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I. Plan Authorization

A public health emergency exists with the emergence of a serious illness that threatens to overwhelm public and private health systems. The initial response to the health and safety consequences of a public health emergency will generally occur at the Ohio University level with close monitoring and assistance from the Local Health Department and the Ohio Department of Health.

This plan should be exercised on a periodic basis to ensure its practicality and completeness. This plan is written to respond to a public health emergency.

The goals of this plan are to:

1. Ensure that Ohio University conducts an ongoing public health emergency planning process.
2. Build collaborative networks between the public health and health service systems of Ohio University and the surrounding community or communities.
3. Define relationships, responsibilities and communication between Ohio University and public health and safety organizations at the local, state, and regional levels.
4. Assure that appropriate authorities are in place and understood for an emergency.
5. Obtain the necessary support and resources, in advance of an emergency, from the Local Health Department and Ohio Board of Health, Ohio University administration, faculty, staff, and students and other community partners.
6. Focus on actions most crucial to an effective public health emergency response as it affects or is affected by Ohio University. At a minimum these actions include the following:
   a. Devise and articulate a concept of operations (i.e., the command structure and lines of authority and communication for managing activities during an emergency);
   b. Develop policies and procedures for distributing and monitoring vaccines or pharmaceuticals (if necessary);
   c. Develop a communications plan for effective interactions with the media, the medical community, students, faculty, staff and the general public.
   d. Develop contingency plans designed to ensure the maintenance of essential services including:
      i. To provide adequate medical care when primary delivery systems are disrupted.
      ii. To devise strategies for protecting key functions related to Ohio University’s teaching, research, and service missions.
      iii. To assess the readiness of resources (people, facilities, capital) likely to be mobilized by Ohio University or external agencies in the event of a public health emergency.
   e. Develop infectious disease prevention and mitigation strategies, including:
      i. Contingency plans for increasing or maintaining personnel delivering essential services or performing essential functions.
      ii. Contingency plans, developed in conjunction with the appropriate authorities, for closing campus facilities, suspending academic classes and canceling or postponing University events.
7. This plan will be incorporated into the Ohio University Emergency Operations Plan. The plan has been designed to work in concert with Ohio University’s Critical Incident Management strategy.
which incorporates an “All Hazards” approach. Effort was made to maintain consistency with existing authorities, planning assumptions, systems, procedures, and organizational structures. Interface with other levels of government is also addressed.

II. Executive Summary

The Ohio University Public Health Emergency Response Plan (hereinafter “plan”) is a guide for Ohio University to use when preparing for and subsequently responding to a public health emergency. This plan is designed to supplement the Ohio University Emergency Operations Plan. The primary purpose of this plan is to create a self-contained manual with the relevant information necessary to reduce the impact of interruptions caused by a public health emergency in order to protect the life, health, integrity, and welfare of the Ohio University community members, their families, and the community at large.

Public health emergencies could affect Ohio University differently than a natural disaster or terrorist activity. During a public health emergency, most buildings and physical structures would remain intact provided that they continue to receive maintenance. However, personnel absences due to personal illness, perceived illness or caretaker responsibilities would limit the ability of Ohio University to continue providing full, regular services. Therefore, this plan adopts the concept that during a public health emergency Ohio University may reduce services to “essential” services. Essential services are defined as those services necessary to protect the health and safety of University community members and avoid significant damage to University property. The plan was prepared with attention to Ohio University’s academic and research missions.

The plan is composed of four Sections: Plan Structure, Development, Coordination, and Evaluation (Section A); Public Health: Surveillance, Epidemiology and Disease Control (Section B); Communications (Section C); Continuity of Operations (Section D).

Sensitive information such as locations of strategic items or other potential security concerns are not contained within this plan. Personnel requiring access to sensitive information not contained within this plan should follow existing protocol or contact their supervisor.

The plan highlights the requirement that University actions align with other organizations at the local, state, and national levels that are similarly committed to assuring health and safety of the public.

III. Basic Plan

PRINCIPLES UPON WHICH THE PLAN IS BASED

1. The Ohio University Public Health Emergency Response Plan is an Annex to Ohio University’s Critical Incident Response Team Manual and maintained by the Ohio University Emergency Programs Manager in the Department of Risk Management and Safety.

2. A public health emergency such as an influenza pandemic represents a low to moderate probability of occurring. However, an influenza pandemic would be a high-consequence event. This makes planning more challenging than for more conventional threats that, by comparison, are higher probability but lower consequence.

3. Public health emergency planning activities represent a subset of broader all-hazards emergency planning. Many of the activities to maximize public health preparedness and response will also enhance capabilities for other threats including but not limited to natural disasters, errors from human mistakes and intentional terrorist acts.

4. Coordinated public health emergency planning must occur across Ohio University in:
   a. Central Administration
   b. Student Health Center
c. All University Colleges

d. All University departments, units and offices essential to protect the health and security of persons and University structures

5. The plan utilizes an organizational framework compatible with the National Incident Management System (NIMS).

6. The plan utilizes a phased approach to disease emergence referencing models developed by the World Health Organization (WHO), Department of Homeland Security (DHS), Centers for Disease Control and Prevention (CDC) and Department of Health and Human Services (DHHS).

7. The plan will be coordinated with State and Local Public Health and Emergency Management officials and their existing agency.

8. Ohio University will have a plan for continuity of operations.

9. An information plan is necessary to educate students, faculty, staff, and their families about:
   a. Individual responsibility to limit the spread of infection if they or their family members become ill.
   b. Non-pharmaceutical measures to limit infection, including social distancing.
   c. Preparedness planning at Ohio University, county, state, and federal levels.

ASSUMPTIONS: PUBLIC HEALTH EMERGENCY

1. A public health emergency, including but not limited to a virus with pandemic potential, anywhere represents a risk to populations everywhere.

2. A public health emergency may not follow traditional patterns.

3. The first wave of a public health emergency could have the greatest health consequences.

4. Ohio University may be expected to provide health care services needed by its students, faculty and staff during a pandemic.

5. During a public health emergency, individuals may seek health care services closest to their residence.

6. University resources may be considered community and state assets in responding to a public health emergency.

7. Vaccines may not be available for the first six months following specific identification of a public health emergency.

8. Health care workers and other essential service providers may anticipate an infection rate similar to the general population.

9. Absenteeism may reach as high as 40% due to personal illness, family caretaking responsibilities or voluntary absenteeism due to concerns of the public health emergency.

10. Utilization of limited University health care resources may be subject to a priority needs protocol set by state or federal authorities.

11. International and domestic travel may be restricted.

12. Social distancing strategies including the imposition of quarantine and isolation may be necessary.

13. Quarantine and isolation strategies will most likely be voluntary and require serious community efforts to be effective.
14. Personal protective equipment may need to be available on a wide basis, especially for those exposed to greater health risks than the general public. Personal protective equipment may be in short supply during a public health emergency and subject to priority needs protocols.

15. Internal and external communications will need to be intensified, coordinated and rapid.

16. Decisions may need to be made rapidly using limited or incomplete information.

17. Services providing for fundamental human needs may be in short supply.

18. During each wave of contagion, there may be significant economic disruption, including inventory shortages, shipment delays, and reduced business activities.

19. There may be widespread circulation of conflicting information, misinformation, and rumors, highlighting the need for coordinated communications.

20. Faculty and staff may remain on campus and available for work unless authorities close Ohio University or impose quarantine measures.

21. Professional and graduate students may remain on campus or in the immediate community and will want to continue to work toward their degrees.

22. Undergraduate students may leave campus to return to their families.

23. Contagious employees may come to work, both asymptomatic and symptomatic, who feel compelled to work. This risk may be minimized through protocols put into place addressing the public health emergency.

24. Closure of the campus or suspension of classes may occur through a variety of ways including a joint decision involving Ohio University, Ohio Department of Health and the County Health Department; unilateral order from the Governor of Ohio or from a public health agency or from the Ohio Board of Regents.

25. Demand from faculty and staff for medical treatment and advice may increase.

26. All public information will be coordinated and disseminated by University Communications and Marketing as a part of the Critical Incident Response Team.

IV. CONCEPT OF OPERATIONS

The protection of the health and welfare of the Ohio University community will be managed by Ohio University. The local Health Department, the Ohio Department of Health (ODH), and other agencies when appropriate, as well as the Centers for Disease Control and Prevention (CDC), will provide technical assistance when requested or in cases where emergency needs exceed the capability of University response resources. In extreme circumstances, such as the incapacitation of Ohio University officials, the state may assume direction and control responsibilities within the campus.

In a very large public health emergency, many or all communities will be affected and the state may not be able to meet all requests for assistance. Under these circumstances the state will use available mechanisms, including the National Response Framework, for obtaining resources and other assistance from the federal government.

With assistance from county, state, and federal agencies, Ohio University will be responsible for:

1. Management of epidemiologic surveillance and response activities, including contact tracing and the selection and implementation of disease control and prevention measures, such as vaccine/pharmaceutical administration for prophylactic or treatment purposes.

2. Communication of information to students, staff and faculty regarding prevention and control measures and the local effects of a disease.
V. Organization and Responsibilities

Ohio University will perform the following functions:

1. Establish methods for notification;
2. develop and maintain this plan in collaboration with other agencies;
3. identify resources (personnel, supplies, reference materials) to carry out an emergency vaccination or medication dispensing/administration (“triaging”) clinic (if needed);
4. obtain information from neighboring jurisdictions, as needed to develop and maintain this plan;
5. coordinate emergency exercises to test this plan as needed; and
6. conduct or otherwise arrange to provide emergency related training as needed.

Programs and offices with responsibilities under this plan will develop and maintain procedures for implementing this plan. ACHD and ODH will provide assistance to Ohio University as provided for in state statute and the Ohio Emergency Response Plan.

VI. Plan Review and Maintenance

This plan will be reviewed and updated as necessary such as after an exercise or an actual public health emergency, but not less than biennially. The Ohio University Emergency Programs Manager is identified to receive edits and updates for any materials within this plan.

Those items that should be reviewed include, but are not limited to:

1. Community notification and alerting lists, including contact information for personnel who perform essential functions.
2. Inventories and/or identified sources of critical equipment, supplies and other resources.
3. Facility and community-specific functions and procedures.

The following apply to the review and maintenance of this plan.

1. It is the responsibility of the Assistant Vice President, Risk Management and Safety to coordinate the review and maintenance of this plan supported by University officials, departments, facilities, and others who have a role in emergency response under the plan.
2. The plan must be reviewed on a biennial basis or as necessary.
3. Departments, agencies and facilities that maintain sections and/or procedures that are a part of this plan should review the portions of the plan pertaining to their function on a regular basis.
SECTION A

PLAN STRUCTURE, DEVELOPMENT, COORDINATION AND EVALUATION

I. Purpose

The purpose of the Ohio University Public Health Emergency Response Plan is to provide effective and unified response during a public health emergency.

II. Situation

All Ohio counties are required to develop and maintain all hazard emergency response plans to cope with major disasters such as tornadoes, floods, airplane crashes, and hazardous materials releases. These plans address many aspects including command and control functions, descriptions and operation of emergency communication systems, public health and medical care resources, and other key response elements. However, public health emergency planning requires the consideration of factors not normally addressed in all hazard emergency response plans.

One difference between public health emergencies and natural disasters is the potential for widespread adverse effects on human health but negligible effects on physical infrastructure. Catastrophic health effects caused by a public health emergency may disrupt critical human infrastructure. A second difference is that a public health emergency is not focused on a geographically discrete “incident scene.”

III. RESPONSE PARTNERS NEEDED TO IMPLEMENT THIS PLAN

In order to effectively implement Ohio University’s Public Health Emergency Response Plan, partners from both Ohio University and the community are essential in providing expertise to assist in addressing the types of response required for each situation. These partners include:

1. Numerous Ohio University offices and/or individuals
2. Various community officials
3. Community health care providers

IV. ROLES AND RESPONSIBILITIES

A. Role of Ohio University

Ohio University is ultimately responsible for protecting the health and safety of Ohio University’s staff, faculty, students, and visitors during an emergency. Specific responsibilities as applied to a public health emergency may include:

1. Being prepared to potentially answer the following questions during an emergency:
   a. Who is the Incident Commander for Ohio University?
   b. Who is the Ohio University Public Information Officer?
   c. Who is populating Ohio University’s NIMS chart (CIRT)?
   d. What is the overall situation (e.g., areas affected, number of people affected)?
   e. Does Ohio University have enough resources to respond to the incident? If not, who has these resources and how will they be obtained?
2. Considering the need for a local emergency declaration in consultation with the County/City Public Health Director and the County Emergency Management Director.

3. Obtaining copies of all press releases and summaries of all statements provided to the media in live or taped broadcasts.

4. Participating in press conferences, in collaboration with state or local officials.

B. Internal and External Initial Notifications
The threat or actual occurrence of an emergency requires prompt notification of those individuals and agencies that may play a role in effecting a response.

C. Use of an Incident Command System
During a public health emergency of any size, direction, control, and coordination of all aspects of the response is a major determinant of success and becomes essential when the response includes multiple jurisdictions and/or agencies. The National Incident Management System (NIMS) is a widely used and accepted incident command system that is appropriate for use during a public health emergency. A basic premise of NIMS is that agencies with jurisdictional responsibilities and authority at an incident will contribute to the process of:

1. Determining response strategies;
2. Selecting response objectives;
3. Jointly planning tactical activities and their application;
4. Ensuring integrated planning and application of operational requirements, including emergency measures and vaccine management/pharmaceutical dispensing;
5. Ensuring that span of control remains within acceptable limits;
6. Maximizing effectiveness of available resources and tracking their use throughout the incident period; and
7. Ensuring dissemination of accurate and consistent information.
8. The incident command organizational structure for Ohio University, following a NIMS framework, is found in University Policy 44.100, Critical Incidents.

D. Responsible University Authority
The President of Ohio University, in conjunction with the Executive Vice President and Provost and the Vice President for Finance and Administration, are the lead authority for Ohio University’s preparation, response and recovery from a public health emergency.

E. Responsible Local Agency
The local Health Department is the lead local agency for responding to a public health emergency. The director of ACHD, or a designee, is responsible for the development and implementation of the county plan.

F. Responsible State Agency
The Ohio Department of Health (ODH) is the lead state agency for response to a public health emergency. ODH will disseminate information concerning an emergency to county public health departments, including information on prevention and control.
SECTION B
PUBLIC HEALTH: SURVEILLANCE, EPIDEMIOLOGY AND DISEASE CONTROL

Ohio University has established practices related to public health events which will continue in the event of a public health emergency. Disease control measures must be consistent and in conjunction with county, state, and national policy. Established disease control measures will be followed until appropriate adjustments are needed to address an evolving public health emergency. New measures will be implemented as identified by federal, state, and county policy development.

This is not a comprehensive plan. As a public health emergency unfolds and as circumstances warrant, responses may vary. Official guidance will be taken from the Ohio Department of Health. Individual departments listed in this general plan need to make appropriate assessments of services they provide to Ohio University and have procedures in-place to insure that those services continue during a public health emergency.

I. Ohio University Public Health Emergency Response Plan

Response Levels (for purposes of this plan):

Level 1 – Initial notification that a potential public health emergency exists – highly localized event. Small cluster(s) with limited human-to-human spread

Level 2 – Substantial public health risk - Larger cluster(s) but human-to-human spread still localized, suggesting that the virus is becoming increasingly better adapted to but may not yet be fully transmissible

Level 3 – Public health emergency: increased and sustained transmission to the general public
<table>
<thead>
<tr>
<th>University Executive Staff</th>
<th>Level 1</th>
<th>Level 2 (in addition to Level 1 actions)</th>
<th>Level 3 (in addition to Level 2 actions)</th>
</tr>
</thead>
<tbody>
<tr>
<td>▪ Assess conditions and discuss internally</td>
<td>▪ Identify operational plans for University</td>
<td>▪ Initiate operations plan for University</td>
<td></td>
</tr>
<tr>
<td>▪ Communicate with CIRT</td>
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</tbody>
</table>

| CIRT | | |
| ▪ Monitor situation | ▪ Consider (University wide) essential personnel for PPE per National Standards- if applicable | ▪ Activate Emergency Operations Center |
| ▪ Communicate with University Executive Staff | ▪ Identify essential and non-essential personnel in conjunction with Human Resources (may change with each level) | ▪ Advise Executive Staff of recommended temporary closure of building(s) and suspension of student and academic activities |
| ▪ Prepare for National suggestions of Personal Protective Equipment (PPE)- if applicable | ▪ Communicate w/ Local Health Department regarding planning and surveillance | ▪ Identify essential personnel and services |
| ▪ Communicate w/ Local Health Department regarding planning and surveillance | ▪ Communicate with Student Health Services | |
| ▪ Monitor national response/surveillance | ▪ Monitor national response/surveillance | |
| ▪ Establish communication w/ Deans regarding status of preparedness | ▪ Establish communication w/ Deans regarding status of preparedness | |
| ▪ Update emergency action plan as situation evolves | ▪ Update emergency action plan as situation evolves | |
| ▪ Issue communication(s) to campus community regarding status public health emergency, self-protection and University response | ▪ Issue communication(s) to campus community regarding status public health emergency, self-protection and University response | |
| ▪ Develop internal and external communications plan | ▪ Develop internal and external communications plan | |

| Risk Management | | |
| ▪ Identify risk exposures for which insurance can and cannot be obtained including associated financial impact. | ▪ Communicate with insurance carriers on evolving campus issues. | ▪ Assess actual risk/insurance claim issues. |
| ▪ Identify steps that must be taken to monitor and protect insurance coverage. | ▪ Communicate with Vice Provost of Global Affairs | |
| ▪ Benchmark risk management response and insurance coverage options with peer universities. | | |

| Student Health Services | | |
| ▪ Implement normal universal precautions | ▪ Track locations of persons who have same illness | ▪ Develop plans to treat patients, maintain isolation as much as possible-if applicable |
SECTION C
COMMUNICATIONS

Public health emergency response strategies related to communications are based on the following assumptions:

1. Ohio University’s Critical Incident Response Team provides the framework of the communications plan.
2. University Communications and Marketing serves as the authorized spokesperson for Ohio University. All public information regarding any campus response to a public health emergency will be coordinated and disseminated by University Communications and Marketing staff with assistance from other University departments and/or personnel.
3. Effective communications are a critical element within all aspects of the Public Health Emergency Response Plan. As such, the audiences for communications are varied and diverse. These audiences include University faculty, staff and students; parents of students; local media; local communities; Ohio Board of Regents and other state officials; other higher education institutions in Ohio; and the general public.

I. INTERNAL COMMUNICATIONS

In the event a public health emergency is declared by Ohio University administration, critical information will be disseminated to the campus and concerned constituencies as quickly as possible using one or all of the following methods:

1. Ohio University's homepage
2. Your campus email (@ohio.edu accounts)
3. Text Messages
4. Ohio University Facebook and Twitter accounts
5. Campus televisions connected to CATVision
6. Alert notices to centrally scheduled classroom computers
7. Outdoor emergency notification system
8. Recorded message on 740-597-1800
9. Non-tech methods (on-the-ground- teams, bullhorns, posted alerts, etc.)

II. COMMUNITY

External communications will be coordinated by University Communications and Marketing with the Local Health Department and other appropriate response organizations.
SECTION D
CONTINUITY OF OPERATIONS

I. General Assumptions

A. Ohio University’s CIRT, following the National Incident Management System, will respond to and manage public health emergency concerns.

B. The CIRT will be activated to plan how best to inform and educate the Ohio University community and provide available resources to mitigate the impact on Ohio University.

C. If a confirmed public health emergency is reported in the U.S., it is assumed that federal and state officials will respond quickly to isolate and control it. However, this plan assumes those attempts may fail and the state of Ohio and Ohio University will be affected.

D. University Student Health Services will experience increased demand from faculty, staff, and students for medical treatment and advice. Many faculty and staff may turn to their local providers. Some students may do the same; however, for many students the provider is a doctor in their home town, not in Athens, and the need for immediate attention and fear of the public health emergency will likely increase student demand locally.

E. The majority of faculty and staff may remain on campus and available for work, unless authorities close Ohio University or mandate quarantine.

F. The majority of undergraduate students may leave campus as soon as they and their families learn of incidences of a public health emergency at Ohio University, although international students are likely to remain.

G. Assumption “F” will lead to a need for a decision from the CIRT regarding recommendations for the suspension of classes, as well as public events (e.g., performances, athletic events) and other non-essential functions.

H. The majority of professional and graduate students will remain on campus and will be interested in continuing to work toward their degrees.

I. Faculty and staff will wish to remain in pay status during any time away from the workplace.

J. Ohio University may be considered a “community asset” and a “state asset” in responding to a public health emergency.

II. Essential Functions and Lines of Succession

Because of the potential for high absenteeism in the event of a public health emergency, continuity of operations requires identifying:

A. Essential functions throughout Ohio University;

B. lines of succession detailing who is responsible for the functions and who will carry them out if the responsible individual is absent; and

C. resources required to carry out those functions.

"Essential functions" are those functions that must be carried out, irrespective of whether classes are suspended and a large proportion of personnel are unable to work. These functions must be carried out to avoid endangering
the health, wellbeing, or safety of people or animals relying on Ohio University or to prevent irreparable damage to University property.

The essential functions of Ohio University involve public safety, information technology, human resources, key facilities, and decisions by the Executive Staff. Consequently, certain organizational units are critical to Ohio University's continuity of operations under a suspension of non-essential functions. These may include but are not limited to: Campus Safety (Ohio University Police Department), Information Technology (Office of Information Technology), University Human Resources (UHR), Facilities Management, University Res Housing, University Culinary Services and the Office of the Executive Vice President and Provost.

To maintain services to the University community all units are encouraged to develop a Business Continuity Plan. The University provides a program to assist with Business Continuity Planning. Contact the Emergency Programs Manager for assistance in developing continuity of operations plans.