period to communicate with faculty and staff.
- Educational campaigns on hand hygiene and cough and sneeze etiquette will be increased.

Department Specific:

- All laboratories will identify essential staff to maintain necessary operations during Levels 1-4, and inform individual staff of their status in writing. This should be done as soon as practical.
- All facilities will confirm communication protocols for all staff levels (e-mails, meetings, conference calls, etc.).

- All facilities will be ready to communicate how they will function/provide services with fewer staff, noting restrictions of hours and service levels and alternative means of getting services as appropriate.
- Human Resources will disseminate information about applicable leave policies and information on communicable diseases.
- The respective facilities departments will manage the distribution of information and consult on regulatory issues regarding the use of Personal Protective Equipment, the Instructions for Employees Who Request Voluntary Use of a Respirator, and the Protocol for Cleaning and Disinfection of Environmental Surfaces. These three documents are found in Appendices A, B, and C.
- The Information Technology Department will be responsible for maintaining the essential services and systems to support communication. An overview of the IT plan is in Appendix D.

Academic Program:

- Each Lab Director will develop emergency plans, for dealing with research and research facilities. Each facility will be asked to designate a emergency point person(s).
- Emergency contact information for critical/essential staff will be distributed.
- The Research Emergency Management Plan is found in Appendix E.

Administrative Services (Staffing, Facilities, and Financial Services):

- Human Resources will re-visit existing workplace flexibility options (as appropriate) to provide advice and guidance to laboratories (e.g., teleworking, staggered hours of operation). A set of guidelines from Human Resources regarding various staffing issues is found in Appendix F.
- Laboratories should thoroughly evaluate their operations to determine the essential services that will continue to be delivered in the event of a Temporary Campus Closing (TCC), and which of their employees will be responsible for delivering these services as essential employees, both primary and back-up. See the facilities pre-closing checklist in Appendix H for additional information.
- All laboratories will define essential staff within each department and within each level defined in this plan. Some employees may be defined as essential at one level but not at another. Employees will be notified in writing of this designation. This should be done as soon as practical and should be followed up with a reminder at such time as the campus might go to a Level 1 or greater alert. All employees identified as essential will be provided vaccination as it becomes available.
- Human Resources will identify a methodology for identifying essential employees in PHR. An indicator will be added in the PHR Appointment Information screen, which will give the flexibility to change or view this information at any point in time. This will include a dropdown box where the employee is designated as one of four possibilities: “Not Applicable (which is the default), “Catastrophic,” “Weather or Other Operational,” or “Both.” With this data, a table can be created in the data warehouse which will give the ability to monitor or track these employees from an institutional standpoint.
- Laboratories will be encouraged to familiarize themselves with the Closing Plan found in Appendix G.

- As part of this analysis, laboratories should determine the best methodology for notifying essential employees of their daily work obligations under a TCC:
 - Option # 1 (recommended): Identify one telephone number in the department which will be updated each morning for essential employees. Essential employees would be required to call the number at an appointed time each day to ascertain whether or not they are required to report to work that day, and to receive any special instructions. Each employee calling in would be required to leave voicemail on the number so that the supervisor is able to confirm that the message was received (the call will be date/time stamped by the voicemail system). With this option, the burden is on the employee to call regarding work status.
 - Option #2: Laboratories could identify a point person who is responsible for calling essential employees each day regarding their daily status and work assignments. This is a less efficient way to do this, as employees may not always be available to receive the phone call.
- Laboratories should begin to identify critical supply and operating expense requirements to maintain service levels throughout the various stages of the TCC. Funding source and procurement arrangements will be coordinated through the Comptroller.
- HR will notify faculty and staff about pay check distribution during such an emergency. The on-campus distribution of paychecks will be suspended. Paycheck distribution via direct deposit will continue and will be the only mechanism available for the distribution of employee pay.
- Personal equipment, hygiene/cleaning, and other supplies will be inventoried for adequacy.
- Essential staff will be identified and that designation will be communicated to individuals, including ramifications for absenteeism. Management will maintain contingency plans for handling staff shortages.

LEVEL 1

Level I: First cases of efficient human-to-human transmission internationally – Campus open, business as usual, enhanced planning

Communications:

Institution Wide:

- Information on the Emergency Preparedness Website will be updated as needed to communicate the current status of the pandemic and institutional responses. Additional efforts to market the Website will also be implemented.
- E-mail alerts will be sent to faculty and staff, informing them of the current status and encouraging them to refer to the Emergency Preparedness Website.

Laboratory Specific:

- All Laboratories will update their Websites with service specific information as conditions evolve over time.
- All Laboratories will provide information to staff about departmental issues and the care and safety of their families.
- The Facilities Department will manage the distribution of information and consult on regulatory issues regarding the use of Personal Protective Equipment, the Instructions for Employees Who Request Voluntary Use of a Respirator, and the Protocol for Cleaning and

Disinfection of Environmental Surfaces. These three documents are found in Appendices A, B, and C.

Administrative Services:

Facilities Management staff will:

- Inventory cleaning supplies. No special cleaning procedures or products are needed.
- Procure, store and provide sufficient and accessible soap, alcohol-based hand hygiene products (e.g., Purell), tissues and receptacles for their disposal.

Financial Services staff will:

- Prepare and send request to the University System Office to increase Working Fund cash.
- Increase purchasing card transaction limits to facilitate procurements.
- Increase and expand signatory authority on procurement documents and checks as needed.
- Begin cross-training of staff as needed.

Human Resources

- Will distribute letters to all staff outlining potential hazardous conditions.

LEVEL 2

Level 2: First verified case in North America AND one or more other triggering events (listed below) – Implement social distancing measures; cancel scheduled activities; prepare for closing; begin liberal leave for non-essential employees, healthy essential employees report

Decision criteria/triggering events:

- ***World Health Organization declaration of Phase 6—Pandemic period: Increased and sustained transmission in the general U.S. population***
- ***Confirmation of a high rate of infectivity, morbidity (rate of infection) and/or mortality (death rate)***
- ***Rate/speed of disease spreading***
- ***Local public health recommendations to curtail/cancel public activities in county or state***
- ***Rising employee absenteeism***
- ***Transportation systems closing/curtailing interstate travel***
- ***Cases in the local Mid-Atlantic area occurring early versus late in the overall U.S. experience with the unfolding pandemic***

Communications:

Institution Wide:

- Information on the Emergency Preparedness Website will be updated as needed to educate the UMCES community regarding flu signs/symptoms and when/where to seek help.
- E-mail alerts will be sent to faculty and staff.

Laboratory Specific:

- All labs will keep staff in their areas informed of the current status of the pandemic and institutional responses.
- All labs will maintain staff phone trees.

Academic Program:

- Most research activities that depend upon campus facilities will be temporarily suspended. A checklist to guide the temporary closure of laboratories is found in Appendix H.

Administrative Services:

Facilities Management will (See Appendix C for more specific cleaning and disinfecting protocol):

- Require all healthy essential personnel to report and maintain all essential facility services.
- Eliminate routine maintenance.
- Distribute sufficient and accessible soap, alcohol-based hand hygiene products (e.g., Purell), tissues and receptacles for their disposal.
- Handle blood and other bodily fluid spills in accordance with blood-borne pathogen procedures.

Financial Services:

- All healthy essential personnel will report and services will continue.
- Comptroller will prepare to implement manual processes for procurements, vendor disbursements and billing.

Human Resources:

- Healthy essential regular, C2 and C1 employees shall report to work.
- Non-essential regular and C2 employees will be granted annual, personal, sick or unpaid leave.
- All staff will be instructed on remote desktop access procedures.
- Protocols for reporting sick absences will be finalized and communicated.
- All labs will monitor staffing levels, health, morale, and absenteeism.
- All labs will reassign staff if necessary.
- All labs will monitor impacts/revised service expectations related to liberal leave.

LEVEL 3

Level 3: Within 1-5 days of declaring Level 2 and depending on national and local conditions – As soon as practicable, most administrative offices and research buildings will close

Communications:

Institution Wide:

- Information on the Emergency Preparedness Website will be updated on a continual basis, as needed.
- E-mail alerts will be sent to faculty and staff. Campus wide voice mail will be sent to faculty and staff. Other appropriate telephone contact will be made with other stakeholders.

Financial Services:

- All healthy essential personnel will report and services will continue.
- The Comptroller will implement emergency payroll processing.
- All service contracts \$100,000 and greater include clauses regarding “Termination for Convenience” and “Suspension of Work”. The language in these clauses covers any requirement for the University to suspend services or work due to a closure of this nature. For services under \$100,000, purchase orders include similar language. Delivery instruction and location changes can be implemented with a basic contract modification. Procurement will implement these modifications as needed and send notifications to vendors.
- The Comptroller’s office will continue to coordinate funding and procurements for emergency supplies and services.

Human Resources:

- Healthy essential regular, C2 and C1 employees will report to work.
- Non-essential regular and C2 employees will receive paid administrative leave.

LEVEL 4

Level 4: As soon as practicable following Level 3 – Facilities closed; declared emergency condition; evacuation of all facilities

Communications:

Institution Wide:

- Information on the Emergency Preparedness Web site will be updated on a continual basis, as needed.
- E-mail alerts will be sent to faculty and staff.
- Campus wide voice mail will be sent to faculty, and staff. Other appropriate telephone contact will be made with other stakeholders.

Administrative Services:

Facilities Management staff will:

- Maintain essential services to all buildings (e.g., utilities, HVAC).
- Curtail all contractual work and maintenance activities.
- Manage essential staff working in shifts to maintain essential services.
- Procure, store and provide sufficient and accessible soap, alcohol-based hand hygiene products (e.g., Purell), tissues and receptacles for their disposal.
- Handle blood and other bodily fluid spills in accordance with blood-borne pathogen procedures.

Financial Services:

- Assuming full campus closure, financial transactions will be limited to critical procurements and payments.
- Limited essential personnel will report to campus or handle transactions from remote locations depending on system availability.

Human Resources:

- Healthy essential regular, C2 and C1 employees will report to work.
- Non-essential regular and C2 employees will receive paid administrative leave.
- Non-exempt essential regular and C2 employees will receive overtime if warranted.

RECOVERY

Recovery Level: Recovery stage once pandemic is under control – Facilities poised to re-open

Communications:

Institution Wide:

- Re-opening procedures and timetable will be communicated via e-mail and web.
- Faculty and staff return policy and procedures will be announced via e-mail and Web (e.g., health and safety precautions and what to expect).

Administrative Services:

Financial Management - Funding Additional Costs:

- In order to assess impacts to University financial position, it will be necessary to immediately determine any modifications to the current grant funding.
- A major flu pandemic would be a national, or at least a regional, issue of significant impact. Therefore, it would be likely that Federal and/or State emergency funding could be made available to the University.

Human Resources:

- All staff will return to work.
- Pay distribution plan will be implemented, including last pay for hourly employees (assume paid Administrative Leave by regular salaried employees).

List of Appendices

Appendix A – Protocol for Personal Protective Equipment Use by Employees for Protection from Avian Influenza

Appendix B – Instructions for Employees Who Request Voluntary Use of a Respirator During an Avian Influenza Pandemic

Appendix C – Protocol for Cleaning and Disinfection of Environmental Surfaces

Appendix D – IT Response Plan

Appendix E – Research Emergency Management Plan

Appendix F – Human Resource Policies and Procedures

Appendix G –Laboratory closing Plan

Appendix H – Checklist for Temporary Closure of Laboratories

Appendix A
Protocol for Personal Protective Equipment Use by Employees for
Protection from Avian Influenza (AI)

I. Characteristics of Influenza Transmission

Human influenza is transmitted from person-to-person primarily via virus-laden droplets (particles > 5 um in diameter) that are generated when infected persons cough, sneeze or speak. These large droplets can be directly deposited onto the mucosal surfaces of the respiratory tract of susceptible persons who are near (i.e., typically within 3 feet) the droplet source. Transmission may also occur through direct and indirect contact with infectious respiratory secretions. Asymptomatic individuals in early stages of influenza could be infectious to others. **However, the route of transmission of Avian Influenza in humans is unknown at this time.**

II. Definitions

Respirator: OSHA considers a respirator to be “a protective facepiece, hood or helmet that is designed to protect the wearer against a variety of harmful airborne agents.” Respirators must be selected based on the hazards that the wearer may be exposed to. Surgical/medical procedure masks are not considered to be respirators. OSHA requires that employers select respirators that are certified through NIOSH testing criteria.

Filtering facepiece: a negative pressure particulate respirator with a filter as an integral part of the facepiece or with the entire facepiece composed of filtering material (e.g., N95, N99 or N100). These types of respirators are tested and approved based on ability to filter particle size. **They may help reduce exposures to airborne biological contaminants such as influenza virus, however they will not eliminate the risk of exposure, infection or illness.**

Surgical masks: designed to prevent biological particles from being expelled by the wearer into the environment. Some surgical masks are fluid resistant to splash and splatter of blood and other infectious materials; however they are not necessarily designed to seal tightly to the face and may allow air leakage around the edges.

III. Criteria for the Use of Respirators for Protection from Avian Influenza (AI)

The University intends to follow OSHA standards and will assess recommendations from other federal, state and local agencies that are involved in pandemic and Avian Influenza planning.

A. Respirator use for protection from Avian Influenza is recommended by OSHA (Personal Protective Equipment).

OSHA recommends respirators for these workers:

1. Farm and animal workers/animal handlers involved in the culling, transport or disposal of Avian Influenza-infected poultry.

2. Laboratory workers involved with highly pathogenic Avian Influenza A (H5N1) in accordance with BSL 3+ laboratory guidelines.
3. Medical personnel who have direct contact through transport or treatment of hospitalized patients diagnosed with or under evaluation for Avian Influenza (H5N1).

Conditions for use:

- a) Only NIOSH-approved particulate (or higher protection) respirators may be used. Particulate respirators are categorized as N95, N99 or N100
- b) Respirators are to be used for the specified conditions only. Respirators must be used, stored and repaired in accordance with the manufacturer's recommendations.
- c) Respirators cannot be shared and disposable respirators must be discarded after use or if contaminated or damaged.
- d) The purchase and replacement of respirators is the responsibility of the facilities department.

Respirator use is determined by each Laboratory Director

IV. Criteria for use of other equipment

1. Gloves:
 - a) Gloves should be worn when using cleaning products and disinfectants and when handling waste or waste containers.
 - b) Hand hygiene, which includes washing with soap and water or use of alcohol-based hand rubs, is critical to prevent transmission.
2. Eye protection / face shield:
 - a) Eye protection may be needed when there is a risk of exposure to the eyes from splashing or spraying of cleaning or disinfecting products. (Note: Widespread spraying of cleaning products and disinfectants should be avoided as it poses hazards to the applicator and the building occupants.)

V. Table 1. Summary of selection of PPE by employee category and Avian Flu phases.

	All staff except medical personnel and emergency medical transport personnel.	Medical personnel ^(Note 1)	Non-medical personnel ^(Note 2)	Personnel who operate vehicles designated for emergency medical transport
PPE ^(Note 3)	<p>Level 1 – No additional PPE needed above that in use at Level 0.</p> <p>Level 2 – No additional PPE needed above that in use at Level 1.</p> <p>Level 3 – No additional PPE needed above that in use at Level 2. Surgical masks are provided for symptomatic adults, and may be offered to employees who request them. Custodial staff should wear gloves when collecting trash.</p> <p>Level 4 – No additional PPE needed above that in use at Level 3. Surgical masks may be provided to employees who request them.</p>	<p>Level 1 – No additional PPE needed above that in use at Level 0.</p> <p>Level 2 - Standard Precautions and Droplet Precautions (surgical mask for close contact) with symptomatic patients. In aerosol-generating procedures, minimum of N95 respirator should be worn.</p> <p>Level 3 & 4 – For close contact with suspect/confirmed AI patients, follow airborne precautions including fit-tested respirator (minimum NIOSH-approved N95).</p>	<p>Level 1 – Not applicable</p> <p>Level 2 – Not applicable</p> <p>Level 3 & 4 – Gloves and surgical mask when entering patient-occupied rooms.</p>	<p>Level 1 – Not applicable</p> <p>Level 2 – Not applicable</p> <p>Level 3 & 4 – Personnel with close contact should wear surgical mask. Personnel who clean these vehicles wear gloves and may be offered surgical mask.</p>

Notes:

1. Medical personnel provide direct care to symptomatic individuals.
2. Non-medical personnel (e.g., housekeepers) work in the Health Center or alternative hospital setting (e.g., residence hall) and may enter rooms or common areas where sick and symptomatic individuals are housed and cared for.
3. Refer to Voluntary Use of Respirators when personnel request to use respirators when not listed above.

VI. Reference Sources:

- Occupational Safety and Health Administration (OSHA)
- Department of Health and Human Services, Centers for Disease Control & Prevention (CDC)
- Food and Drug Administration (FDA)
- World Health Organization (WHO)
- U. S. Implementation Plan for the National Strategy for Pandemic Influenza

Appendix B

Instructions for Employees Who Request Voluntary Use of a Respirator During an Avian Influenza Pandemic

Your employer is responsible for determining if you should wear a respirator while performing your job duties during an avian influenza pandemic. If you have been told that a respirator is not necessary but you have requested to wear one, your employer will decide if “voluntary use,” as defined by the Occupational Safety and Health Administration (OSHA) in 29 CFR 1910.134, is permitted.

It is important to note that the route of transmission of avian influenza to humans is not known at this time. A respirator will not eliminate the risk of exposure, infection or illness.

Before you may wear a respirator under OSHA’s voluntary use criteria, you **must** read and understand the following:

1. Be sure to follow hand hygiene and respiratory etiquette procedures at all times as the best way to prevent you from getting sick. Hand hygiene means washing your hands frequently during your work shift with soap and water or using a waterless alcohol-based hand sanitizer, especially after touching potentially contaminated surfaces such as door handles, public telephones and restroom surfaces and after removing protective gloves, a respirator or a surgical mask. Respiratory etiquette means covering your cough and sneeze with a tissue and disposing of the tissue in a proper trash receptacle.
2. You should contact your primary care physician or other qualified medical provider to determine if it is safe for you to wear a respirator. You may not be able to safely wear a respirator if you have a lung disease such as asthma or emphysema or have trouble breathing, if you have claustrophobia, or vision problems.
3. You may not wear a respirator on a voluntary basis if it creates an unsafe condition for you while you are working. For example, a respirator that partially obstructs your vision or prevents you from wearing eyeglasses cannot be worn while driving a motor vehicle or operating heavy machinery and power tools.
4. The respirator that is recommended by the Centers for Disease Control and Prevention (CDC) for use for Avian Influenza exposure in healthcare workers is an N95 particulate respirator. A particulate respirator may not be used for protection from gases, vapors or mists.
5. Check with your supervisor about the availability of respirators, where and how you can get a respirator. It is possible that you may be told you will need to provide your own respirator. If you are providing your own respirator, be sure to choose the size that fits you the best. If your supervisor is providing the respirator for you, you may be asked to provide your size (regular or small).
6. Before you wear the respirator, you must carefully read the instructions that are provided by the manufacturer on use, maintenance, cleaning or disposal, care, and warnings regarding respirator limitations. Your supervisor is required to provide you with a copy of 29 CFR 1910.134 – Appendix D, OSHA’s criteria for voluntary use of respirators.
7. If you wear a disposable respirator, be sure to discard it if it becomes dirty, contaminated, wet, or damaged. Respirators that are not saturated with blood or body fluids may be disposed of in regular trash receptacles. Respirators that are saturated with blood or body fluids must be disposed of in medical waste receptacles that are found in the Health Center or other healthcare facility.

Appendix C
Protocol for Personal Protective Equipment Use by Employees for
Protection from Avian Influenza (AI)

I. Characteristics of Influenza Transmission

Human influenza is transmitted from person-to-person primarily via virus-laden droplets (particles > 5 um in diameter) that are generated when infected persons cough, sneeze or speak. These large droplets can be directly deposited onto the mucosal surfaces of the respiratory tract of susceptible persons who are near (i.e., typically within 3 feet) the droplet source. Transmission may also occur through direct and indirect contact with infectious respiratory secretions. Asymptomatic individuals in early stages of influenza could be infectious to others. **However, the route of transmission of Avian Influenza in humans is unknown at this time.**

II. Definitions

Respirator: OSHA considers a respirator to be “a protective facepiece, hood or helmet that is designed to protect the wearer against a variety of harmful airborne agents.” Respirators must be selected based on the hazards that the wearer may be exposed to. Surgical/medical procedure masks are not considered to be respirators. OSHA requires that employers select respirators that are certified through NIOSH testing criteria.

Filtering facepiece: a negative pressure particulate respirator with a filter as an integral part of the facepiece or with the entire facepiece composed of filtering material (e.g., N95, N99 or N100). These types of respirators are tested and approved based on ability to filter particle size. **They may help reduce exposures to airborne biological contaminants such as influenza virus, however they will not eliminate the risk of exposure, infection or illness.**

Surgical masks: designed to prevent biological particles from being expelled by the wearer into the environment. Some surgical masks are fluid resistant to splash and splatter of blood and other infectious materials; however they are not necessarily designed to seal tightly to the face and may allow air leakage around the edges.

III. Criteria for the Use of Respirators for Protection from Avian Influenza (AI)

The University intends to follow OSHA standards and will assess recommendations from other federal, state and local agencies that are involved in pandemic and Avian Influenza planning.

A. Respirator use for protection from Avian Influenza is recommended by OSHA (Personal Protective Equipment).

OSHA recommends respirators for these workers:

4. Farm and animal workers/animal handlers involved in the culling, transport or disposal of Avian Influenza-infected poultry.

5. Laboratory workers involved with highly pathogenic Avian Influenza A (H5N1) in accordance with BSL 3+ laboratory guidelines.
6. Medical personnel who have direct contact through transport or treatment of hospitalized patients diagnosed with or under evaluation for Avian Influenza (H5N1).

Conditions for use:

- e) Only NIOSH-approved particulate (or higher protection) respirators may be used. Particulate respirators are categorized as N95, N99 or N100
- f) Respirators are to be used for the specified conditions only. Respirators must be used, stored and repaired in accordance with the manufacturer's recommendations.
- g) Respirators cannot be shared and disposable respirators must be discarded after use or if contaminated or damaged.
- h) The purchase and replacement of respirators is the responsibility of the employee's department.

Respirator use is determined by each Laboratory Director

IV. Criteria for use of other equipment

3. Gloves:
 - a) Gloves should be worn when using cleaning products and disinfectants and when handling waste or waste containers.
 - b) Hand hygiene, which includes washing with soap and water or use of alcohol-based hand rubs, is critical to prevent transmission. contact with patients in healthcare settings.
4. Eye protection / face shield:
 - a) Eye protection may be needed when there is a risk of exposure to the eyes from splashing or spraying of cleaning or disinfecting products. (Note: Widespread spraying of cleaning products and disinfectants should be avoided as it poses hazards to the applicator and the building occupants.)

Appendix D

Information Technology Response Plan

Essential services and systems

In the event of a shutdown for two to four weeks, the most essential information technology services and systems will need to be maintained remotely and/or with a very limited staff. The IT Business Continuity Plan has identified those essential services, and the plan includes Avian Flu as a potential threat for purposes of risk assessment and mitigation; emergency operation procedures are being developed that will permit these services to continue.

- E-mail, www.umces.edu, administrative applications, telephony and networking, are among the essential services.
- IT staff with broad band connections at home will be identified to support each of these essential systems.
- Some on-site maintenance may be necessary even during a short closure. Essential staff members who need access to campus facilities will be identified in the essential staff database in PHR.

Communications

In any emergency, communications via many channels are essential.

E-mail

- In addition to central e-mail services, IT employees have designated personal accounts from other providers (e.g., gmail, yahoo, AOL) to be used as emergency alternatives. Other essential employees should be encouraged to establish similar alternatives.
- Listserv lists will be established for the Incident Response Team, designated essential employees, and other subsets such as IT essential staff.

Alternate Technologies

- Instant Messaging provides an alternate means for short communications. This may be useful for internal communication among office groups.
- Video-conferencing, including Access Grid, requires substantial infrastructure and support at both the broadcast and the receiving ends. These technologies should be considered in long-term contingency planning, but would need resources beyond current capability in order to be useful on a broad scale.

Appendix E

Research Emergency Management Plan

If and when UMCES closes for an extended time period due to pandemic flu, consideration will be given to the timing and duration of the closure.

Research Buildings/Animal Care

The following list of facilities has been identified as buildings that house critical functions. This list identifies core spaces for research that will be the most difficult to close when the rest of the campus is closed.

Evaluating building operations for critical facilities. Each Laboratory will identify specific buildings, or portions of buildings, which will remain operational.

Animal Care Facilities: Will be determined by each Laboratory Director.

Appendix F Human Resource Policies and Procedures

A. Applicable Staff Policies

1. Policy on Administrative Leave (BOR VII-7.20)
2. Policy on Annual Leave (BOR VII-7.00 and VII-7.01)
3. Policy on Contingent Employment for Non-exempt and Exempt Staff Employees (BOR VII-1.40); UMCP Procedure on Contingent Employment
4. Policy on Emergency Conditions (VI-12.00)
5. Policy on Family and Medical Leave (BOR VII-7.50)
6. Policy on Leave of Absence Without Pay (VII-7.12)
7. Policy on Personal Leave (BOR VII-7.10)
8. Policy on Sick Leave (BOR VII-7.45); UMCP Procedure on Sick Leave

C. Definition of Essential Staff

1. The term “Essential Employee” is defined by the Board of Regents in policy VI-12.00 “Policy on Emergency Conditions.” It stipulates that an essential employee is one who is “an employee of a facility who has been designated as vital to the operation of the facility, whose presence is required regardless of the existence of an emergency condition, and whose absence from duty could endanger the safety and well-being of the campus population and/or physical plant” (emphasis added). The policy further states, “examples of such employees are police, stationary engineers or other heating plant and maintenance personnel, snow removal employees, food service staff, hospital staff, etc.” Employees may be designated as essential on a situational basis, e.g., in the event of a snow emergency only, or in the event of a public health crisis.
 - a. Laboratories have the authority and responsibility for designating staff members who are “Essential” under policy VI-12.00 “Policy on Emergency Conditions.” This evaluation is made on the basis of the essential duties of the job; essential employees are to be notified in writing of this designation.
 - b. Each facility should review their positions to ensure that the appropriate staff are designated as essential in order to ensure that critical services will be delivered in the event of a flu pandemic. Each phase of the flu emergency plan should be considered when evaluating job descriptions. For example, certain staff may be designated as essential at Level 2, but non-essential at Level 3. The employee is to be notified in writing regarding their status.
 - c. Laboratories should consider that there may be essential services that can be delivered from an off-campus location. In this case, the department has identified that the employee’s duties (or part thereof) must continue to be performed, but may be performed through an alternative method such as working from home (or “teleworking”).

D. Flu Phases

Pre-Level 1: Prior to efficient human-to-human transmission.

Level 1: First cases of efficient human-to-human transmission internationally – campus open, business as usual, enhanced planning

What this means for staff:

All existing staff leave policies and procedures remain in full force and effect.

Level 2: First verified case in North America AND one or more other triggering events, such as local public health recommendations, rising student and employee absenteeism, and other factors identified in the introductory section of the Avian Flu Pandemic Plan – Implement social distancing measures; cancel classes and other scheduled activities; prepare for closing; begin liberal leave for non-essential employees, healthy essential employees report

What this means for staff:

- a. Essential regular and C2 employees, (except as directed by the responsible supervisor or departmental representative), shall report to work and shall be compensated according to the policy.
 - (1) Laboratories have the authority and responsibility for designating staff members who are “Essential” under policy VI-12.00 “Policy on Emergency Conditions.” This determination is made on the basis of the essential duties of the job; essential employees are notified in writing of this designation.
 - (2) Laboratories should review their positions to ensure that the appropriate staff are designated as essential in order to ensure that critical services will be delivered in the event of a flu pandemic.
 - (3) Essential employees are subject to discipline for not reporting to work, subject to a review of the circumstances by the Director of Human Resources or designee
- b. Non-essential regular and C2 employees may take annual, personal, or compensatory leave to the extent earned, or sick leave consistent with the provisions of VII-7.45 “Policy on Sick Leave”
 - (1) Advanced and/or extended sick leave may be available to regular employees under the provisions of VII-7.45 “Policy on Sick Leave”
 - (2) Non-essential regular and Contingent 2 employees with no available paid leave shall be granted excused unpaid leave.
- c. C1 staff are required to report to work, except as directed by the responsible supervisor or departmental representative. C1 employees, as temporary hourly workers, are ineligible to receive paid or unpaid leave consistent the provisions of VII-1.40 “Policy on Contingent Employment.”

Level 3: Within 1-5 days of declaring Level 2 and depending on national and local conditions –As soon as practicable, most administrative offices and research buildings will close

What this means for staff:

- a. Essential regular and C2 employees, (except as directed by the responsible supervisor), shall report to work and shall be compensated according to the policy.
 - (1) Laboratories have the authority and responsibility for designating staff members who are “Essential” under policy VI-12.00 “Policy on Emergency Conditions.” This determination is made on the basis of the essential duties of the job; essential employees are notified in writing of this designation.
 - (2) Laboratories should review their positions to ensure that the appropriate staff are designated as essential in order to ensure that critical services will be delivered in the event of a flu pandemic.
 - (3) Essential employees are subject to discipline for not reporting to work, subject to a review of the circumstances by the Director of Human Resources.
- b. Non-essential regular and C2 shall receive paid administrative leave, pursuant to VI-12.00 “Policy on Emergency Conditions.”
- c. C1 staff may be required to report to work, as directed by the responsible supervisor or departmental representative. C1 employees, as temporary hourly workers, are ineligible to receive paid or unpaid leave consistent the provisions of VII-1.40 “Policy on Contingent Employment.”

Level 4: As soon as expedient following Level 3 – Laboratories closed; declared emergency condition; evacuation of campus; all facilities closed.

What this means for staff:

- a. Essential regular and C2 employees, (except as directed by the responsible supervisor), shall report to work and shall be compensated according to the policy.
 - (1) Laboratories have the authority and responsibility for designating staff members who are “Essential” under policy VI-12.00 “Policy on Emergency Conditions.” This determination is made on the basis of the essential duties of the job; essential employees are notified in writing of this designation.
 - (2) Laboratories should review their positions to ensure that the appropriate staff are designated as essential in order to ensure that critical services will be delivered in the event of a flu pandemic.

(3) Essential employees are subject to discipline for not reporting to work, subject to a review of the circumstances by the Director of Human Resources.

b. Non-essential regular and C2 shall receive paid administrative leave, pursuant to VI-12.00 “Policy on Emergency Conditions.”

c. C1 staff may be required to report to work, as directed by the responsible supervisor or departmental representative. C1 employees, as temporary hourly workers, are ineligible to receive paid or unpaid leave consistent the provisions of VII-1.40 “Policy on Contingent Employment.”

E. Other Definitions:

1. Contingent 2 (Contract) Staff Employee (“C2”): A non-regular employee who is hired on a written agreement that is for at least six months, but not more than 12 consecutive months. Additionally, a C2 employee must be on a 50%-time or greater appointment, and may not be hired to do work that is of a seasonal or intermittent nature. C2 staff employees are salaried, and they are guaranteed a minimum level of paid leave benefits provided for in policy.
2. Contingent 1 (Hourly) Staff Employee (“C1”): A non-regular employee who is hired on a written agreement that is for a term of six months or less, regardless of the percentage of time worked, and regardless of whether it is seasonal or intermittent in nature. Contingent 1 employees are paid on an hourly or salaried basis. C1 employees are ineligible to receive leave.
3. Declared Emergency Condition (“DEC”): Pursuant to Board of Regents Policy VII-12.00 “Policy on Emergency Conditions,” emergency conditions are defined as “those conditions which are determined by each campus CEO or designee to be serious enough to warrant the release of employees. Such conditions may arise because of inclement weather, fire, power failure, civil disorders, or other unusual circumstances which may endanger students and/or employees.” The policy requires paid administrative leave for regular and contingent 2 employees for the period of the declared emergency condition.
4. Exempt: Non-faculty managerial, administrative, and professional staff positions at UMCES are categorized as exempt. The federal Fair Labor Standards Act exempts this category of employee from earning overtime. Exempt employees are expected to work the hours necessary to complete assignments on a schedule that satisfies the requirements of the job, typically a minimum of 80 hours in a bi-weekly pay period.
5. Liberal Leave: Pursuant to Board of Regents Policy VII-12.00 “Policy on Emergency Conditions,” the President (or designee) may declare a policy of Liberal Leave in which case non-essential employees who choose not to report to work, or to report late, or to leave early because of conditions not yet declared a hazardous emergency may be excused. Such excused absences will be charged to the appropriate paid or unpaid leave.

6. Non-exempt: Maintenance, office, service, and technical/para-professional positions are categorized as non-exempt. The federal Fair Labor Standards Act requires that non-exempt employees earn overtime for hours worked that exceed 40 in a standard workweek.
7. Regular Employee: An employee paid by authorized (“line”) funds, with an ongoing appointment of six months or greater. This category of employee was formerly referred to as “permanent.” Regular employees are retirement-eligible, as well as eligible for various other benefits defined by their employment category status.

F. Additional Questions Pertaining to Staffing:

1. Who gets defined as essential staff? See “Essential Staff” definition in Section C.1 above.
2. How will “Essential” employees be identified by the institution? HR has identified a methodology for identifying essential employees in PHR. There will be an indicator in the PHR Appointment Information screen, which will give the flexibility to change or view this information at any point in time. This will include a dropdown box where the employee is designated as one of four possibilities: “Not Applicable” (the default), “Catastrophic,” “Weather or Other Operational,” or “Both.” With this data, HR will create a table in the data warehouse which will give the University the ability to monitor or track these employees from an institutional standpoint.
3. How should laboratories manage a call-in process for exempt and/or non-exempt staff that are designated as essential employees and may need to participate in the delivery of laboratory-level services during the period of Temporary Campus Closure (TCC)? Laboratories should thoroughly evaluate their operations to determine the essential services that will continue to be delivered in the event of a TCC, and which of their employees will be responsible for delivering these services as essential employees, both primary and back-up.

As part of this analysis, laboratories should determine the best methodology for notifying essential employees of their daily work obligations under a TCC:

- a. Option #1 (recommended): Identify one telephone number in the department which will be updated each morning for essential employees. Essential employees would be required to call the number at an appointed time each day to ascertain whether or not they are required to report to the campus that day, and to receive any special instructions. Each employee calling in would be required to leave voicemail on the number so that the supervisor is able to confirm that the message was received (the call will be date/time stamped by the voicemail system). With this option, the burden is on the employee to call regarding work status.

- b. Option #2: Laboratories could identify a point person who is responsible for calling essential employees each day regarding their daily status and work assignments. This is a less efficient way to do this, as employees may not always be available to receive the phone call. Laboratories should consider the potential for a breakdown in communication with this methodology, and consider the consequences at such a critical time. Nevertheless, this may be a more viable option for very small laboratories.
4. How will services be delivered if/when significant absenteeism occurs?
Laboratories need to ensure that they have sufficiently evaluated who should be designated as essential at each level defined in the master flu plan, and staff are to be notified in writing accordingly. Laboratories also have the ability to request staff to voluntarily accept reassignment on a temporary basis to fill service needs.
 5. Do laboratories have the ability to reassign staff to essential functions? See F.2., above.
 6. How will laboratories address absenteeism of their own staff? Laboratories are encouraged to develop plans specific to their missions to ensure that essential services are delivered. Laboratories plans should address staffing requirements at each potential level outlined in the master flu plan.
 7. When/how should training of ancillary/reassigned staff occur? As part of flu planning, laboratories should plan to request volunteers for re-assignment, as necessary, to address service needs at each level of the master flu plan. This planning effort should include training for staff that are re-assigned within laboratories.
 8. What will the outcome be if UMCES is open, and people refuse to come to work? The existing policies and Memorandums of Understanding with the bargaining unit provide the framework for addressing this matter.
 - a. Essential regular and C2 employees are required to report to work, except as directed by the responsible supervisor, and are subject to discipline for not reporting.
 - b.
 - c. If the President designates a Liberal Leave status for employees, non-essential regular and C2 staff will be permitted to take excused paid leave to the extent available, or excused unpaid leave, without the requirement of a prior approval or prior notification.
 - d. C1's are expected to return to work, except as directed by the responsible supervisor or departmental representative.
 10. What if staff refuse to come to work and exhaust all of their leave?

If the campus is on a Liberal Leave status,

- a. Essential regular and C2 employees, (except as directed by the responsible supervisor), are required to report to work and are subject to discipline for not reporting.
 - b. Non-essential regular and C2 staff who exhaust available paid leave have the following options:
 - (1) Up to one week of annual leave may be advanced;
 - (2) Advanced or extended sick leave is available pursuant to the purpose and provisions of Policy VII-7.45 “Policy on Sick Leave”.
 - (3)
 - c. Once paid leave has been exhausted, the staff member will be placed in an excused unpaid leave status.
11. What will happen when employees are sick and exhaust all of their leave? The answer provided in Question #10, above, applies in its entirety.
 12. How does the situation differ for non-exempt and exempt staff/bargaining unit and non-bargaining unit staff? Non-bargaining unit members will be treated in accordance with Board of Regents policies and procedures. Bargaining unit members will follow existing policies and procedures as well, except to the extent that policies have been superseded by the applicable Memorandum of Understanding.
 13. What issues will there be if people become infected while on the job/because of their job responsibilities? The Worker’s Compensation Commission has not issued guidance on this issue, but the University has requested information on the matter.
 14. What protections/supplies can be offered for working staff (safety equipment, onsite accommodations, etc.)? The University will provide all personal protective clothing and equipment for employees working in certain jobs as required by applicable laws.
 15. How will paychecks be distributed in the event of a TCC?
In a Level 3 TCC, the University will be closed and accordingly, the on-campus distribution of paychecks will be suspended. Paycheck distribution via direct deposit will continue and will be the only mechanism available for the distribution of employee pay. A draft memo has been developed that advises employees that paychecks will not be available for pick-up if the campus closes (i.e., Level 3 TCC). The memo strongly encourages employees to enroll in direct deposit immediately as it takes 4-6 weeks to process the initial enrollment. This memo is included in Appendix O.

Task Responsibilities – Laboratories

- Define essential employees (if applicable) within each department, and within each level defined in the master flu plan. Some employees may be defined as essential at one level, but not at another. Employees are to be notified in writing of this designation.

- Establish call-in procedures for essential employees. It is recommended that essential employees call in by a certain time each day to determine if they are required to report on a Level 2, 3, or 4 day.
- Consider how services will be delivered if above-average or even total absenteeism occurs. Consider the reassignment of staff within the department to meet temporary service needs. (Note: according to the planning assumptions contained in the Federal government's website [PandemicFlu.gov](http://www.pandemicflu.gov), "in a severe pandemic, absenteeism attributable to illness, the need to care for ill family members, and fear of infection may reach 40% during the peak weeks of a community outbreak, with lower rates of absenteeism during the weeks before and after the peak"). Also, "certain public health measures (closing schools, quarantining household contacts of infected individuals, 'snow days') are likely to increase the rate of absenteeism."
- Establish cross-training for staff who volunteer to be temporarily re-assigned to meet temporary service needs that may arise from staffing shortages.
- Supervisors should have home telephone numbers, cell phone numbers, and e-mail addresses for their employees and be able to reach their staff to discuss essential status, work assignments, etc. In the event the University's status changes, employees should be encouraged to check the University's website, and to listen to local media outlets.
- Encourage all employees to sign up for direct deposit

Task Responsibilities – University Human Resources

- Update HR web site with link to State of Maryland's "Flu Preparedness" website(<http://www.flu.maryland.gov>).
- Develop summary information about applicable leave policies. Link to HR website, and distribute.
- Provide information to employees on communicable diseases.
- Re-visit existing workplace flexibility options (as appropriate), to provide advice and guidance to laboratories (i.e., teleworking, staggered hours of operation, etc.). Link to HR website.

Appendix G Laboratory Closing Plan

1. Directors will receive a draft Closing Checklist to assist in the planning required to shut down once directed by the President.
2. Orientation and planning meetings will be held to explain the checklist and review shutdown procedures.
3. Directors are to identify any mandatory and essential function(s) or operation(s) to remain partially or fully-functional (as required), once the lab has closed.
 - a. Each function or operation is to be briefly described, as well as every location to which approved individuals will be granted access must be listed (both in terms of buildings and room numbers).
 - i. Individual research projects should be listed by title, reason for its continuance, building name(s) and room numbers.
 - b. The names of the individuals (i.e., service providers) that will be tasked with assuring each function/operation will be provided. (This begins to serve as the list of approved individuals to be granted access by Public Safety to the campus once entrances are closed and checkpoints are set up.)
 - i. Associate specific employees with critical/essential research project.
 - ii. The names of “back up” individuals must be provided to support each function/operation in the event of extended or permanent absence of any primary service provider.
 - iii. When certain operations, functions, or services can be provided by multiple individuals without the need for a primary service provider (e.g., any number of maintenance mechanics can be called in for emergency maintenance service calls), provide a list of all eligible employees who may be called upon to provide services during the TCC.
 - c. Provide a list of each instance when a service company has been contracted to provide mandatory or essential services during the TCC (e.g., elevator maintenance contractor, chilled water treatment contractor, etc.), and anticipated days on which these services are scheduled.
 - i. Provide a list of names of any non-UMCES contracted employees (i.e., off-campus service providers, affiliates) who are to be granted access during the TCC.

Laboratory Pre-Closing – Considerations

Pre-Closing Action Tasks

1. Identify any or all mandatory or essential operations, functions, or services to be staffed and maintained by members of your department, by off-campus service providers, and/or by affiliates that must remain partially or fully in operation during the temporary closure of the campus (TCC) period.

2. Identify the essential staff members who are responsible for each task, as well as back-ups. Essential staff should be notified in writing of their status, and should be advised of the communications protocol in a TCC (i.e., daily call-in procedure). Essential staff should be told that they are not to report to work if they are sick and must call in when they are recovered. Essential staff should be offered influenza vaccinations and/or anti-viral medication if available to encourage compliance with this policy.
3. Identify which, if any, work assignments can be completed from home by essential employees during a TCC.
4. Ensure departmental communication plan is in place and all employees have been notified of the protocol. Employees should update telephone contact information in PHR, as necessary.

Business and Administrative Operations

5. Continue to encourage employees to enroll in direct deposit as on-campus paycheck distribution will be suspended in a TCC.
6. Identify how current staff will continue to process PHR timesheet approvals and assure sufficient back-up approvers are created to process timesheets and any other payroll transactions in the event of extended or prolonged incapacitation of current employees. Ensure that all PHR timesheets and transactions are reviewed and approved prior to closing.
7. Identify which and how staff will continue to review/approve P-Card and T-Card (Visa and Travel card purchases) for 1-2 months for those laboratories that completely suspend all activities, or for every month that essential staff continue to make P-Card purchases. Ensure that all P-Card and T-Card transaction reviews and reallocations are made timely prior to closure.
8. Identify any service contracts that include terms for services on- or off-campus that must be curtailed once the TCC is announced. Prior to the renewal of the service contract, work with Procurement and Supply to revise terms of the contract to allow for suspension of services with the TCC.
9. Laboratories that maintain network servers containing essential business databases and other files should determine the best means to continue these IT services to their staff (if essential access to department files remains necessary during the TCC) or to back up all data files and shut down its servers (if no essential services remain during the TCC).

Recruitment and Selection Processes

10. Temporarily suspend all open faculty and staff searches and notify applicants that searches will continue once the campus re-opens.
11. Beginning September 1, 2006, Search and Selection plans all positions should include a statement to the effect, "in the event of a Temporary Closure of Campus (TCC), open searches will be temporarily suspended, but will continue once the campus re-opens."

Contracts for Space Reservations, Service Delivery, and Recurring Deliveries of Supplies

12. Identify any service contracts that include terms for services on- or off-campus that must be curtailed once the TCC is announced.
13. Prior to the renewal of any annual service contract, laboratories will work with Procurement and Supply to revise the terms of the contract to allow for a suspension of services in the event of a TCC.

Departmental Closing Action Tasks

(To Be Implemented upon Declaration of a Temporary Closure of Campus [TCC])

Closing of Offices, Work Rooms, Shops, and Lab Areas

1. Change messages on all active voicemail – both departmental numbers, and individual employee numbers.
 - a. For laboratories expected to fully suspend operations, consider use of the following voicemail message:

“Please listen to this important message: Beginning on xxxxx, xx, 2006, the _____ will be closed until further notice.
 - b. For laboratories anticipating partial delivery of mandatory/essential services, consider use of the following voicemail message: **Sample text for this scenario will be developed during the Fall 2006 semester.**
2. Secure assets: credit cards, keys, office equipment, building entry access cards, and other high value assets.
3. Ensure that any cash and check receipts on-hand are properly deposited.
4. Submit and approve PHR timesheets.
5. Set thermostats to 65 degrees in the winter, and 78 degrees in the summer.
6. Inspect, close and lock all ground floor accessible windows.
7. Remove all food and other items from office refrigerators. Unplug each unit and leave doors open.
8. Remove live plants by allowing employees to care for them at home.
9. If applicable, refer to Checklist for Temporary Closure of Laboratories, Appendix Q.

Employee Health and Safety

10. Distribute appropriate Personal Protective Equipment (PPE) and Voluntary Personal Equipment (VPE) and instructional materials to appropriate staff (i.e., service providers and other remaining on campus during the Closing activities) in accordance with Appendices C, D, and E of this document.

Appendix H

Checklist for Temporary Closure of Laboratories

This checklist provides basic instructions to safely close a laboratory facility for up to several weeks.

- Make sure that all laboratory staff have each other's contact information for emergencies.
- Return all chemical reagents to appropriate storage locations (e.g., flammable liquid storage cabinets, desiccators, etc.) If containers or caps are not intact, transfer contents to compatible container, write chemical(s) identification on container and include appropriate warnings from old label, and properly dispose old container.
- Return all biological materials to appropriate storage location. Cultures in incubation chambers must be removed and terminated/stored as appropriate for the organism and its properties.
- Autoclave all biological waste and place in dumpster outside building.
- Decontaminate biological safety cabinet work surface, close sash and turn off fan.
- Return radioisotopes, select agents and controlled substances to properly-secured storage locations.
- Place all chemical materials, stock solutions or samples that will remain on benches, fume hoods, tables, etc., in intact, closed containers, and label containers with contents.
- Terminate all on-going chemical processes and reactions (distillation, reflux, etc.) and transfer chemicals to intact, closed containers. Label containers with contents and store in appropriate storage locations.
- Shut off all heat-producing equipment (ovens, hotplates, incubators, meltemps, etc.) and unplug from wall (if possible).
- Shut off all faucets and water supply cutoff valves (if so equipped) to minimize possibility of leaks/flooding.
- Shut off all compressed gas systems at the cylinder and bleed pressure from the lines.
- Disconnect power from all experimental apparatus and discharge any accumulated stored energy (compressed air, mechanical, hydraulic, electric, etc.)
- Shut off utility service valves (natural gas jets, compressed air, vacuum, nitrogen, etc.)
- If temperature-sensitive chemicals, microorganisms or radioisotopes are stored in refrigerators or freezers, adjust thermostat to appropriate temperature and close/secure doors. Write **"Temperature-Sensitive (Chemicals, Microorganisms and/or Radioisotopes) are Stored in (locations)"** on 3" X 5" card and affix to main lab door. More than one card may be necessary.
- Check that emergency contact information is correct for the laboratory's warning sign. If the

correct emergency names/phone numbers are not printed on the sign, write “**Emergency Contacts: (names/phone numbers)**” on 3" X 5" card and affix to wall/door adjacent to current warning sign.

- Close fume hood sashes and turn off hood blowers if controlled in lab. Close and lock all windows.
- Remove any trash from the lab that will generate odors upon decomposition.
- Turn off computers and equipment that will not be needed during the period when the lab is closed.
- Walk through all portions of laboratory and conduct a final inspection. Turn off lights and close/lock doors when exiting.
- Follow *Animal Facility Closure Procedures* if you are responsible for animal colonies.

Name: _____

Signature: _____ Date: _____

Department/Unit: _____

A copy of this signed form must be given to the employee and the original kept by the employee's department.