Policies and Procedures for VCOM Employees and Students under COVID-19 Restrictions

April 1, 2021

This plan has been submitted to the State Departments of Health, the State and National College Accrediting bodies and the CDC and is subject to change upon their requirements.

Updates to these documents may also occur due to changes in the spread of COVID-19 in each state, community, or on a VCOM Campus.

Faculty, staff, and students should refer to the document often and be sure they refer to the online copy at www.vcom.edu for the latest version of the plan.
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Section 1

Policies and Procedures for VCOM Employees and Students Under COVID-19 Restrictions
SECTION 1: POLICIES AND PROCEDURES FOR VCOM EMPLOYEES and STUDENTS UNDER COVID-19 RESTRICTIONS

The policies and procedures listed in this document are applied only during this time of COVID-19 restrictions. All policies and procedures listed in the Employee and Student Handbook still apply except when this document’s policies and procedures supersede those in the Employee and Student Handbooks. The policies and procedures that follow apply only where there are changes due to COVID-19 Restrictions from April 2, 2021, through July 15, 2021, only. When there is a conflict, the employee should check with Human Resources or students with their Associate Deans. In general, when there is a conflict related to COVID-19 policies, the policies in this document will supersede those in the handbook while under COVID-19 restrictions.

Last Updated: 4/01/2021

VCOM follows the CDC recommendations for opening Institutions of Higher Education (IHE) and the State Departments of Health’s guidance in the states where VCOM Campuses are located.

This section’s information are policies and procedures for employees and students on the VCOM campuses or VCOM property and in VCOM research laboratories. The policies related to VCOM students in clinical training include some expected off-campus behaviors to avoid exposure.

Any student who has questions or difficulty in following VCOM policies or procedures as listed must meet with their COVID officer and the Dean. Any employee who has questions or difficulty following VCOM policies or procedures as listed must meet with their Division Officer or Dean and the COVID officer from HR to discuss if alternate possibilities exist.

GUIDANCE FOR OPERATIONS OF THE EDWARD VIA COLLEGE OF OSTEOPATHIC MEDICINE UNDER COVID-19 CONDITIONS BEGINNING 4-1-2021.

While the country is moving from Phase 2 to Phase 3 guidelines, public health data suggest that COVID-19 continues to be a threat nationwide. However, great strides are occurring nationwide. As more persons are vaccinated, it is apparent that vaccination is the most important health initiative to reach herd immunity and reduce the deaths and serious complications related to COVID-19.

The CDC’s nationwide guidelines for Institutions of Higher Education (IHE) allow VCOM to continue as a College to offer students education and employ all faculty and staff on and off-campus during this pandemic. However, to continue operations, students, faculty, and staff are encouraged to follow CDC and evidence-based medicine data rather than media reports and to continue to follow the policies and procedures as listed in this document. We are thankful this has been the actions of most students, faculty, and staff. Everyone’s adherence to the policies has allowed and will continue to enable the College the opportunity to continue offer education to all of our students and to continue the employment of our faculty and staff.
VCOM remains fortunate to have had a small number of cases in students and employees from the four campuses and that no actual “campus outbreaks” have occurred. Following the policies and procedures set forth has allowed our campuses to remain in operation through the 2020-2021 academic year to date. The new procedures that follow will allow us to finish out the academic year while allowing some more personal freedoms. VCOM asks all employees to be vigilant in following the policies and procedures that follow.

The Campus-wide COVID-19 Committee will be reconfigured and meet each block. VCOM will remain vigilant in following guidelines and seek to provide policies and procedures that produce a safe work and educational environment. In this case, VCOM policies may be more restrictive than those written for Institutions for Higher Education (IHE). So employees and students should read this document and be aware of these guidelines.

The COVID-19 Officers will keep everyone informed of any changes to policies and procedures or any change to the overall health of the VCOM family (employees and students) occurs. If an employee or student has a question about any policy or procedure, they should contact their COVID-19 officer.

I. SCREENING FOR COVID-19

VCOM will continue to require all employees and students to use the MyHealthTracer.com web application. This is one of the methods that has been successful in keeping the campus and each other safe! All employees and students must enter their general screening status daily until fully vaccinated, and then decrease their entries to once per week.

Once fully vaccinated, the employee or student must log their vaccination. After vaccination, the employee or student is required to use the application to report illness, a positive COVID-19 test or significant exposures if ill, the employee or student logs their illness (i.e., fever, chills, upper respiratory or gastrointestinal illnesses, headaches with extreme fatigue and/or other COVID-19 symptoms). The employee or student should remain at home and log their illness until recovered. The employee or student experiencing symptoms must also notify their COVID-19 officer (who will provide instructions for testing and/or other instructions) before the student or employee returns to work. Again, these measures help to keep everyone safe. COVID-19 testing will be recommended for those with symptoms of COVID-19.

Employees and students should also notify the COVID-19 officer of any direct exposures to persons with COVID-19. Quarantines will follow direct exposures if the employee or student is not fully vaccinated and/or if COVID-19 symptoms develop.

The COVID-19 Officer for students in their OMS-1 and OMS-2 year is the Associate Dean for Student Affairs. The COVID-19 Officer for students in the OMS-3 and OMS-4 year is the Associate Dean for Clinical Affairs. The COVID-19 Officer for employees is the Director for Human Resources on each campus.
II. PROCEDURES FOR EMPLOYEES OR STUDENTS WHO DEVELOP SYMPTOMS OF COVID-19

An individual employee or student experiencing any of the following symptoms may not enter College facilities and should isolate immediately. Symptoms most common to COVID-19 include the following:

A. Fever (subjective or 100.4 degrees Fahrenheit) or chills,
B. Cough, shortness of breath or difficulty breathing,
C. Extreme fatigue from illness, with muscle or body aches,
D. Headaches related to an acute illness (which may or may not be accompanied by other symptoms). Persons who have frequent headaches should be able to differentiate if this headache is accompanied by illness.
E. New and remarkable loss of taste, smell, and appetite
F. Sore throat and congestion
G. Nausea, or vomiting, and/or diarrhea,
It is not likely you will experience all the symptoms above, and so if you are experiencing any of the symptoms and feel ill, you must stay at home and isolate yourself from others to see if further illness develops. In general, there are no illnesses that you want to bring to a classroom or the workplace, so if you develop an acute illness with symptoms, you are at risk of spreading that illness in the workplace.
H. If an employee is too ill to come to campus, in addition to informing the COVID-19 officer, just as with any illness, call your supervisor to inform them that you will not be coming to work and follow normal procedures with HR for requesting a sick day. Stay at home and see your physician if warranted.
I. If an OMS-1 or OMS-2 student becomes ill, call your COVID-19 officer and notify the Associate Dean for Medical Education that you are sick and follow the normal processes.
J. If an OMS-3 or OMS-4 student, notify the COVID-19 officer, who is the Associate Dean for Clinical Affairs and your DSME and preceptor, that you will not be coming in and follow their further instructions.
K. During an illness, don’t forget to complete the required MyHealthTracer.com application daily, even when self-quarantined!

III. VCOM CAMPUS PREVENTIVE HEALTH POLICIES & PROCEDURES FOR OPERATIONS UNDER COVID-19 RESTRICTIONS FOR VCOM CAMPUSES

A. Wear a Mask
   Wear a mask at all times in the facility (classrooms, library, conference rooms, halls, bathrooms, and all multi-use areas). You may remove your mask if you are in your office alone; however, if you have a visitor, you should wear your mask. If all persons in the room are fully vaccinated, you may remove masks but must remain socially distanced.

B. Socially Distance
   Keep yourself 6 feet or greater from others where possible. This includes conversations in halls, parking lots, meeting rooms, classrooms, and other areas in the facility. Do not congregate in the halls or common areas.
C. **Safety Measures for Facility Entry**
   All Students and Employees must card swipe for entrance into the building. Students and employees may be assigned a specific entry into the building from time to time. Should assignments or reassignments occur, each person will receive an email from facilities or HR. Employees are still encouraged to arrive 15 minutes after the hour or 15 minutes before the hour to avoid congregating with student’s arrival.

D. **Safety Measures related to Restroom Capacity**
   The restrooms’ capacity is limited to the number of people in the stalls and no more than two persons waiting inside the bathroom with a 6-foot self-distance. For this reason, to avoid congregating by bathrooms, employees should attempt to use bathrooms at times when students are not on a break (not at the 10 minutes before the hour, i.e., 9:50 to 10, 10:50 to 11, or from 12 to 12:15). Employees and students should wash their hands for 20 seconds or more and use hand sanitizer.

E. **Practice Good Hygiene**
   Avoid touching your face with your hands. Wash hands frequently for 20 seconds or more. Use the hand sanitizer often, especially before/after touching doors, elevators, stair rails and frequently used surfaces. Hand sanitizer stations have been set up throughout the building.

F. **Avoid Touching Shared Items or Surfaces**
   Employees and students should not share items such as pens, phones, computers, or other hand-held items. Disinfectant wipes are available for employees to keep surfaces frequently wiped to prevent the surface spread of infection.

G. **Daily screening:**
   Complete the [MYHEALTHTRACER.COM](http://MYHEALTHTRACER.COM) application each morning, whether on campus or self-quarantined (unless fully vaccinated, then document vaccination and complete weekly or to report illness, a positive COVID-19 test, or significant exposures).

H. **Avoid Others Who Are Ill** by distancing from them even if they are not COVID-19 positive, whether at home or in transit, not to bring other illnesses to campus.

IV. **VACCINES:** Employees and Students must participate in vaccination for the Campuses and Clinical Training Sites safety. Vaccination is the key to each individual’s safety and other employees and the patients being cared for.

A. **Employees:** The COVID-19 vaccine is currently strongly recommended for all employees.
   - The EEOC and OSHA have determined that mandatory vaccination can be required to offer a safe workplace. As vaccines are not readily available for all at this time, vaccination remains strongly recommended for all employees.
   - Mandatory vaccination is anticipated in the near future by VCOM to meet the OSHA requirements for a safe work environment; therefore, all employees should register and receive the vaccine as soon as possible.
   - If an employee is unable to comply with obtaining the vaccine, they should meet with the COVID-19 officer and the Dean or their Division Officer. An Individual Assessment Committee may be appointed to see what accommodations can be made for the employee.

B. **Students:** The COVID-19 vaccine is also strongly recommended for students at this time. OMS-1 and OMS-2 students will need to be vaccinated to complete their standardized patient exams as their encounters will be live rather than online for upcoming blocks. Lack of vaccination may result in delay of the student’s academic program.
• Students in the OMS-1 and OMS-2 years must report to the COVID officer and the Associate Dean for Medical Education if they are having difficulty in obtaining the vaccine or if they have a verified contraindication. As additional early clinical experiences will be added in upcoming blocks, students will need to be vaccinated to participate in those experiences so as not to place patients at risk, and the Standardized Patient exams. As a healthcare worker, the student is expected to receive the vaccine. This is the same as other immunizations a student must receive to enter medical school. Students unable to meet the vaccination requirement must report this to their COVID-19 officer and their Associate Dean and to provide appropriate documentation. A formal review process will follow.

• Students in their OMS-3 and OMS-4 years caring for patients are also considered healthcare workers and required to have the vaccination to participate in patient care. Students in the OMS-3 and OMS-4 years experiencing difficulty in obtaining a vaccination for COVID-19 should contact their COVID-19 officer (the Associate Dean for Clinical Affairs). If unable to receive the vaccine, a formal review process will follow.

• Students in the OMS-3 and OMS-4 years must realize that the individual clinical site will have their own requirements regarding COVID-19 vaccinations. Students who do not follow or comply with the site requirements and precautionary procedures will be brought back to campus to determine if alternative arrangements are appropriate and can be made. This may require alternate site placement of the student or a delay in the student’s program.

C. Flu shots: Students and employees were strongly recommended to have seasonal flu shot. While flu season is over, it will be recommended in the fall as well.

D. Once fully vaccinated for COVID-19 (approx. 14 days after the second dose), the employee or student will only need to complete the MyhealthTracer.com application weekly or if they are ill, test positive for COVID-19 or have significant exposure. The student should log the vaccination before moving to the once per week logging schedule.

V. VISITORS ON CAMPUS
A. Single Visitors will remain limited in the campus buildings to those for business purposes and those approved by supervisors or administration. If an employee wishes to bring a visitor to the building, they should request approval for the visitor through their supervisor and should only have visitors for business purposes and the visitors should be vaccinated.

B. SCHEDULED MEETINGS WITH VISITORS ON CAMPUS: All multi-person meetings on campus that include outside visitors will be limited and must be pre-approved by the Campus Dean and/or the appropriate Vice President or Vice Provost. In addition, all meetings will be limited to the number approved under the guidelines or currently allowed in the state or community.

VI. TRAVEL
A. TRAVEL WITHIN THE US: In general, travel is discouraged during COVID-19 pandemic times. Employees and students are recommended to limit their outside travel (as the CDC recommends) to limit their exposure to COVID-19.

• Vaccinations are strongly recommended for all who are traveling.
• CDC States that Americans who have been fully vaccinated against SARS-CoV-2 can safely travel as long as they wear a mask.
• Travel remains limited to block breaks, holiday breaks, and vacations.
• Employees and students are expected to NOT travel to areas where COVID-19 is on a rise or a “hot spot.”
• Employees must inform the COVID officer and their Supervisor of any out-of-state travel plans in advance and use the MyHealthTracer application to identify any impact should the employee become ill and prevent a campus outbreak. Quarantines will be required if ill on return.
• Student’s travel remains limited to the block breaks and summer break.
• Safe activities on travel such as outdoor camping, hiking, etc., are still recommended while avoiding beaches, concerts, and other public gatherings considered super-spreaders. When all students are fully vaccinated, such restrictions will likely no longer be required.

B. TRAVEL INTERNATIONALLY
A. Employees: International travel remains discouraged at this time and prohibited for those who are not fully vaccinated. Only employees who have been fully vaccinated may travel internationally at this time. However, an employee should realize that international law may not be the same, and the employee may be detained in an international setting (as is currently common under COVID-19). If the employee is detained, they will be required to use leave for the days missed, and if all leave is exhausted may be required to use unpaid leave.

B. Students: International travel for students requires pre-approval by the COVID-19 officer and the Campus Dean. Unless a student is fully vaccinated, all international travel is prohibited and will not be approved. Students will not be allowed to travel to any country where COVID-19 is increasing or high risk. Students must be aware that even if international travel is approved and return to the US is delayed, the student may or may not be able to make up missing exams, labs, or mandatory learning events. Missing such events may delay the student’s program and cause them to have to make up such work over block break or in the summer. Therefore, the student must have prior approval from medical education.

SECTION IV. DELIVERY OF THE OMS-1 AND OMS-2 ACADEMIC PROGRAMS ON CAMPUS
Safety measures will continue for the curriculum to be delivered in a variety of settings and curriculum delivery styles.

A. ALTERNATING TIMES DEDICATED TO STUDENTS IN CLASSROOMS AND LABS:
The classrooms will continue to be altered between the first-year and second-year students. Classrooms will continue to be cleaned at noon and assigned seating for students will occur. Classrooms will follow the 50% capacity restrictions. When a state (or community) announces a move from Phase 3 to Phase 2 (or similar restrictions), the classrooms may be moved back to a 35% capacity. This will be announced by the Dean and the COVID-19 officers when such restrictions will be used.

B. All classrooms will continue to provide 6-foot distancing between students and masks are to be worn at all times.
C. **ACADEMIC CALENDARS:** The Associate Deans for Medical Education on each campus will provide the academic calendars. The academic calendar will list when the class or lab occurs, whether it is a **mandatory learning event** or an **asynchronous learning event**.

D. **SEAT ASSIGNMENTS will continue:** Students will continue to be assigned to seats. The Associate Deans will provide a system where students will identify if they will attend class greater than 70% of the time (whether asynchronous or mandatory) and the students who choose attendance will be assigned to a classroom where the lecturer is presenting in person. Attendance is expected at least 70% of the time for those who sign up for attendance and students (as professionals) are expected to honor their obligation. Attendance will be taken if the in-person attendance classroom is not populated.

E. **LABORATORIES:** Laboratories are considered mandatory learning events. All students must attend laboratories and/or have an excused absence (which will require remediation).

F. **ANATOMY LABORATORY** will be split where there will be no more than 50% of the class and 4 or 5 instructors in the anatomy laboratory at any one time.
   - There will be approximately three students per lab table, masks will be worn, and students should attempt to socially distance as much as possible.
   - Each lab session will last two hours so labs may be rotated to alternate with the clinical anatomy cases when the student is not in a lab.
   - When the students meet to review cases, this will occur in small groups of 6-9 students (2 or 3 groups). These may be planned in person or via zoom as directed by the Chair.
   - All students and anatomy lab instructors should be vaccinated so not to place classmates at risk during anatomy laboratory participation.

G. **PHYSICAL DIAGNOSIS AND OMM LABORATORIES** will also be split where no more than 50% of a class is in the laboratory at one time.
   - 6-foot distancing between students will occur using a head to foot separation so to decrease exposures.
   - Students will still be assigned to lab partners, limiting the number of students any one student is exposed to, to four over a block.
   - The PPC/OMM laboratory is another example of why a student must receive the vaccine, to not expose themselves or others to COVID-19.
   - Students who cannot participate in the PPC/OMM lab due to lack of vaccination may need to request a medical leave until COVID-19 conditions resolve.

**SECTION V. DELIVERY OF THE OMS-3 AND OMS-4 CLINICAL PROGRAM FOR STUDENTS**

In March of 2020, VCOM students, and all medical students nationwide, were removed from clinical rotations. VCOM initially met to determine new requirements for the OMS-3 and OMS-4 years that allowed students to finish their academic program on time. This was accomplished by eliminating electives and providing a self-quarantine time between rotations where students completed online work. These requirements will remain in place through July 1, 2021. Beginning
on July 1, 2021, the following academic requirements will apply for OMS-3 and OMS-4 students.

A. OMS-3 ACADEMIC PROGRAM BEGINNING JULY 1, 2021

The clinical OMS-3 year will include nine, four-week periods for clinical rotations and one, four-week research period.

The clinical OMS-3 year will include nine, four-week periods for clinical rotations and one, four week research period.

- The core clinical required rotations will be in the following fields: family medicine, pediatrics, OB/GYN, surgery, psychiatry, rural primary care, and two internal medicine clinical rotation months.
- The third-year selective has been restored. The selective must be completed at a VCOM core site. The third-year selective is restored so students may explore a field of medicine they are interested in before interviews held in the fall of the OMS-4 year. A list of selectives will be provided in the 2021-2022 handbook.
- The required Research rotation has been moved to the OMS 3 academic year, as it was previously required in the OMS 4 academic year. This will provide students with an opportunity to begin, develop and produce meaningful research prior to fourth year auditions and residency applications.
- Vaccination: All OMS-3 students will be required to be vaccinated for the fall term unless a medical condition prohibits vaccination.
  - For those students who are unable to receive the vaccine, the student's program may be delayed so that a quarantine period will be required between rotations. Also, as each clinical site determines their requirements for clinical participation of their healthcare workers (and students), the locations as to where the students who are not vaccinated may participate in clinical care may be limited. A student who is unwilling to be vaccinated may be reassigned to a site willing to accept an unvaccinated student. If such a site does not exist, the student may be put on leave until an appropriate site is found or the student is vaccinated.
- Clinical Educational Modules and post-rotation exams will continue to accompany the rotations.
- The Geriatrics curriculum is being moved to the OMS-1 and OMS-2 years, where the student will experience longitudinal care. This will be done by telemedicine while under COVID-19 restrictions and in person when this is allowed by the long-term care facilities again.

A. OMS-4 CLINICAL CURRICULUM for the 2021-2022 academic year

- History of fall 2020-spring 2021: Nationally, AACOM, AAMC, AOA, and the AMA, determined the OMS-4 students would burden the healthcare system, place both students and patients at risk from increased exposures, and limit the OMS-4 students to one elective outside rotation (through the VSLO system). VCOM students were able to complete elective rotations in the VCOM core hospitals where residencies existed. Additional OMS-4 educational experiences outside of
clinical experiences were added, including ultrasound courses and residency prep courses (or boot camps) for certain specialties. Students were also able to participate in some rotations using telemedicine (such as EM). The result was that VCOM on each campus had a greater than 94% first match and a 99.9% final match of OMS-4 students to residency.

- **Beginning in July 2021, the following curriculum will apply for OMS-4 students.**
  1. **One, four-week period for professional development.** This may be taken in one-week periods to allow students to complete residency interviews along with professional development curriculum.
  2. **Five elective rotations** designed to prepare them for the field the student wishes to enter. Students will plan their electives when meeting with the OMS-IV Dean (with input and advisement by the clinical chairs). The electives possible for fourth year are listed in the handbook.
  3. **Four core selective core rotations** for the 2021-2022 academic year include the following: One 4-week surgical selective, one medicine selective, one intensive medicine selective, and one additional medicine or surgical selective (depending on whether the student plans to enter a medical or surgical field). The student also has a required Emergency Medicine rotation. The fourth-year selective(s) choices must be made from the fourth-year Selective Rotations list in the handbook.

- **Interviews for Residency:** In 2020, for the first time, residencies began interviewing virtually. OMS-4 Students should be aware that online interviews for residency may or may not continue and so a rising fourth-year student must be prepared for both types of interviews. OMS-4 Students should seek to interview early in the cycle. Ultimately, at this time, whether the interview process will be in-person or the choice of virtual interviews is up to each residency site. To be prepared for online interviews, students should visit the AAMC site regarding interview tips for OMS-4 students: [https://www.aamc.org/system/files/2020-05/Virtual_Interview_Tips_for_Applicants_05072020_1.pdf](https://www.aamc.org/system/files/2020-05/Virtual_Interview_Tips_for_Applicants_05072020_1.pdf)

**B. Mandatory Use of MYHEALTHTRACER.COM for all OMS-3 and OMS-4 students** is required. They must use MyHealthTracer.com each day until fully vaccinated. Students must log their vaccination. After vaccination, the student is only required to use the application weekly to report illness, a positive COVID-19 test, or significant exposures. All OMS-3 and OMS-4 students are expected to complete vaccination as they are considered a healthcare worker.

**C. Student restrictions from Clinical Rotations if ill or exposed to COVID-19 without protection.** Students in clinical education should not report to their approved clinical education sites if they are experiencing any of the following:
  1. Have a fever, new-onset cough or shortness of breath, or any other symptoms and signs of COVID-19.
  2. Have been exposed to a positive COVID-19 patient or a patient under investigation for COVID-19 without appropriate protections and/or are not vaccinated (will require quarantine).

**D. Notification of Illness or Symptoms of COVID-19 and unprotected exposures**
Students experiencing COVID-19 symptoms or who have known exposure to a person with COVID-19 while not wearing protection must seek immediate guidance from the following:
• The clinical faculty member with whom they are rotating
• The site coordinator and DSME (if in a VCOM core site) and
• The COVID-19 Officer (who is the Associate Dean for Clinical Affairs)
• Students should anticipate that all missed clinical rotation days will need to be remediated to pass the rotation. This can generally be done on weekends if a small number of days. If, however, weeks are missed, the rotation’s makeup will need to occur at the end of the year.

E. Student Seeking a Waiver to NOT Be Vaccinated
Medical students are considered both learners and healthcare workers and are at increased risk for contracting and spreading COVID-19 when moving from one four-week clinical learning environment to the next. Medical students, therefore, must obtain the vaccine or have a valid medical excuse from the COVID-19 officer and the Dean. Hospitals and other clinical sites will have specific requirements for obtaining the vaccine and may not offer clinical instruction to those students who have not received the vaccine.
• Beginning June 2021, all students not vaccinated who are involved in clinical site education will be required to submit a medical excuse for not being vaccinated.
• In addition to requiring a medical excuse form, students who are unable or unwilling to take the vaccination may be reassigned outside of the site to which they matched if the site requires vaccination for clinical education participation. The student will be required to complete their clinical education at sites or practices identified by the College who will accept students who have not been vaccinated.
• In addition to the immunization, the student must seek approval to see COVID-19 patients under their physicians’ guidance and avoid seeing patients with COVID-19 unless fully protected and vaccinated. This includes patients under investigation (PUI).
• A student who has proof of a valid religious conflict to taking the vaccine may also appeal utilizing the same process as those with a medical excuse. Just as in those with a medical excuse, if unable to find a clinical site willing to provide the unvaccinated medical student's clinical education, the student's education may be delayed until an appropriate site that does not require the vaccine is found.

F. Avoiding COVID-19 in the Social Setting: As a matter of professionalism, students must also avoid contracting COVID-19 from social environments. This includes wearing a mask, washing hands frequently, followed by hand sanitizer, and social distancing. Students must avoid large gatherings that do not observe these same rules. Failure to observe the above requirements can result in a Professionalism and Ethics violation and a formal HCC hearing or PESB.

G. Avoiding COVID-19 in the Medical Workplace: Students must be aware of the CDC guidelines for all clinical providers to minimize the spread of the infection: These include obtaining the COVID-19 vaccination, follow PPE guidelines, actively self-screen and be knowledgeable of symptoms of COVID-19 before entering a health care facility, and optimize the use of PPE to preserve supplies. Students should be observant of these as they apply to the learning environment; however, they should also rely on teaching physicians' advice on such matters.

H. Communication: Students are required to communicate! VCOM OMS-3 and 4 students are required to inform the following should they have symptoms consistent with a
person under investigation (PUI) for COVID-19. These notifications should occur whether the student has laboratory-confirmed COVID-19 illness or is in self-quarantine awaiting results:

- Associate Dean for Clinical Affairs as the COVID-19 Officer for students in the clinical years
- Clinical Faculty Preceptor
- Site Coordinator
- Director of Student Medical Education (DSME)

**Summary:** VCOM expects OMS-3 and 4 students to model exceptional physician professional behavior to safeguard their health and the health of the public. This is accomplished through vaccination, early recognition of signs and symptoms, taking timely protective actions to avoid the transmission of COVID-19 to others, and reporting their situation to those responsible for their learning and well-being.

VCOM students should be aware that state and local health departments may adapt recommended testing guidelines to respond to rapidly changing local circumstances and so should check email daily. VCOM students should stay abreast of the COVID-19 criteria of their clinical site through the DSME. If not more often, which includes information on testing and treatment.

Students should follow the procedures of their clinical site for PPE by Medical Students and inform the College if supplemental PPE is needed as this has been and can be provided to the institution for VCOM students. Students are to notify the Associate Dean for Clinical Affairs if not being provided PPE by their clinical site.

For the information provided above, VCOM credits the following resources: CDC website, NIH guidelines, recommendations by AACOM, AAMC, AMA, and the AOA, the US Department of Education, as well as other state and national organizations (too numerous to mention) who have been essential in providing guidance and information in the continual updating of COVID-19 requirements and restrictions.

### SECTION VII. WORKPLACE POLICIES RELATED TO COVID-19 FOR EMPLOYEES ONLY

#### A. EMPLOYEES AT HIGH-RISK FROM COVID-19 AND ACCOMMODATIONS:

Employees who are considered to be at increased risk of experiencing severe illness due to a COVID-19 infection should consult with their medical provider and follow their recommendations regarding the safety of attendance before returning to campus.

- **Risk Factors:** Persons at-risk generally include, but not limited to, the following: those with current cancer, chronic kidney disease, Chronic Obstructive Pulmonary Disease, organ transplantation, morbid obesity, serious heart conditions, sickle cell blood disorder and blood clotting disorders. Additional conditions are listed on this site from time to time, and so persons with chronic disease of any type should check with their physician and check the website: [cdc.gov/coronavirus/2019-ncov/need-extraprecautions/people-with-medical-conditions.html](http://cdc.gov/coronavirus/2019-ncov/need-extraprecautions/people-with-medical-conditions.html).

- **Age as a risk factor:** If you are older than 65 and in good health, age is considered a relative risk factor as complications from COVID-19 have been seen to increase with age. Age alone is not a high-risk factor requiring leave.
B. REQUESTING MEDICAL LEAVE DUE TO HIGH-RISK CONDITIONS:
Employees who request medical leave due to high-risk medical conditions must follow the procedures for requesting medical leave listed in the employee handbook. Policies for pay and benefits for employees who take medical leave will follow those listed in the employee handbook and are available under FICCRA.

C. EMPLOYEE REQUESTS FOR ACCOMMODATIONS:
Employees requesting accommodations to their work environment (including requesting to work remotely) must apply through HR. Under Phase 3, and when fully vaccinated, the risk of returning to work is greatly reduced. The employee is therefore expected to receive the vaccine. Once fully vaccinated, if the employee does not wish to return to the workplace he or she must be approved for a medical leave. The employee may also request accommodations. HR will meet with the employee, their Division Officer and the Dean, and the COVID-19 officer, who will deem if the employee can complete equivalent work from home in a productive and efficient manner. All requests cannot be granted, as certain positions are required on campus for efficiency and work requirements. The Dean and Division officer must ensure the campus duties may still be conducted appropriately and efficiently. The determination is made on a case-by-case basis and is both job-dependent and medical-condition dependent. If required, the Dean, may call an individual assessment team to determine if accommodations are appropriate and warranted upon consultation with HR. VCOM, where possible, will assist an employee in mitigating risk by reassignment of duties, shared job duties, or other modifications. Again, this is not always possible.

D. FAMILIES FIRST ACT and POLICIES REGARDING PAID SICK LEAVE FOR EMPLOYEES FOR COVID-19, AND/OR PAID SICK LEAVE FOR SELF QUARANTINE
Families First Coronavirus Response Act (FFCRA): The FFCRA required employers to provide their employees with paid sick leave and expanded family and medical leave for specified reasons related to COVID-19 from April 2020 through December 31, 2020. These included up to two weeks (80 hours) of paid sick leave for COVID-19. These are in addition to the two weeks of paid leave that VCOM provides to employees. The two weeks of paid sick leave provided under FFCRA are allowed to be paid at a lower rate by the requirements of the FFCRA; however, VCOM maintained regular pay rates. This time period has lapsed. The qualifying reasons for approved employee leave (80 hours with pay) was related to COVID-19 and because the employee:
• Is subject to a Federal, State, or local quarantine or isolation order related to COVID-19
• Has been advised by a health care provider to self-quarantine related to COVID-19
• Is experiencing COVID-19 symptoms and is seeking a medical diagnosis
• Is caring for an individual subject to an order described in (1) or self-quarantine as described or (2) is caring for their child whose school or place of childcare is closed due to COVID-19 (and another childcare provider is unavailable in the home)
• Is experiencing any other substantially similar condition to the above as specified by the U.S. Department of Health and Human Services.

E. REQUESTING UNPAID LEAVE
Additional unpaid leave may be requested, and approvals will depend upon if the reason for leave qualifies under the employee handbook or FMLA guidelines.
• If a health care provider has advised an employee to self-quarantine for reasons related to COVID-19 and they have used all paid sick leave (80 hours under FFCRA and 80 hours provided by VCOM), then the employee must obtain a certification of need for the leave and provide this to their supervisor and Division Officer or Dean.

• If the Division Officer or Dean, along with the supervisor, have duties that both the supervisor and Dean or Division Officer approve to be done at home, the work from home duties will be assigned first. If the employee cannot complete their assigned duties from home (as deemed by the Dean or Division Officer), then the employee will be required to take unpaid medical leave or unused sick days or vacation days, depending upon which the employee requests to use.

• VCOM Human Resources intends to work with employees experiencing difficulty where possible; however, the employees must meet the essential duties required to operate the campus and academic programs.

F. LEAVE AND ACCOMMODATIONS FOR CHILD CARE: VCOM understands that daycare or schools sometimes close for COVID-19 related reasons, and when this occurs, there may not be other suitable childcare available for the employee.

• When using the prior days from FFCRA (up through December), the employee is entitled to up to 80 hours of paid leave from July 1, 2020- June 30, 2021. An additional four weeks of unpaid leave may be taken if required. Employees must provide a request for such leave through Human Resources. Days related to FFCRA will only be considered for those taken before December 31, 2020.

• Employees who have exhausted all leave may wish to consider developing childcare sharing arrangements with another VCOM employee to avoid unpaid leave or exhausting all leaves that would be approved (paid or unpaid). Frequent school closures may continue, so not to miss work hours beyond the hours of paid leave, employees should explore childcare arrangements for such needs. Employees may periodically request from their supervisor and the Dean and/or Division Officer to work from home if job tasks can be done from home, balancing sick leave, childcare, and vacation days to avoid unpaid leave. The Division Officer or Dean will determine on a case-by-case basis whether the employee can accomplish the work at home in a manner equivalent to working on campus and whether the employee’s presence is needed to conduct college business and student support. In general, the approved leave balances are those that allow an employee to miss work for child illness.

G. CAREGIVERS FOR HIGH-RISK INDIVIDUALS IN FAMILY: Employees were initially granted 80 hours of paid sick leave as with FFCRA to care for DEPENDENT HIGH-RISK INDIVIDUALS IN FAMILY through December 2020. This type of leave is no longer granted. VCOM will allow an employee to use up to 80 hours of their paid sick leave to care for a spouse or immediate family member using paid sick leave. The supervisor and/or Division Officer or Dean may allow additional unpaid leave if the employee has exhausted all paid sick leave. However, this will be limited as to not to interfere with delivering a safe workplace and the academic program.

H. TOTAL AMOUNT OF PAID SICK LEAVE: Employees should note that they are only eligible for 80 hours of paid sick leave under FFCRA and 80 hours of paid sick leave under their original VCOM benefits (four weeks maximum), recognizing that all FFCRA leave had to be taken before December 31, 2020. This also includes self-quarantine times. The employee must provide the request in writing to HR by the Supervisor and Division Officer and/or the Dean for approval.
I. HISTORY OF THE DECISIONS TO COMPLETE WORK AT HOME AND RETURN TO THE WORKPLACE
During Phase 1 and Phase 2 of the pandemic, VCOM sought to work with all the employees balancing the College’s work that could be completed at home and that required in the workplace. This helped to reduce the number of persons in the building and the spread of COVID-19. VCOM had no true campus outbreaks due to these safety measures. As we have moved into Phase 3, and all employees are vaccinated, it will be safe to return to the workplace.

• Some latitude for working from home will be provided to Departments or Divisions until all have been vaccinated.

• While 90% of employee work will be done on campus, it has been found that some employee work can be done from home. These positions are limited and will require the Campus Dean or Division Officer’s approval with notification to and final approval by the President.

• A Committee will review an employee requesting accommodations as to whether accommodations can be provided that will allow the employee to complete the same work and workload. If this is not possible, the institution may reassign the employee or allow the employee to take leave. Considerations provided by the employee, supervisor, and the Campus Dean or Division Officer will also be included.

J. RETURNING TO CAMPUS AFTER EXPOSURE OR AFTER HAVING CONTRACTED COVID-19 EXPOSURES: Employees who have experienced a known exposure to a person who is ill with COVID-19 and who are not fully vaccinated, without a mask, six foot social distancing, or had a significant exposure (such as in the home) will be required to self-quarantine. This is for ten days and a COVID-19 test is recommended if the exposure was significant (i.e., caring for a child or other ill person in the home). If fully vaccinated, a self-quarantine will not be required. The employee must use MYHEALTHTRACER.COM throughout this time.

K. RETURN OF EMPLOYEES AFTER HAVING CONTRACTED COVID-19: According to the current guidelines, employees who have contracted COVID-19 may now return to campus after ten days, IF the employee has been without fever for at least the last four days of the ten days. If the employee is still ill at ten days or has any symptoms, they will need to be seen again by their physician and not return until the employee tests negative. COVID-19 spread is not a problem after the ten days per current medical literature. Someone experiencing symptoms and/or fever after the ten days probably has symptoms from secondary infection or complications from COVID-19, not the COVID-19 infection itself. Therefore, the employee is expected to seek treatment and provide a medical excuse for not returning to work after 14 days. The new illness should be addressed as a separate issue with a separate physician visit to determine the need to treat the secondary infection. The employee may use the ten sick days and any other leave days toward the time off required.

L. EMPLOYEE OBLIGATION TO NOTIFY THE DIRECTOR FOR HUMAN RESOURCES OF ILLNESS
   a. Employees must notify the Director for Human Resources, as the COVID-19 point of contact, if they become ill with any COVID-19 symptoms. The notification should be as early in the day as possible. The employee should also notify their supervisor of the illness by email or phone (or both when possible). The appropriate Division Officer and/or Dean will also be notified.
b. Employees are also to report to the Director for Human Resources as the COVID-19 officer if they are aware of other employees who become ill with COVID-19 symptoms, so appropriate testing and notifications occur.

c. The employee who becomes ill will receive appropriate instructions for testing, for days appropriate to miss, and required procedures before returning to campus.

d. If the employee tests positive for COVID-19, the proper exposure tracking must occur, and campus safety measures, which may include closing classrooms and laboratories for a day or a certain number of days. While additional appropriate cleaning occurs and allows time to ensure that other students, faculty, or staff do not develop symptoms.

e. VCOM will continue to work closely with the health department on testing employees and appropriate tracking procedures for others in the building who are exposed to an employee who tests positive for COVID-19.

f. All employees who become ill with COVID-19 will be required to report all exposures utilizing the MyHealthTracer system to identify and hopefully stop the spread of the COVID-19 virus.

M. EMPLOYEE RISK AWARENESS AND ASSUMPTION OF RISK: 

All students, faculty, and staff are returning to the campus at their own risk. As it is possible for any student, faculty, or staff member to contract COVID-19 at the grocery store, gas station, or other public areas, and therefore all persons have some exposure risks, VCOM assumes no responsibility for any person who may contract COVID-19 while an active employee. Employees should be aware that it is likely that a student or employee will be exposed to COVID-19 over the next several months and that the employee may infect one or more persons on a VCOM campus. Therefore, it is imperative that all on the College Campus obtain the vaccine. This is for the health of all employees and their families.

Those employees with concerns should meet with the Dean and HR, or their Division Officer and HR, to have questions or concerns answered regarding their assumption of risk.

NOTIFICATIONS: When an alteration of the academic schedule or work schedule occurs, notifications to all employees will be made utilizing email. Employees are required, therefore, to read their campus emails daily.

IT SHOULD BE NOTED THAT ALL POLICIES WITHIN THIS DOCUMENT POSTED HAVE BEEN DEVELOPED SUBJECT TO STATE AND NATIONAL ACCREDITATION BODIES, RECOMMENDATIONS FROM LOCAL AND STATE HEALTH DEPARTMENTS, AND RECOMMENDATIONS BY THE CDC FOR HIGHER EDUCATION AND ARE THEREFORE SUBJECT TO FREQUENT CHANGES WHEN THE RECOMMENDATIONS AND POLICIES OF THOSE BODIES CHANGE. FACULTY, STAFF, AND STUDENTS WILL BE NOTIFIED OF SUCH CHANGES WHEN THEY IMPACT THE DOCUMENT.

State Maps: https://covid.cdc.gov/covid-data-tracker/index.html#county-map
SECTION VIII. EVENTS ON CAMPUS: Events on campus are limited in number to avoid the spread of COVID-19.

a. **All INDOOR Events must be preapproved through the office of the Campus Dean and the President.**

b. **INDOOR Events with Guests** from outside the campus community (employees and students) must be pre-approved by and must be planned by Administration. These will be limited in number and include such events as graduations, board meetings, and other such mandatory events.
   - When approved, no more than 35 people will be allowed in event rooms that normally have a capacity of 90 or more.
   - Additional attendees will be allowed in the theatre-style auditorium classrooms or have a capacity of 190 or more; however, all events indoors will remain at 50% capacity.
   - When state or community requirements restrict the College to fewer attendees, the state and community guidance will supercede VCOM’s requirements.
   - In addition to the above capacity requirements, attendance will be only for the number where 6 foot distancing is possible, and masks and all other precautions will apply. At the time of this document, Virginia’s ten feet distancing will be followed for such indoor events, and verification of immunization or negative tests will be required.
   - All normal cleaning and safety procedures will be followed.

c. Once greater than 85% of the students and employees have been vaccinated, the opportunity for more events to occur on campus (without outside guests) will exist. When held, room capacity limits, six-foot distancing, masks, and hand sanitizing requirements will still apply.

d. All indoor events require appropriate departmental supervision and verified pre-approval by the COVID-19 officer, the Dean, and the President.

e. **OUTDOOR Events Limited to Students, Faculty, and Staff:** On Campus Outdoor events must be preapproved by the Dean and the President.
   - Events held outdoors for students have occurred earlier in the year without significant issue. More will be planned when the student body and employees have achieved optimal vaccination percentages.

f. The student outdoor events are currently generally limited to the class size and 50 employees or less, the total number being less than 240. When these types of larger events are held, the numbers will allow the 6 to 10-foot separation of persons (or between family and/or groups of roommates). All must wear masks, and hand sanitizing and other precautions followed. All such events must be approved by the Dean and President and will engage the COVID-19 officer. These events may be restricted from time to time due to changes within the state or community where guidance has been provided that supersedes VCOM requirements during times of outbreaks. VCOM administration will inform the students, faculty, and staff of each event’s requirements via email.
g. Larger OUTDOOR Events with Guests (i.e., graduation or white coat): Larger outdoor and indoor events may be planned with the President and Campus Dean’s approval, and administration will ensure all community and state guidelines are followed. These events are generally not held on the VCOM campus and are held on the University Campus or a community venue. When being held on the University Campus or using a community venue, both VCOM and the university and community safety precautions will be followed. The administration will announce these guidelines for each event.

h. **Proof or verification of vaccination will be required to attend all large events or events where persons from outside the campus are invited.** This will be required for most indoor and outdoor events held on campus for those over the age of six. For those unable to verify vaccination, a negative COVID-19 test result will be required.
Section 2

VCOM Facilities Plan for Safe Operations of the Campus
SECTION 2: VCOM Facilities Plan for Safe Operations of the Campus

The Vice President for Facilities serves on the College-wide COVID-19 Committee and each campus team. The Director of Facilities on each VCOM Campus will assure campus-specific procedures are followed. The policies put in place in 2020 have been followed to date and allowed the campus community to remain safe. The policies and procedures below will be followed after April 1, 2021, as the campuses have moved to Phase 3. These policies will be re-evaluated for any modifications if the campus moves back to Phase 1 or Phase 2.

1. Signage will remain throughout the campus buildings reminding students and employees on ways to stay safe, including but not limited to: hand-washing, hand sanitizer, staying home if ill, physical distancing, face masks, and banning congregation.
2. To ensure physical distancing and keeping less than 50% capacity in any classroom or laboratory, all capacity will also ensure 6-foot distancing is possible. VCOM has remodeled event facilities for classrooms, removed excess chairs, ensured technology is in place, and altered student schedules to continue these safety practices. Once all employees and students have been vaccinated, restrictions will likely continue to be relaxed. VCOM will keep employees and students notified of changes promptly.
3. Visitors have been limited to essential visitors for business purposes only, and all administrators are aware and employees are required to consult with supervisors before inviting visitors.
4. All faculty, staff and students have been advised to stay at home if ill.
5. A small amount of “grab and go” food services will be provided through healthy vending and self-check-out kiosks; however, everyone is still advised to bring their own food for safety.
6. A physical distancing of six to seven feet will be required between students and the speaker in the classrooms. If the appropriate distancing is provided, and the students are wearing masks, the speaker may remove their mask in order to be heard.
7. All classrooms are limited to 50% capacity, including the speaker.
8. Laboratory attendance also is restricted to 50% capacity per room.
9. Hand sanitizing stations are placed at each entrance, elevators, classroom entrances, and other common areas throughout the building.
10. In general, the majority of the time, only half of the first and second-year medical students will be on campus at the same time.
11. Congregating in the hallways is not allowed.
12. The restrooms capacity is limited to the number of people in the stalls and two persons waiting to appropriately self-distance.
13. VCOM has increased the number of cleaning staff and cleaning protocols.
14. Students are advised to study at home when possible. Students are allowed to study within the building is limited to 8 am to 10 pm Monday through Thursday; 8 am to 8 pm on Friday; and Saturday 10 am to 8 pm. Sunday study hours are restricted to between 12 noon and 10 pm. Physical distancing protocols still apply.
15. Each small group study room will be posted as to maximum occupancy and physical distancing restrictions. These restrictions will also apply in the library.
16. Students will not be allowed to study in lecture hall space after 8 pm so the classrooms can be cleaned nightly.
18. Students wishing to study on campus must sign-in documenting where they will be studying. These will be limited to areas designated for study and available on a first-come, first-serve basis. In general, medical students as adult learners are asked to study at home if at all possible.

19. Prevention education has been provided to students, faculty, and staff following CDC guidelines.

20. All areas for work have been evaluated for workspace physical distancing. Employees in offices are asked to keep their office doors closed (or nearly closed) and wear a mask when exiting their office or when receiving visitors in the office.

21. Conference rooms will be limited to the number that can appropriately self-distance. All others will join by ZOOM.

22. Cleaning:
   a. Classrooms will be wiped at night and at noon
   b. All surfaces will be cleaned with a germicidal disinfectant that contains a minimum of 75% alcohol and a known chemical that kills COVID-19.
   c. All door handles, stair-rails, and other frequently touched surfaces will be cleaned each evening.
   d. All faculty and staff are provided with a canister of wipes to clean their desks and in-office surfaces each evening and between visitors (other faculty, staff and students) in their office.
   e. If a student, faculty, or staff member tests positive for COVID-19 and they have been coming to campus, the area they occupied will be thoroughly disinfected and be vacated for an appropriate period of time while cleaned.

23. VCOM students have independent housing and are not owned by the College. Students and Employees have been directed to follow CDC guidelines regarding care and clean the home.

24. VCOM students, faculty, and staff are encouraged to use outdoor space for breaks, lunches or study. Students, faculty and staff will be responsible for wiping the patio tables with their own wipes that the College has provided.
Section 3

Information Technology Plan
EDWARD VIA COLLEGE OF OSTEOPATHIC MEDICINE

SECTION 3: Information Technology Plan

History: In March of 2020, VCOM increased the number of licenses for ZOOM, making this technology available to all employees and students for meetings and educational sessions. VCOM has always used a technology referred to as VCOM TV, where all lectures, presentations, and some laboratory demonstrations were recorded and placed in a restricted site for the VCOM community. Using this technology allowed VCOM to adapt to offering virtual education to all students with minimal educational disruption. Faculty and staff who used desktops were provided with laptops so they could work from home. As VCOM employees and students have and are returning to the Campus buildings, as of April 1, 2021, the following

Instructions for the use of ZOOM technology and other online meetings

1. All faculty and staff are to use ZOOM technology where possible for larger meetings or meetings where physical distancing may be challenging.
2. All faculty and staff are welcome to use ZOOM technology for smaller meetings where effective.
3. Some face-to-face meetings are still required, and when this occurs, masks and six-foot distancing are still recommended.
4. More privacy restrictive technology may be used for meetings such as professionalism and ethics boards and promotion boards.
5. Faculty and staff have been trained on using ZOOM technology, so that meetings can occur with ease.

Information Technology Support for the Department of Medical Education, for Simulation, and for Faculty Support

6. All faculty preparing the curriculum to be delivered in-person and delivered virtually for asynchronous learning may request IT support and should notify their IT Department if having technical difficulty with online presentations or other IT needs.
7. IT will continue to support the recording of faculty presentations, simulated standardized patient visit needs, and any needs regarding CANVAS.
8. Testing will continue to occur via Exam Soft, which students can utilize on-campus and off-campus.
9. Students will be set up with individual appointments with IT to install the required educational software using the VCOM ticketing system.
10. Email addresses are provided by virtual means.
11. Appointments for ID badges will be set individually within the first two weeks on campus in the fall of 2021.

The students will be provided with the appropriate information during orientation. Students, faculty, and staff will continue to use the help desk for assistance.
Section 4

Policy for Persons Who Develop Symptoms of COVID-19 While on Campus
EDWARD VIA COLLEGE OF OSTEOPATHIC MEDICINE

SECTION 4: Policy for Persons Who Develop Symptoms of COVID-19 While on Campus

The COVID-19 Officers are the:

- Associate Dean for Student Affairs for first and second-year students,
- Associate Dean for Clinical Affairs for third and fourth-year students, and the
- Director of Human Resources (for employees).

Each of these COVID-19 Officers will assist you in contacting a healthcare provider and testing if you become ill on campus. In addition, they will connect you with the local health department as required.

If you become ill on campus, you will be placed in a room dedicated to the purpose of providing immediate isolation of those who become ill. From this point, HR will assist all employees and the appropriate officer for students to arrange for transportation home and in finding/scheduling an appointment with a healthcare provider if needed.

Policy for Persons Who Develop Symptoms of COVID-19 While on Campus

1. Notify the COVID-19 Officer on campus
2. The COVID-19 Officer will help you obtain a test for COVID-19 and notify your local healthcare provider (by telemedicine or in-person).
3. The COVID-19 Officer will also assist you in notifying the local health department.
4. Each of these COVID-19 Officers will assist you with contacting a provider and testing with the local health department when requested.
5. While waiting on campus for disposition and transportation, you will be isolated in a room that has been established to protect you and others at VCOM from spreading the virus.
6. If you test negative, you were probably not infected at the time of the test; however, until you have the test results, you must act in a manner as though the test is positive and self-quarantine.

COVID-19 Screening and Testing on Returning to Campus: Following the CDC’s guidance, all students and employees will not return to campus for at least ten days after contracting COVID-19. If still experiencing symptoms, the employee must see a physician and be tested before return. Employees and students who are beyond ten days from contracting COVID-19 and who are not experiencing symptoms do not require a negative test to return.

Screening: All persons coming to campus will continue to be screened with a questionnaire to deem if they are at risk for having COVID-19. The screening tool is myhealthtracer.com. The questionnaire will include temperature checks and a symptom survey for all employees and students. The screening tool questions users on symptoms, exposure, and whether the person has been vaccinated or not. These measures help to keep our campus employees and students safe.
VCOM will follow the state and local health department guidance on testing of persons who demonstrate illness and may be required to perform random screening on campus from time to time.

If you test positive, you will be asked to follow the local health department’s advice, and read and follow the CDC’s guidelines on protecting yourself and others when you test positive for COVID-19. You will also be required to follow the policy and procedures below.

If you test positive for COVID-19 and/or become ill at home and are waiting to be seen or tested, you should take all preventive measures to protect yourself and others while awaiting test results. You should also ask for the PCR test. The following guidance is found on the CDC website under **What to Do If You Are Sick With COVID-19** and includes:

- **Stay home.** Most people with COVID-19 have a mild illness and can recover at home without hospital care. Do not leave your home or visit public areas, except to get medical care.
- **Take care of yourself.** Get rest and stay hydrated. Take over-the-counter medicines, such as acetaminophen, to help you feel better.
- **Stay in touch with your doctor.** Call before you get medical care. Be sure to get care if you have trouble breathing or have any emergency warning signs. VCOM does not provide student health services. VCOM contracts with health providers off-campus to ensure students have access to health care. Please see the VCOM College Catalog and Student Handbook or talk to your VCOM COVID-19 Officer on accessing health care.
- **Avoid leaving your home except for healthcare purposes.**
- **Avoid public transportation, ride-sharing or taxis.**
- **Separate yourself from other people** within your home, stay in a specific room in your home away from other people and pets and do not share a bathroom if possible.
- **Assure others in your home wear face masks, practice handwashing and use hand sanitizer, use gloves** if possible, and **socially distance** a minimum of six feet or more from you when they bring something to your room.
- **Eat on paper plates and use disposable utensils** if ill, carried to an outside trash area daily.
- **Use tissues** to cover your mouth and dispose of them in a trash bag that is removed nightly.
- **Wash your hands frequently** with soap and water for 20 seconds
- **Avoid touching** your eyes, nose, and mouth with unwashed hands.
- **Avoid** sharing personal household items, including but not limited to dishes, drinking glasses, cups, eating utensils, towels, or bedding with other people in your home.
- **Wash any items touched thoroughly** with soap and water or put in the dishwasher.
- **Clean and disinfect** high-touch surfaces in your “sick room” and bathroom; wear disposable gloves. Let someone else clean and disinfect surfaces in common areas, but you should clean your bedroom and bathroom, if possible.
- **If a caregiver or other person needs to clean and disinfect** a sick person’s bedroom or bathroom, they should do so only on an as-needed basis. The caregiver/other person should wear a mask and disposable gloves prior to cleaning.
15. **Clean all** high-touch surfaces include phones, remote controls, counters, tabletops, doorknobs, bathroom fixtures, toilets, keyboards, tablets, and bedside tables with soapy water and then disinfectant. Be careful of electronics and water.

16. **If showing any of these signs, seek emergency medical care immediately:**
   i. Trouble breathing and/or persistent pain or pressure in the chest
   ii. New confusion or Inability to wake or stay awake
   iii. Severe fatigue and shortness of breath when walking
   iv. Bluish lips or face

2. **Self-Quarantine Following COVID-19 Illness after Testing Positive.** If you have become ill, or have tested positive for COVID-19, you may not return to campus for ten days from the onset of symptoms. In addition, the employee or student must ensure a minimum of four days symptom-free and without fever. **You are no longer required to test negative prior to returning to campus IF** you have abided by the CDC guidance listed and stay at home a full ten days from when testing positive. This will help to protect others, so you do not infect other students or employees.

3. **If testing positive, OMS-3 and OMS-4** students who have had COVID-19 may not return to the clinical site for a minimum of 10 days, must ensure a minimum of four days symptom-free and without fever; and follow the requirements of the clinical site as to the need for a negative test; therefore, the period may extend beyond ten days if symptoms extend beyond that time period. For in-hospital rotations, the students must speak with the DSME. For ambulatory rotations, the student may speak with the Associate Dean and/or the preceptor. VCOM follows the policy to not require testing before returning as recommended by the CDC.
Section 5

VCOM COVID-19 Coordinators and Campus Response Teams
Edward Via College of Osteopathic Medicine (VCOM)

SECTION 5: VCOM COVID-19 Coordinators and Campus Response Teams

COVID-19 College-Wide Contacts for Questions Regarding the Plan

- Contact and Email Address for questions from employees:
  Robert Hudson, Vice President for Human Resources, rhudson@vcom.vt.edu

- Contact for State and National Accrediting Bodies and Departments of Health
  Debbie West EdD, Vice Provost, Academic Planning, Institutional Effectiveness, and Accreditation, dwest@vt.vcom.edu
  Secondary contact: Dixie Tooke-Rawlins, DO President and Provost, dtrawlins@vt.vcom.edu

Lead contact for Students regarding Questions on this plan:

- Virginia 1st and 2nd year Students: Whitney Stokes, Associate Dean for Student Affairs
  wstokes@vt.vcom.edu

- Virginia 3rd and 4th year Students: Sofia Abraham-Hardee, DO, PhD, Associate Dean Clinical Affairs
  sabraham@vt.vcom.edu

- Auburn 1st and 2nd year Students: Jake Williamson, PhD, Associate Dean Student Affairs
  jwilliamson@auburn.vcom.edu

- Auburn 3rd and 4th year Students: Robert Pepper, DO, Associate Dean for Clinical Affairs
  rpepper@auburn.vcom.edu

- Carolinas 1st and 2nd year Students: Lindsey Ridgeway, PhD, Associate Dean Student Affairs
  lridgeway@carolinas.vcom.edu

- Carolinas 3rd and 4th year Students: Lindsey Tjiattas-Saleski, DO, Associate Dean Clinical Affairs
  ltjiattassaleski@carolinas.vcom.edu

- Louisiana 1st year Students: Nathan Kinnard, Associate Dean for Student Affairs
nkinnard@ulm.vcom.edu

Lead Contacts for Employees for COVID-19 Questions - Campus Specific

Employee contacts: Robert Hudson, Vice President for Human Resources and/or the Director of Human Resources on your campus.

I. VCOM COLLEGE-WIDE COVID-19 COMMITTEE APPOINTED MEMBERS AND CHARGES:

Chair: Robert Hudson, Vice President for Human Resources and COVID-19 College-wide Officer
Co-Chair: Dixie Tooke-Rawlins, DO, President and Provost
Co-Chair: Debbie West, EdD, Vice Provost, Academic Planning, Institutional Effectiveness, and Accreditation:
COVID-19 officers for each campus:
   Whitney Stokes, Associate Dean for Student Affairs wstokes@vt.vcom.edu
   Sofia Abraham-Hardee, DO, Associate Dean Clinical Affairs sabraham@vt.vcom.edu
   Jake Williamson, PhD, Associate Dean Student Affairs jwilliamson@auburn.vcom.edu
   Robert Pepper, DO, Associate Dean for Clinical Affairs rpepper@auburn.vcom.edu
   Lindsey Ridgeway, PhD, Associate Dean Student Affairs lridgeway@carolinas.vcom.edu
   Lindsey Tjiattas-Saleski, DO, Associate Dean Clinical Affairs ltjiattassaleski@carolinas.vcom.edu
   Nathan Kinnard, Associate Dean for Student Affairs nkinnard@ulm.vcom.edu

Campus Deans from each Campus: Jan Willcox, DO, Virginia
                                      John Lucas, DO, Auburn (Interim)
                                      Matthew Cannon, DO, Carolinas
                                      Ray Morrison, DO, Louisiana

Vice President for Finance and CFO: Chuck Swaha
Vice President for Communications, Marketing, Website & Publications: Cindy Rawlins
Vice President for Administrative Policy and Law: Honorable Randy Schuller
Vice President for Facilities and IT: Bill Price

Student representatives: One for OMS-1 and OMS-2 students
                                      One for OMS-3 and OMS-4 students

COVID-19 COLLEGE-WIDE COMMITTEE PURPOSE AND PROCEDURES

• The Committee will be convened each block or as needed.
• The Committee will focus on policies and procedures and follow all Campuses’ status and their response to COVID-19.
• The Committee will review national trends, including the impact from national decisions made by AACOM, COCA, the CDC, and or the Federal Government.
• The Committee will propose actions and changes by Administration to VCOM policies and procedures as needed to adapt to COVID-19 and the COVID-19 plan.
• Minutes will be taken by the Executive Assistant for the Vice President for Human Resources.
• The impact of any changes to the overall College will also be reviewed and must be approved by the President and the Vice President for Institutional Policy and Administrative Law.

The President may also appoint a Committee to meet to review considerations for vulnerable students or employees when there are issues on accommodations that cannot be resolved by the COVID-19 Officer and the Campus Dean or Division Officer.

When the Committee meets on an employee or student, all efforts will be taken to ensure confidentiality with only the Committee, the Campus Dean and/or the Division Officer who is the individual’s supervisor, and the President being knowledgeable of the decision made.

**Emergent Actions:**
The Committee or the President, Campus Dean, the Vice President for Human Resources, the Senior Vice President, and the Vice Provost for Academic Planning, Institutional Effectiveness, and Accreditation will meet on any emergent conditions that arise and may call a Committee meeting when needed. The Director of Human Resources and the Student COVID-19 Officer may also be included if there is a Campus outbreak. In this case, the liaison with the local Health Department / District or their COVID-19 contact will be notified of new cases. The Directors of the local Health Departments where any of the VCOM Campuses are located will be invited to be a member of the Campus Committee and receive a copy of this plan and updates. The local Health Departments will be asked to perform contact tracing where needed. Confidentiality is maintained for all tracings.

**Health Department Contacts**
In consultation with the Campus Dean and the President, the Director of Human Resources and/or the Vice Provost will inform the local Health Department if the Campus is impacted. The Health Departments’ contact information in each state is kept with the Director of Human Resources on that campus.

(Required to be posted)
The Virginia contact information is: New River Health District
Virginia Department of Health, 210 Pepper St. SE, Suite A, Christiansburg, VA 24073
Phone: (540) 585-3304 in addition, in Virginia, the local NRV Health Department Director, Noelle Bissell, MD serves on the VCOM-Virginia Campus COVID-19 Committee.
Section 6

Plans for a Response to COVID-19 Case and a COVID-19 Outbreak on Campus
EDWARD VIA COLLEGE OF OSTEOPATHIC MEDICINE

SECTION 6: Plans for a Response to COVID-19 Case and a COVID-19 Outbreak on Campus

This document will be used as the quick reference on VCOM’s response to a COVID-19 suspicious case, positive case, or multiple cases as an outbreak on campus to mitigate campus spread. This plan follows the Institutions of Higher Education (IHE) Decision Tree provided through the CDC. However, it should be noted that VCOM will work closely with the local health department on confirmed cases, who may have recommendations or additional requirements beyond what is written below.

A. WHEN SOMEONE BECOMES ILL WHO IS ON CAMPUS

All employees and students have been informed NOT to come to campus if they are ill. However, if someone becomes sick after arriving on campus, they must contact the COVID-19 Officer on Campus. The COVID-19 Officer will place the person in an isolated room (a room has been arranged for such purposes, and the person with symptoms will remain there through the risk assessment).

1. An appropriate assessment of risk will occur to include:
   • Is this someone who became ill on campus or soon after leaving campus and does not have COVID-19 symptoms?
   • Is this someone who has COVID 19 symptoms and no diagnosis has been made?

2. If the employee or student has COVID-19 symptoms, arrangements will be made for the employee or student to be seen by a physician of their choice.

3. Same-day testing will be required, so the positive or negative test information will return quickly.

4. If a student or employee tests positive for COVID-19, that person may not return to campus for ten days and at least four days without fever. The student or employee should call their COVID-19 Officer to be cleared to return to campus.

5. The CIFSS Division will work with the student to ensure that they are supported academically and for psychological effects.

6. Appropriate protective gear will be worn by those cleaning. The area will be cleaned and disinfected and closed off from other students and employees until it is safe to occupy again. See the Facilities Plan for cleaning and disinfecting the area.

7. If a student or employee tests negative for COVID-19, they will be treated as all others who present with illnesses other than COVID-19 according to the faculty and staff handbooks and students according to the student handbook.

8. The COVID-19 Officer will have the employee or student perform appropriate tracking for exposures prior to becoming ill and during the illness and maintain this tracking for the health department. The MyHealthTracer.com app will be used. The name of the employee or student infected will remain confidential.

The appropriate COVID-19 Officer for the student or faculty member and the Campus Dean will also serve as the individual(s) responsible for assisting the employee or student in notifying the local Health Department that the person has tested positive for COVID-19, to share known contacts, and to develop a plan for safe disposition, and a
plan for the campus. While awaiting the test results, the employee or student occupied area will be taped off until a thorough cleaning/disinfecting occurs prior to anyone working in the area again. The facilities team will be trained for such cleaning. See the Facilities document for further information on cleaning.

9. Any decision on closing the campus and on the return to campus will be made by the VCOM administration (President, Dean, Division Officers) in consultation with the local Health Department, and notification and cooperation will be done with the College’s accrediting body if this extends greater than one week.

10. **VCOM will follow the state and local health department advice on closure** when there is a significant surge of community cases, local and state actions may close the campuses.

11. VCOM administration, in consultation with the Committee and the Health Department, may determine if a short-term closure is required for additional cleaning of campus buildings.

12. During a time of a reported positive case, there will be heightened monitoring. The monitoring will include close observation of students’ and employees’ reports of illness, absenteeism from tests and required on-campus events, and other measures employed as possible, including contact tracing by the health department to ensure there is no extended spread. Students and employees will be told to notify the COVID-19 Officer if they develop any symptoms. Testing will be supported.

**B. COMMUNICATION**

The President, the Campus Dean, COVID-19 Campus Committee, and the VP for Communications and Marketing will determine the best process to communicate information regarding the news of possible exposure and any news to dismiss classes. This will be done in a manner in coordination with the local health department officials.

1. VCOM will ensure the plan includes messages to counter potential **stigma** and discrimination.

2. In a circumstance where there is a confirmed COVID-19 case that has been on campus, VCOM recognizes and will ensure confidentiality of the student or staff member is maintained as required by the Americans with Disabilities Act, the Family Education Rights and Privacy Act, and HIPAA.
Section 7

VCOM'S Provisions for Academic Assistance to Students While Opening and Operating Under COVID-19 Restrictions
SECTION 7: VCOM’S Provisions for Academic Assistance to Students While Opening and Operating Under COVID-19 Restrictions

VCOM’s Center for Institutional, Faculty, and Student Success (CIFSS) on each campus provides academic assistance to VCOM students in various ways. The following guidelines have been put in place to ensure all forms of academic assistance during a restricted campus opening, during future campus closures, or should a student become ill and be quarantined off-campus due to COVID-19.

Academic Assistance
The Center provides nearly 1000 academic assistance meetings to OMS-1 through OMS-4 students each academic year. While most of these meetings occur in-person on campus, the Center currently utilizes other forms of technology for meetings with OMS-3 and OMS-4 students or with OMS-1 and OMS-2 students after hours, and these methods will continue to be utilized.

While the campus is open, students may continue to schedule individual in-person appointments with the Directors for Student and Institutional Academic Success. However, students may also schedule a Zoom or phone meeting. Zoom and/or phone meetings are encouraged while the campuses are under COVID-19 restrictions and have worked well to date.

All appointments with the Directors, except in emergencies, must be made in advance using the Bookings link provided to the students. When scheduling, students will be prompted to specify their choice of setting (in-person, Zoom, or phone).

Should a Director meet with students in-person:

- Students and the Director must wear face masks
- Students and the Director must socially distance
- Directors must disinfect any areas the student may have touched in their office (arms of chair, desk, doorknob) immediately following the meeting

Students should arrive on time for their appointment and should avoid arriving early as waiting areas will not be available for student use.

Peer Tutoring
Peer tutoring sessions are held for OMS-1 and OMS-2 students before every examination. Typically offered in-person for an unlimited number of students, sessions will now be offered via Zoom to minimize student gatherings. The dates and times for peer tutoring sessions will be posted on CANVAS and the block calendars.

Academic Advising
OMS-1 and OMS-2 students are assigned biomedical and clinical faculty academic advisors. Students may still meet with their academic advisors; however, Zoom meetings are encouraged whenever possible. Advisors may only meet with one student at a time. When meeting with a student or students in person, students and advisors must wear face masks and socially distance; and the advisors and students must wipe down areas where they met with disinfectant wipes following the meeting.
Section 8

Coping with COVID-19: Strategies for VCOM Students
SECTION 8: Coping with COVID-19: Strategies for VCOM Students

Mental Health Resources

A pandemic can cause high levels of stress, which will affect each student in different ways. Fear and anxiety can cause strong emotions that may exacerbate a pre-existing mental health condition or initiate new symptoms. It is important that students take care of their mental health and be aware of any red flags that indicate a need for help.

For emergency or non-emergency, confidential personal counseling, students have on-campus and off-campus counseling options that are of no cost.

On-Campus Counseling

- VCOM employs a Mental Health Counselor on each campus, and students are free to utilize the support of any of the four counselors regardless of which campus they attend.
  - Students may schedule non-emergency appointments through the Bookings link previously provided to them and located in Canvas. Appointments are offered in person, by phone, or via Zoom (video conference).
  - Students can also contact any of the Directors of Counseling Services by email or phone.
    - Carolinas Campus: Natalie M. Fadel, PsyD nfadel@carolinas.vcom.edu
      864-327-9875
    - Virginia Campus: Edward Magalhaes, PhD, LPC emagalhaes@vt.vcom.edu
      540-231-1944
    - Auburn Campus: Mary A. Taylor, PhD, MS mtaylor@auburn.vcom.edu
      334.442.4037
    - Louisiana Campus: David Boyle, PhD, LPC dboyle@ulm.vcom.edu
      318.342.7100

Off-Campus Counseling

- In addition to VCOM’s Mental Health Counselors, VCOM contracts with mental health providers in the campus community to assure that VCOM students have readily accessible mental health services when preferred by the student. Local mental health services are free of charge and are available to students on each campus and immediate family members. In-person and telehealth options are available.
  - Carolinas Campus: Spartanburg Area Mental Health Center (SAMHC) www.sparmhc.org
    864 585-0366. 24-hour emergency care line: 864-585-0366 or 1-800-277-1366
  - Virginia Campus: New River Valley Community Services (NRVCS) www.nrvsc.org
    540-961-8300. 24-hour emergency care line: 540-961-8400
  - Auburn Campus: Auburn Psychology Group
    http://www.auburnpsychology.com/ 334-897-4343. 24-hour emergency care line:
    334-524-5858
  - Louisiana Campus: Affinity Behavioral Health Clinic
    318-807-6258. 24-hour emergency care line: 318-807-6281
- **WellConnect**: For third and fourth-year students, VCOM also contracts with WellConnect, a national mental health service that will facilitate in-person counseling, phone sessions, or online sessions from any location. 24/7 emergency and non-emergency confidential line: 866-640-4777 or visit WellConnectForYou.com, School code: VCOM.

- **HealthiestYou by Teledoc**: A national virtual counseling service available to all students who have United Healthcare insurance through VCOM. Video, phone, and text options are available for counseling. Students with this plan are able to set up free appointments through the HealthiestYou app or they can call 855-870-5858.

A variety of other resources are available to students in crisis:

- Students who feel they are experiencing an emergency should call 911.
- **Disaster Distress Helpline**: 1-800-985-5990 or text TalkWithUs to 66746. [https://www.samhsa.gov/find-help/disaster-distress-helpline](https://www.samhsa.gov/find-help/disaster-distress-helpline) Provides immediate crisis counseling to people affected by natural or human caused disasters.
- **National Suicide Prevention Lifeline**: 1-800-273-TALK (8255) [www.suicidepreventionlifeline.org](http://www.suicidepreventionlifeline.org), or Lifeline Crisis Chat to connect with a counselor via web chat. [https://suicidepreventionlifeline.org/chat/](https://suicidepreventionlifeline.org/chat/)
- **Crisis Text Line**: Text HOME to 741741 if you are in a crisis. Provides 24/7 mental health support via text message, [www.crisistextline.org](http://www.crisistextline.org)

The CDC and the Department of Mental Health at the Johns Hopkins Bloomberg School of Public Health provide tips on how individuals can protect their mental health during these trying times while also following guidelines set by health authorities to protect our physical health. VCOM also recommends these tips as guidelines to students:

**Know the signs and symptoms**

Stress during an infectious disease outbreak can sometimes cause the following:

- Fear and worry about your own health and the health of your loved ones, financial situation or job, or loss of support services you rely on
- Changes in sleep or eating patterns
- Difficulty sleeping or concentrating
- Worsening of chronic health problems
- Worsening of mental health conditions
- Increased use of tobacco, alcohol or other substances

People who may respond more strongly to the stress of a crisis include:

- People who are at higher risk for severe illness from COVID-19 (for example, older people and people with underlying health conditions)
- Children and teens
- People caring for family members or loved ones
- Frontline workers such as health care providers and first responders, retail clerks, and others
- Essential workers in the food industry
• People who have existing mental health conditions
• People who use substances or have a substance use disorder
• People who have lost their jobs, work hours reduced, or other major changes to their employment
• People who have disabilities or developmental delay
• People who are socially isolated from others, including people who live alone, and people in rural or frontier areas
• People in some racial and ethnic minority groups
• People who do not have access to information in their primary language
• People experiencing homelessness
• People who live in congregate (group) settings

Healthy ways to cope with stress

Create structure

• Create a daily and/or weekly schedule. When working at home, have a dedicated study area in a location that is conducive to studying. Make it for study/work only and have all the things you need to make it your own.
• Set limits on time spent watching, reading or listening to news reports that cause you to feel anxious or distressed. A near-constant stream of news reports can be upsetting and distracting. Instead, seek CDC updates and practical guidelines at specific times during the day.
• Make space for activities and conversations that have nothing to do with the outbreak.
• Check in with yourself throughout the day to make sure you are in the driver’s seat of what you are doing with your mind and body. Minimize distractions while studying like phone and social media to maintain productivity and sense of control.

Maintain your physical health

• Aim for 7-9 hours of sleep most nights. Good quality, sufficient sleep helps to support your immune system and helps you to better manage stress and regulate emotions. [See recommendations by the National Sleep Foundation.]
• Try to eat at regular times and opt for nutritious foods whenever possible. Some people may crave junk food or sugary snacks and be tempted to snack mindlessly when stressed or bored, and others may skip meals altogether.
• Maintain an exercise routine, even if you cannot go to the gym. Exercise at home using an online workout video, or go for a walk, run, or bike ride. Getting outside can also help to calm and reset your mind.

Stay Connected

• Taking care of your friends and your family can be a stress reliever, but it should be balanced with self-care. Helping others cope with their stress, such as providing social support, can also make your community stronger. During times of increased social distancing, people can still maintain social connections and care for their mental health. Virtual communication (like phones or video chats) can help you and your loved ones feel less lonely and isolated.
• Crises offer a time for community cohesion and social solidarity, and volunteering is one way to help others and yourself. Science has repeatedly shown that volunteering can improve mental health. Check out this article for a list of organizations to donate to and this article for
other ways to help your neighbors and community. You can also get involved with VCOM outreach opportunities.

- If you have children, talk to them honestly about what is going on in an age-appropriate manner. Help kids positively express their feelings, whether playing in the backyard, drawing, or journaling. Check out these guides by the Substance Abuse and Mental Health Services Administration, Child Mind Institute, or National Association of School Psychologists for tips on how to talk to your kids about coronavirus.

Take care of your spirit

- Find a place of worship that is streaming or recording services. If prayer is an important part of your life, make time for it. Stay connected to your church community through phone calls, emails, and video chats.
- Try meditation, deep breathing, progressive muscle relaxation, or another mindfulness or relaxation technique. Check out YouTube or phone apps such as Calm or Headspace for guided meditation exercises. Consider enlisting friends and family and practicing meditation together at least once a day. Mindfulness can help lower blood pressure, reduce stress, support your immune system, and protect brain health.

Continue or seek out mental health treatment

- If you are currently in mental health treatment, continue with your current plan if possible, being mindful of approaches to minimize contact with others. Consider reaching out to a mental health professional even if you haven’t before. Make sure you have ongoing access to any medications you need.
- Ask about video therapy or phone call appointments. Most states have already made emergency exemptions to insurance coverage for telehealth. Regulations have been temporarily relaxed to allow even non-medical software like Skype, FaceTime, and Zoom to be used for telehealth. Contact your provider to ask about remote services.
- Avoid drugs and alcohol, particularly if you have a pre-existing mental health or substance use disorder. Check out online support groups and meetings, such as Alcoholics Anonymous, Smart Recovery, and In The Rooms.
- The need for social distancing may make it difficult to see symptoms of depression in others. With social isolation, the in-person opportunities that we usually have in which to notice that friends, family, and colleagues may be struggling with a problem are no longer there. One way to think about it is that child abuse or intimate partner violence is missed more often in winter because long clothes cover bruises. Conduct regular "check ins" with your network and stay attuned to symptoms of depression, such as persistent feelings of sadness, hopelessness, loss of interest or pleasure in activities, or changes in sleep and weight.

Conclusion

Remember that the emotions you may be experiencing are normal reactions to difficult circumstances. Accept that things are different right now and everyone is adjusting. Prioritize what is most important and know that it is okay to let some things go right now. Be kind to yourself and others. Try to stay positive and use this time to try things you have been putting off, such as learning a new skill, or getting in touch with your creative side. This is an opportunity to connect with classmates differently.
Section 9

Coping with COVID-19: Strategies for VCOM Employees
Section 9: COPING with COVID-19: Strategies for Employees

Mental Health Resources

A pandemic can cause high levels of stress, which will affect employees in different ways. Fear and anxiety can cause strong emotions that may exacerbate a pre-existing mental health condition and/or initiate new symptoms. It is important that employees take care of their mental health and have an awareness of any red flags that indicate a need for help.

For non-emergency counseling, contact a local health care provider. There are also national telehealth options available.

For a mental health care provider or substance abuse treatment:

- Employees who carry insurance through VCOM can contact the Anthem Employee Assistance Program (EAP) for counseling options- https://www.anthem.com/employer/eap/employee/. There is an online option (LiveHealth Online) for live therapy via smartphone, tablet or computer to get expert advice, a treatment plan, and medication, if needed.
- Employees can also contact the Substance Abuse and Mental Health Services Administration (SAMHSA) www.samhsa.gov/find-treatment 1-800-662-HELP (4357)

On-Campus Resources

- While VCOM’s on-campus Mental Health Counselors do not provide counseling services to employees, employees may seek the advice of these counselors as to the employee’s next steps in dealing with their mental health issue and/or provide referrals and resources.
  - Carolinas Campus: Natalie M. Fadel, PsyD nfadel@carolinas.vcom.edu 864-327-9875
  - Virginia Campus: Edward Magalhaes, PhD, LPC emagalhaes@vt.vcom.edu 540-231-1944
  - Auburn Campus: Mary A. Taylor, PhD, MS mtaylor@auburn.vcom.edu 334.442.4037
  - Louisiana Campus: David Boyle, PhD, LPC dboyle@ulm.vcom.edu 318.342.7100

For an immediate crisis:

- Call 911
- Disaster Distress Helpline: 1-800-985-5990 or text TalkWithUs to 66746. https://www.samhsa.gov/find-help/disaster-distress-helpline
  Provides immediate crisis counseling to people affected by natural or human caused disasters.
The CDC and the School of Public Health from John’s Hopkins have created some tips on how individuals can protect their mental health during these trying times while also following guidelines set by health authorities to protect our physical health. VCOM has read and also recommends these tips as guidelines for VCOM employees:

How to cope with work-related stress and build resilience during a pandemic

Whether you are going into work or working from home, the COVID-19 pandemic has probably changed the way you work. Fear and anxiety about this new disease and other strong emotions can be overwhelming, and workplace stress can lead to burnout. How you cope with these emotions and stress can affect your well-being, the well-being of the people you care about, your workplace, and your community. During this pandemic, it is critical that you recognize what stress looks like, take steps to build your resilience and manage job stress, and know where to go if you need help.

Know the signs and symptoms of stress:

- Feeling anger, irritation, or in denial
- Feeling uncertain, nervous, or anxious
- Lacking motivation
- Feeling tired, overwhelmed, or burned out
- Feeling sad or depressed
- Having trouble sleeping
- Having trouble concentrating

Know the common work-related factors that can add to stress during a pandemic:

- Concern about the risk of being exposed to the virus at work
- Taking care of personal and family needs while working
- Managing a different workload
- Lack of access to the tools and equipment needed to perform your job
- Feelings that you are not contributing enough to work or guilt about not being on the frontline
- Uncertainty about the future of your workplace and/or employment
- Learning new communication tools and dealing with technical difficulties
- Adapting to a different workspace and/or work schedule
- Healthcare personnel and first responders are at higher risk for burnout. See here for more CDC recommendations on how to cope- https://www.cdc.gov/coronavirus/2019-ncov/hcp/mental-health-healthcare.html
Follow these tips to build resilience and manage job stress:

- Communicate with your coworkers, supervisors, and employees about job stress while maintaining social distancing (at least 6 feet).
- Identify things that cause stress and work together to identify solutions.
- Talk openly with your supervisor and colleagues about how the pandemic is affecting work. Expectations should be communicated clearly by everyone.
- Ask about how to access mental health resources in your workplace.
- Identify those things, which you do not have control over and do the best you can with the resources available to you.
- Increase your sense of control by developing a consistent daily routine when possible — ideally, one that is similar to your schedule before the pandemic.
  - Keep a regular sleep schedule.
  - Take breaks from work to stretch, exercise, or check in with your supportive colleagues, coworkers, family, and friends.
  - Spend time outdoors, either being physically active or relaxing.
  - If you work from home, set a regular time to end your work for the day, if possible.
  - Practice mindfulness techniques—[www.mindful.org](http://www.mindful.org)
  - Do things you enjoy during non-work hours.
  - Understanding the risk and sharing accurate information with people you care about can reduce stress and help you make a connection with others.
- Remind yourself that each of us has a crucial role in fighting this pandemic.
- Remind yourself that everyone is in an unusual situation with limited resources.
- Take breaks from watching, reading, or listening to news stories, including social media. Hearing about the pandemic repeatedly can be upsetting and mentally exhausting.
- Connect with others. Talk with people you trust about your concerns, how you are feeling, or how the COVID-19 pandemic is affecting you.
  - Connect with others through phone calls, email, text messages, mailing letters or cards, video chat, and social media.
  - Check on others. Helping others improves your sense of control, belonging, and self-esteem. Look for safe ways to offer social support to others, especially if they are showing signs of stress, such as [depression and anxiety](https://www.nimh.nih.gov/health/topics/depression/index.shtml).
  - Crises offer a time for community cohesion and social solidarity. Science has repeatedly shown that volunteering can improve mental health. Check out this [article](https://www.volunteermatch.org/pressrelease.html) for a list of organizations to donate to and this [article](https://www.vcom.edu/) for other ways to help your neighbors and community. You can also get involved with VCOM outreach opportunities.
  - If you have children, talk to them honestly about what is going on in an age-appropriate manner. Help kids express their feelings in a positive way, whether
playing in the backyard, drawing, or journaling. Check out these guides by the Substance Abuse and Mental Health Services Administration, Child Mind Institute, or National Association of School Psychologists for tips on how to talk to your kids about coronavirus.

- If you feel you may be misusing alcohol or other drugs (including prescription drugs) as a means of coping, reach out for help.
- If you are being treated for a mental health condition, continue with your treatment and be aware of any new or worsening symptoms.

Maintain your physical health

- Aim for 7-9 hours of sleep most nights. Good quality, sufficient sleep helps to support your immune system and helps you to better manage stress and regulate emotions. See recommendations by the National Sleep Foundation.
- Try to eat at regular times and opt for nutritious foods whenever possible. Some people may crave junk food or sugary snacks and be tempted to snack mindlessly when stressed or bored, and others may skip meals altogether.
- Maintain an exercise routine, even if you cannot go to the gym. Exercise at home using an online workout video, or go for a walk, run, or bike ride. Getting outside can also help to calm and reset your mind.

Take care of your spirit

- Find a place of worship that is streaming or recording services. If prayer is an important part of your life, make time for it. Stay connected to your church community through phone calls, emails, and video chats.
- Try meditation, deep breathing, progressive muscle relaxation, or another mindfulness or relaxation technique. Check out YouTube or phone apps such as Calm or Headspace for guided meditation exercises. Consider enlisting friends and family and practicing meditation together at least once a day. Mindfulness can help lower blood pressure, reduce stress, support your immune system, and protect brain health.

Continue or seek out mental health treatment

- If you are currently in mental health treatment, continue with your current plan if possible, being mindful of approaches to minimize contact with others. Consider reaching out to a mental health professional even if you have not before. Make sure you have ongoing access to any medications you need.
- Ask about video therapy or phone call appointments. Most states have already made emergency exemptions to insurance coverage for telehealth. Regulations have been temporarily relaxed to allow even non-medical software like Skype, FaceTime, and Zoom to be used for telehealth. Contact your provider to ask about remote services.
- Avoid drugs and alcohol, particularly if you have a pre-existing mental health or substance use disorder. Check out online support groups and meetings, such as Alcoholics Anonymous, Smart Recovery, and In The Rooms.
- The need for social distancing may make it difficult to see symptoms of depression in others. With social isolation, the in-person opportunities that we usually have to notice that friends, family, and colleagues may be struggling with a problem are no longer there. One way to
think about it is that child abuse, or intimate partner violence is missed more often in winter because long clothes cover bruises. Conduct regular "check-ins" with your network and stay attuned to symptoms of depression, such as persistent feelings of sadness, hopelessness, loss of interest or pleasure in activities, or changes in sleep and weight.

Conclusion

Remember that the emotions you may be experiencing are normal reactions to difficult circumstances. Accept that things are different right now and everyone is adjusting. Prioritize what is most important and know that it is okay to let some things go right now.

Be kind to yourself and others. Try to stay positive and use this time to try things you have been putting off, such as learning a new skill, getting in touch with your creative side, or starting that project at work that has been on the back burner.

It can be hard to think past what is going on today, let alone in a week or in six months, but give yourself permission to daydream about the future and what is on the horizon. Remember that this is temporary, and things will return to normal.

Section 10

Curriculum for COVID-19
for VCOM Students
SECTION 10: Curriculum for COVID-19
For VCOM Students

JUNE 1, 2020

In order to best prepare for the opportunity to care for patients with the novel SARS-CoV-2, students must be aware of the management perspectives and differences in severity of disease. In order to prepare for the possible scenarios, each student is required to complete the New England Journal of Medicine COVID-19 Primer exercise, the five simulated NEJM cases, as well as the post-test administered by VCOM (to show understanding of the material). These must be completed by all OMS-3 and OMS-4 students and must be done prior to any clinical rotations beginning June 1, 2021.

**COVID-19 Supplemental Curriculum**

**Learning Objectives**: Upon completion of this module, an OMS-3 or 4 learner will be able to:

1. Identify the significant risk factors for poor prognosis in COVID-19
2. Manage complications associated with severe COVID-19
3. Determine the best route to manage hypoxia for COVID-19 patients
4. Utilize the most recent guidelines to manage the disease manifestations

First step is to complete the COVID-19 Primer:

The Second task within part one is to complete all five simulation cases:

Third, upon sending attestation of completion to Clinical Affairs, complete the COVID-19 exam.

**COVID-19 Personal Protective Equipment Supplemental Curriculum**

This learning module focuses upon preparing VCOM students who are entering or re-entering the clinical setting for learning in the context of COVID-19. The scope of this learning module is narrow as it is limited to key knowledge and actions necessary for VCOM OMS-3 and 4 learners to maximize their health and safety as well as protecting the health and safety of patients, patients’ family members, and Health Care Professionals (HCPs) encountered in the ambulatory setting. This knowledge and these initial actions prior to entering or re-entering the ambulatory settings are integral to the osteopathic physician identity formation and professionalism as informed and affected by the evolving COVID-19 pandemic. This module *does not* provide clinical management guidance.

**Learning Objectives**: Upon completion of this module, an OMS-3 or 4 learner will be able to:

1. Describe the categories of non-pharmaceutical interventions NPIs available for use in an ambulatory clinical setting to mitigate the spread of COVID-19
2. Recognize and be able to employ non-pharmaceutical interventions for the spread of COVID 19
3. Differentiate between Source Control masks and PPE masks
4. Recognize appropriate Personal Protective Equipment (PPE) utilized in ambulatory settings to decrease the spread of COVID-19
5. Identify the proper PPE to be used in one’s specific ambulatory clinical setting.
6. View videos provided by the CDC for proper Donning and Doffing of PPE
7. Recognize proper Donning of PPE and possible contamination/exposure points in this procedure
8. Recognize proper Doffing of PPE and possible contamination/exposure points in this procedure

**Expectations**

VCOM seeks to support a safe learning environment for its OMS-3 and 4 students in a clinical setting, whether outpatient or inpatient, against the evolving health risks associated with the COVID-19 pandemic. Providing instructional materials to students to promote avoidance of infection during clinical training is vital to the health of all.

VCOM OMS-3 and 4 students have a high professional responsibility to recognize in themselves COVID-19 symptoms at the earliest stages and quickly take personal actions to protect their health as well as to protect the health of all those with whom they may have contact. This is physician professionalism at its most basic.

By providing this PPE educational information, if diligently learned and properly applied, students should be able to protect themselves and others from exposure. This learned information and skills should be transferrable by the VCOM student to any core site or rotation site across the nation.

Students should have already learned the signs and symptoms of COVID-19 infection from the additional information sent by VCOM and a review of the Self-Triage and Initial Actions Modules.

1. To reiterate and stress the non-pharmaceutical interventions please see the following CDC links:
   - staying home when sick
   - how to avoid spreading germs at work

2. For Using Personal Protective Equipment (PPE) please be sure to watch the donning and doffing video.
   - [https://www.youtube.com/watch?v=YYTATw9yav4](https://www.youtube.com/watch?v=YYTATw9yav4)

Please be aware that different ambulatory clinics may have different PPE requirements and different ways of triaging patients AND employees (students) before entering the facility. To assure you are prepared, the student MUST read the following and learn the definitions:


**Additional information**

- Links to a one hour CDC QA session: [https://www.youtube.com/watch?v=V9p10jSld9s](https://www.youtube.com/watch?v=V9p10jSld9s)
• Link to 3M respirator data: https://multimedia.3m.com/mws/media/17915000/comparison-ffp2-kn95-n95-filtering-facepiece-respirator-classes-tb.pdf
Section 11


and

VCOM Research Restart Plan Checklist

The guidance contained within this document applies to research in any VCOM operated lab, whether on a VCOM campus, rented lab space, collaborative University or clinical partner site. While researchers will be required to adhere to the guidance provided by the host site, each investigator must recognize that VCOM has an obligation to ensure that faculty, staff and students are protected from unnecessary COVID-19 exposure regardless of outside authorities. As such, please read this document carefully as it applies to ALL research involving VCOM faculty, staff or students.

Researchers resuming or initiating new research protocols were required to address a risk mitigation plan outlining the procedures that will be implemented to prevent the potential transmission of COVID-19. Prevention measures should be in place for not only research participants but also investigators and personnel working in compact lab spaces. Each research team should evaluate the risks and benefits, carefully considering any additional precautions that must be taken.

When developing the risk mitigation plan, keep in mind that actions taken for public health or clinical purposes (and not for research) are not considered ‘research activities.’ No IRB approval is required before implementation. For example:

- Mandatory clinical screening for COVID-19 (currently MyHealthTracer.com) for all who come to an institution, including research subjects
- Sharing such clinical screening results with a public health authority or with the research subjects

A Risk mitigation plan should be developed for each lab that addresses the following:

1. A statement on any specific COVID-19 risks in the proposed research location and/or setting. If it is equal to the general public risk, this should be stated and should state any areas where the risk is increased.
2. General Procedures and precautions should be listed. These should be consistent with the College’s plan.
   - For research involving human subjects, describe plans to identify or screen the health status of your study participants as to COVID-19 status.
   - If in-person meetings are essential, limit in-person meetings to 10 people or less and ensure 6-foot social distancing between participants. (50% capacity of the room also applies).
   - Describe any ‘red flags’ that would indicate that the study should not or cannot proceed (rules for social distancing, hygiene protocols, and staffing considerations that might impact your ability to complete the study safely and/or per the protocol).
   - Describe the location in which the contact tracing log for those outside of VCOM will be stored.
3. Plans for Physical Distancing, including reducing time and minimizing potential exposure:
   - Describe social distancing measures for all designated areas (clinics, hospitals, research spaces, offices, etc.).
   - Describe requirements for research/lab personnel vs. participants.
   - Describe the plan if participants show up with visitors as visitors are not allowed and must wait in cars outside or return later.
• Describe any scheduling alterations to ensure staggered arrival and minimize the number of personnel in space.
• Include protocol for staff to follow in the event they feel ill.
• Outline respiratory etiquette to be followed, including covering coughs and sneezes.
• Describe any new sanitary or isolation protocols in place

4. Plans to Require and/or Supply PPE:
• Emphasize that research personnel should continue to follow previously established lab-specific requirements for PPE while in the lab or in common areas.
• Provide guidance for appropriate use

5. Plans for Disinfecting Equipment and Surfaces:
• Document when to use hand wash station or hand sanitizing station, and who is required to maintain
• Establish cleaning and disinfecting procedures for high contact surfaces in the lab and common areas, as well as all shared equipment and surfaces twice daily
• Recognize that quantitative microbial risk assessment (QMRA) studies have been conducted to understand and characterize the relative risk of SARS-CoV-2 fomite transmission and evaluate the need for and effectiveness of prevention measures to reduce risk. Findings of these studies suggest that the risk of SARS-CoV-2 infection via the fomite transmission route is low and generally less than 1 in 10,000, which means that each contact with a contaminated surface has less than a 1 in 10,000 chance of causing an infection

6. For human subjects research, discuss other ways in which the study conduct might be impacted:
• Recruitment:
  o Do you still have the ability to recruit participants for your study?
  o Does your recruitment strategy need to change? Can it change?
  o Do you need new recruitment materials explaining COVID-19 related risks?
• Informed Consent
  o Is there a virtual process or online tool for obtaining consent?
  o What is the investigator’s role in the consent process?
  o Are you still allowed to use clinic facilities for consenting?
  o How will the COVID-19 Consent Addendum be obtained from participants?

In addition to a COVID-19 risk mitigation plan, research involving human subjects will be required to include in the Informed Consent document specific information regarding COVID-19 risk and risk reduction strategies as it applies to research participants. Informed Consent templates found in the forms and templates library of IRBNet have been revised to include this information. Studies in which informed consent has already been obtained will be required to have research participants sign an addendum to the previously signed document. Templates for this addendum can be found in the forms and templates library of IRBNet.

Researchers will be required to prepare and maintain daily contact tracing logs; contact tracing on campus is for all visitors to the lab. For human subjects’ research, you will be required to maintain separate contact logs for research participants and research personnel. These logs may be electronic or
paper and should be stored in a secure location separate from other study-related information and research data. The daily contact tracing logs should be completed by a member of the research team. In the event that a case is reported that originated with a participant or a member of the research team, the Principal Investigator is responsible for alerting the appropriate local health authority, as well as the VCOM IRB. The contact tracing log should be maintained for a minimum of 60 days and be consistent with institutional policies where the research is being conducted.

For research not involving human subjects, daily contact tracing logs are required for all lab personnel. As this is done in MyHealthTracer, this would primarily be for the visitors to the laboratory and students. In the event that a case is reported that originated with a member of the research team, the Principal Investigator is responsible for alerting the appropriate local health authority, as well as the Associate Deans for Biomedical Affairs.

Additional resources are available through the CDC.

VCOM Research Restart Plan Checklist

Prepared by: ___________________________ Date: _________________

Please address the following questions about your laboratory/space and plans to restart or begin new research at VCOM and attach your risk mitigation plan. These documents must be submitted and approved prior to the initiation or the resumption of research.

- For research involving human subjects research, please submit risk mitigation plan along with this completed checklist to IRB Administration.

- For all other research (those studies not involving human subjects), please submit risk mitigation plan along with this completed checklist to Dr. Mahaney, Chair of VCOM IEBC.

GENERAL SPACE CONSIDERATIONS  YES NO Any Concerns Not Addressed in Your Mitigation Plan

1. Have you read and used VCOM’s COVID-19 Basic Requirements for Resuming or Initiating Research to plan research restart or initiation?

2. Briefly describe any research activities and/or special equipment that may be impacted by your restart plan.

3. Can you conduct your research activities in compliance with current occupancy and social distancing standards as determined by local health authorities AND institutional guidance?

4. Have you followed VCOM’s guidance in addressing the safety and works plans for all self-identified high-risk personnel?
5. Have you planned your research activities so that all work that can be done remotely will continue remotely?
   - If yes, identify those activities
   - If no, explain why not

6. Do your cleaning and disinfecting protocols adhere to VCOM Institutional, Environmental, and Biosafety Committee or laboratory partner site (AU, VT, ULM etc.) guidance?
   - Have you identified additional cleaning and disinfecting needs for your space, laboratories, and shared office spaces?
     - If yes, explain (include to whom have these responsibilities been assigned?)

7. Do personnel need to use another space for your research program (for example, use of common equipment in other locations, shared tissue culture rooms, supply areas, etc.)?
   - If yes, do you have a copy of the social distancing traffic patterns, PPE requirements, and cleaning and disinfecting protocols for these spaces?
   - If that space is a core facility space, have you discussed your use and access needs with the Director of Facilities?

8. Have you reviewed VCOM’s guidance for social distancing and cleaning in common areas, such as breakrooms, lunchrooms, shared offices, workstations, and conference rooms?
9. Should any personnel or research participant either exhibit symptoms of SARS-coV-2 or quarantine be required because of contact with and potential exposure, is your plan to address research activities in these circumstances consistent with VCOM guidelines?

10. Have all your research personnel been informed of the research restart plans, understand their role in it, know how to report violations of the plan and know what to do if they become exposed to SARS-coV-2?

If conducting field research, address the following:

11. Will research personnel be conducting field research off campus?
   - If yes, identify the mitigation measure you will be using at the field location.
   - If yes, have you planned for health care contingencies off site?
   - If yes, how will you prevent the trafficking of SARS-coV-2 back to campus?

If conducting research with human participants, address the following:
12. Have you submitted your risk mitigation plan using guidance found in VCOM’s COVID-19 Basic Requirements for Resuming or Initiating Research document?

13. Will research personnel and/or participants need to go into non-VCOM operated clinical areas to interact with research participants?
   - If yes, will your personnel and research participants be following guidance issued by the hospital or clinic?
   - If no, explain why not

14. Will research personnel need to leave campus to interact with research participants?
   - If yes, identify the locations where these interactions with research participants will occur; identify the plan for determining health status of these research participants and how PPE will be provisioned and social distancing measures be implemented at the off-site location.
   - How will you prevent trafficking of any SARS-coV-2 back to campus spaces?
15. Will research participants be provided with specific information regarding risk and risk reduction strategies as it applies to research participants either via Informed Consent Addendum [previously enrolled participants] or a revised Informed Consent Document [new enrollees]?

16. Have you prepared a daily contact tracing log to be used for in person encounters as described in VCOM’s COVID-19 Basic Requirements for Resuming or Initiating Research document?
   - If yes, have research team members been instructed on the proper use and secure storage of this log?

17. Have you submitted a modification request to the IRB which includes any revisions to study procedures or documents as required by Federal IRB regulations?

Name and Signature of Preparer: ________________________________

Name and Signature of PI, if not Preparer: ________________________
Section 12

Avoiding Social Stigma from COVID-19
SECTION 12: AVOIDING SOCIAL STIGMA FROM COVID-19

WHAT IS SOCIAL STIGMA?

Social stigma in the context of health is the negative association between a person or group of people who share certain characteristics and a specific disease. In an outbreak, this may mean people are labeled, stereotyped, discriminated against, treated separately, and/or experience loss of status because of a perceived link with a disease.

Such treatment can negatively affect those with the disease, as well as their caregivers, family, friends and communities. People who don’t have the disease but share other characteristics with this group may also suffer from stigma.

The current COVID-19 outbreak has provoked social stigma and discriminatory behaviors against people of certain ethnic backgrounds as well as anyone perceived to have been in contact with the virus.

WHY IS COVID-19 CAUSING SO MUCH STIGMA?

The level of stigma associated with COVID-19 is based on three main factors: 1) it is a disease that is new and for which there are still many unknowns, 2) we are often afraid of the unknown; and 3) it is easy to associate that fear with ‘others.’

It is understandable that there is confusion, anxiety, and fear among the public. Unfortunately, these factors are also fueling harmful stereotypes.

WHAT IS THE IMPACT?

Stigma can undermine social cohesion and prompt possible social isolation of groups, which might contribute to a situation where the virus is more, not less, likely to spread. This can result in more severe health problems and difficulties controlling a disease outbreak.

Stigma can: • Drive people to hide the illness to avoid discrimination • Prevent people from seeking health care immediately • Discourage them from adopting healthy behaviors

HOW TO ADDRESS SOCIAL STIGMA

Evidence clearly shows that stigma and fear around communicable diseases hamper the response. What works is building trust in reliable health services and advice, showing empathy with those affected, understanding the disease itself, and adopting effective, practical measures so people can help keep themselves and their loved ones safe.

How we communicate about COVID-19 is critical in supporting people to take effective action to help combat the disease and to avoid fueling fear and stigma. An environment needs to be created in which the disease and its impact can be discussed and addressed openly, honestly and effectively.

Here are some tips on how to address and avoid compounding social stigma:

1. Words matter: dos and don’ts when talking about the new coronavirus (COVID-19)
2. Do your part: simple ideas to drive stigma away
3. Communication tips and messages.

WORDS MATTER:

When talking about coronavirus disease, certain words (i.e., suspect case, isolation) and language may have a negative meaning for people and fuel stigmatizing attitudes. They can perpetuate existing negative stereotypes or assumptions, strengthen false associations between the disease and other factors, create widespread fear, or dehumanize those who have the disease.

This can drive people away from getting screened, tested and quarantined. We recommend a ‘people-first’ language that respects and empowers people in all communication channels, including the media. Words used in media are especially important because these will shape the popular language and communication on the new coronavirus (COVID-19). Negative reporting has the potential to influence how people suspected to have the new coronavirus (COVID-19), patients and their families and affected communities are perceived and treated.

There are many concrete examples of how the use of inclusive language and less stigmatizing terminology can help to control epidemics and pandemics from the HIV, TB and H1N1 Flu.

DOS and DON'TS

Below are some DOs and DON'Ts on language when talking about the new coronavirus disease (COVID-19):

DO - talk about the new coronavirus disease (COVID-19)
DON'T - attach locations or ethnicity to the disease; this is not a “Wuhan Virus,” “Chinese Virus” or “Asian Virus.” The official name for the disease was deliberately chosen to avoid stigmatization - the “co” stands for Corona, “vi” for virus and “d” for disease, 19 is because the disease emerged in 2019.

DO - talk about “people who have COVID-19,” “people who are being treated for COVID-19,” “people who are recovering from COVID-19,” or “people who died after contracting COVID-19”
DON'T - refer to people with the disease as “COVID-19 cases” or “victims.”

DO - talk about “people who may have COVID-19” or “people who are presumptive for COVID-19”
DON'T - talk about “COVID-19 suspects” or “suspected cases.”

DO - talk about people “acquiring” or “contracting” COVID-19.
DON’T talk about people “transmitting COVID-19,” “infecting others,” or “spreading the virus” as it implies intentional transmission and assigns blame. Using criminalizing or dehumanizing terminology creates the impression that those with the disease have somehow done something wrong or are less human than the rest of us, feeding stigma, undermining empathy, and potentially fueling wider reluctance to seek treatment or attend screening testing and quarantine.

DO - speak accurately about the risk from COVID-19, based on scientific data and the latest official health advice.

DON'T- repeat or share unconfirmed rumors, and avoid using hyperbolic language designed to generate fear like “plague,” “apocalypse,” etc.
DO - talk positively and emphasize the effectiveness of prevention and treatment measures. For most people, this is a disease they can overcome. There are simple steps we can all take to keep ourselves, our loved ones and the most vulnerable safe.

DON’T - emphasize or dwell on the negative or messages of threat. We need to work together to help keep those who are most vulnerable safe.

DO - emphasize the effectiveness of adopting protective measures to prevent acquiring the new coronavirus, as well as early screening, testing and treatment.

DO YOUR PART:

Governments, citizens, media, key influencers and communities have an important role to play in preventing and stopping the stigma surrounding people from China and Asia in general. We all need to be intentional and thoughtful when communicating on social media and other communication platforms, showing supportive behaviors around the new coronavirus disease (COVID-19). Here are some examples and tips on possible actions to counter stigmatizing attitudes:

- Spreading the facts: Stigma can be heightened by insufficient knowledge about how the new coronavirus disease (COVID-19) is transmitted and treated and how to prevent infection. In response, prioritize the collection, consolidation and dissemination of accurate country- and community-specific information about affected areas, individual and group vulnerability to COVID19, treatment options and where to access health care and information.

- Engaging social influencers such as religious leaders on prompting reflection about people who are stigmatized and how to support them or respected celebrities to amplify messages that reduce stigma. The information should be well-targeted, and the celebrities who are asked to communicate this information must be personally engaged and geographically and culturally appropriate to the audiences they seek to influence. An example would be a mayor (or another key influencer) going live on social media and shaking hands with the leader of the Chinese community.

- Amplify the voices, stories and images of local people who have experienced the new coronavirus (COVID-19) and have recovered or who have supported a loved one through recovery to emphasize that most people do recover from COVID-19. Also, implementing a “hero” campaign honoring caretakers and healthcare workers who may be stigmatized. Community volunteers also play a great role in reducing stigma in communities.

- Make sure you portray different ethnic groups. All materials should show diverse communities being impacted and working together to prevent the spread of COVID-19. Ensure that typeface, symbols and formats are neutral and don’t suggest any particular group.

- Ethical journalism: Journalistic reporting which overly focuses on individual behavior and patients’ responsibility for having and “spreading COVID-19” can increase the stigma of people who may have the disease. Some media outlets have, for example, focused on speculating on the source of COVID-19, trying to identify “patient zero” in each country. Emphasizing efforts to find a vaccine and treatment can increase fear and give the impression that we are powerless to halt infections now. Instead, promote content around basic infection prevention practices, symptoms of COVID-19 and when to seek health care.
COMMUNICATION TIPS and MESSAGES

Facts, not fear, will stop the spread of novel coronavirus (COVID-19).

- Share facts and accurate information about the disease.
- Challenge myths and stereotypes.
- Choose words carefully.
- The way we communicate can affect the attitudes of others (see DO’s and DON’Ts above).