

# Pandemic Response Plan

PIHMA Acupuncture College and Clinic

## Introduction

The plan is predicated on the assumption that in the event of a pandemic entering the United States, the campus may need to suspend academic programs and most operations for weeks or months. In addition to student illness, experts predict that in the event of a pandemic, 20-40% of employees will be unable to come to work. (source: [www.pandemicflu.gov](http://www.pandemicflu.gov))

PIHMA's response plan strategies are intended to limit, as much as possible, the number of people who get sick and to slow the spread, prepare the institution to care for large numbers of people who get sick and minimize disruption to PIHMA operations.

The plan is largely informed by the following sources: the World Health Organization web site, the CDC's Colleges and Universities Pandemic Influenza Planning Checklist, ACHA's Guidelines for Pandemic Planning, and the U.S. Health and Human Services (HHS) Pandemic Flu Plan at <http://www.hhs.gov/pandemicflu/plan/>.

## Assumptions

The Pandemic Response Plan was developed with the following assumptions in mind:

- A pandemic event may cause quarantine of significant portions of the student base.
- Regular business operations will be interfered.
- PIHMA will have the need to continue to offer academic instruction in a manner least disruptive to the student learning experience.
- PIHMA, having resources to assist in treatment of symptoms, may decide to continue clinical operations.
- Transportation interruptions and quarantine may impact employee ability to execute job functions on site.
- PIHMA has significant experience and already placed resources to help facilitate a bare bones operations.
- PIHMA will need to develop clear, preset plans that can quickly be executed and possibly remotely upon in the event of a Pandemic Event.

## Team Structure

A Pandemic Response Team has been established to plan a detailed response for the respective areas of its members. This team is for planning and response purposes. Institutional decisions including the suspension of classes or any college programs will be made by the President in consultation with her senior staff.

The Pandemic Response Team includes: Academic Dean, Associate Dean, Registrar, Student Services Coordinator, Clinic Director, Medicinary Manager, Administrative Director, Chief Institutional Development Officer, and the President.

#### General Responsibilities for Key Developmental Areas

##### *President*

The President will oversee development and implementation of the Pandemic Response Plan. The President will issue all directives concerning reduction in campus operations, and continuity of business operations. All releases to media outlets and regular communication channels will be approved by the President or her designees. Cabinet staff will develop communication “trees” for their respective areas. The President will also ensure that risk management advice is continuously reviewed and considered, will coordinate legal matters and will provide leadership to the efforts of internal teams and in coordinating with external partners.

##### *Academic Department*

The Academic Dean, in conjunction with the President and Chief Institutional Development Officer will monitor pandemic news and development, maintain regular and transparent communications with students and the community, and direct all efforts related to continuation of classes, clinical programs, and student learning. The Associate Dean and Registrar will monitor class absentee rates in the event of a perceived threat (prior to suspension of any classes). If the campus closes for less than two weeks, completion of the semester’s work should still be possible. For closures greater than two weeks, extension of the semester may be required. Alternative learning modalities will be considered and planned for implementation for each course, as appropriate.

The Associate Dean will ensure communications with faculty.

##### *Administrative Director*

The Administrative Director, in conjunction with the IT Committee and Accounting Department, will coordinate all vendor activity, continuation of financial business, paycheck distribution, and liability insurance matters. The AD and President will also ensure that Medicinary and Library operations continue to operate and follow prudent safety precautions in accordance with CDC recommendations. The AD will also liaise with Building Management to ensure necessary protocols to prevent the exposure and spread of disease, and respond to facility concerns.

##### *Institutional Development and Marketing*

Institutional Development will lead the development of the plan including necessary updates and will be responsible for developing and maintaining campus-wide communication by use of email, phones, the web site and other relevant channels. In the event of a higher level alert, campus mail will be curtailed to reduce the spread of germs on media. The web site will be used for continuous updates and mobile phone text messaging systems will be employed as necessary. A telephone hotline will be established

and maintained by the Administrative Director with an outgoing message containing relevant information and status updates.

### *Human Resources*

The Director for Human Resources will also direct the development of appropriate response plans in HR including the development of leave policies, management of staffing functions, continuation of payroll services in coordination with the Accounting Office, and maintenance of a ready list of all employees and their contact information.

### Areas of Development

1. Communication systems
  - a. Orchid
    - i. Leverage existing SMS capabilities within Orchid for Patient communications.
  - b. Orbund
    - i. Explore the possibilities of SMS capabilities
    - ii. Develop distribution lists for email communications to students
    - iii. Login screen notices
  - c. Outbound message on main phone line
    - i. Record outbound message for quick deployment
    - ii. Enable a system of call forwarding of critical lines to employee mobile devices
2. Alert Level
  - a. Develop system of levels to trigger specific events. Use chart with preset designated responses
    - i. Level 1 – Alert Period. No Current Hazard to Persons
    - ii. Level 2 – Classes remain in session with stepped up efforts to educate about infection control; Pandemic plan is activated and Pandemic Response Team meets regarding implementation. Travel may be suspended. Operations continue. Infection control efforts are stepped up.
    - iii. Level 3 – Continuation of classes will be managed on a day-to-day basis but suspension is likely and curtailment of all external operations will begin. Once classes are suspended, administrative, academic, and support operations will be reduced with the exception of pre-determined essential functions. All operations will cease with the exception of critical functions. Facilities will be secured to permit access by essential personnel only. Employees who must move about campus will be instructed in methods of infection control to limit the spread of germs. Usage of common bathroom/kitchen areas will be monitored to minimize exposure. Coordination with external agencies is begins.

- iv. Level 4 – The campus will close and only critical functions and essential personnel will persist – the list may be altered in the event PIHMA is declared a community-based facility
- 3. Identify, Develop and Implement Delivery systems for online coursework
  - a. Pre-recorded lectures
  - b. Add four additional Zoom accounts for offering lecture and discussion sessions virtually
  - c. Survey students and Faculty on technology to identify gaps (eg. Webcam, microphones, access to high speed internet)
  - d. Survey students and faculty to identify training gaps (eg. Software knowledge and usage)
  - e. Develop one page training (desk manual documents)
  - f. Create work flows for Academics department receiving and sending forms for various functions
  - g. Survey employees to determine tech and training needs to be able to perform work remotely
- 4. Accounting
  - a. AP and AR, how will this function
  - b. Payroll
  - c. Develop methodologies for President to digitally approve actions
  - d. Determine best methods to accomplish banking remotely (credit card only? Payment portals)
- 5. Clinical operations
  - a. Server implementation to enable Orchid functionality
  - b. How will we treat patients?
  - c. Develop best practices for interns and supervisors when providing patient care
  - d. Front Desk operations handled remotely?
  - e. Regular disinfection of treatment rooms, equipment, and critical supplies
- 6. Information Technology
  - a. Implementation of security cameras to monitor sites remotely
  - b. Setup all IT Committee members with remote access to troubleshoot problems.
- 7. Communications channels
  - a. Web
  - b. SMS
  - c. Outgoing messaging
- 8. Medicinary
  - a. Fully staffed vs. drop shipment?
  - b. Survey to identify technology and communication barriers
- 9. Human Resources
  - a. Develop leave policy for infected individuals
  - b. Time tracking and payroll systems

DEVELOP GRID FOR EACH DEPARTMENT ACTIVITIES BASED ON LEVEL ABOVE

## Planning Checklist

### Planning and Coordination

X Identify a pandemic coordinator and response team (including campus health services and mental health staff, student housing personnel, security, communications staff, physical plant staff, food services director, academic staff and student representatives) with defined roles and responsibilities for preparedness, response, and recovery planning.

X Delineate accountability and responsibility as well as resources for key stakeholders engaged in planning and executing specific components of the operational plan. Assure that the plan includes timelines, deliverables, and performance measures.

Incorporate into the pandemic plan scenarios that address college functioning based upon having various levels of illness in students and employees and different types of community containment interventions. Plan for different outbreak scenarios including variations in severity of illness, mode of transmission, and rates of infection in the community. Issues to consider include:

- cancellation of classes, sporting events and/or other public events;
- closure of campus, student housing, and/or public transportation;
- assessment of the suitability of student housing for quarantine of exposed and/or ill students (See [www.hhs.gov/pandemicflu/plan/sup8.html](http://www.hhs.gov/pandemicflu/plan/sup8.html)); contingency plans for students who depend on student housing and food services (e.g., international students or students who live too far away to travel home);
- contingency plans for maintaining research laboratories, particularly those using animals; and
- stockpiling non-perishable food and equipment that may be needed in the case of an influenza pandemic.
- identify legal authority, decision makers, trigger points, and thresholds to institute community containment measures such as closing (and re-opening) the college. Identify and review the college's legal responsibilities and authorities for executing infection control measures, including case identification, reporting information about ill students and employees, isolation, movement restriction, and provision of healthcare on campus.

Ensure that pandemic influenza planning is consistent with any existing college emergency operations plan, and is coordinated with the pandemic plan of the community and of the state higher education agency.

Work with the local health department to discuss an operational plan for surge capacity for healthcare and other mental health and social services to meet the needs of the college and community during and after a pandemic.

Establish an emergency communication plan and revise regularly. This plan should identify key contacts with local and state public health officials as well as the state's higher education officials (including back-ups) and the chain of communications, including alternate mechanisms.

### Planning and Coordination

Implement an exercise/drill to test your plan, and revise it regularly.

Participate in exercises of the community's pandemic plan.

Develop a recovery plan to deal with consequences of the pandemic (e.g., loss of students, loss of staff, financial and operational disruption).

### Continuity of Student Learning and Operations

Develop and disseminate alternative procedures to assure continuity of instruction (e.g., web-based distance instruction, telephone trees, mailed lessons and assignments, instruction via local radio or television stations) in the event of college closures.

Develop a continuity of operations plan for maintaining the essential operations of the college including payroll; ongoing communication with employees, students and families; security; maintenance; as well as housekeeping and food service for student housing.

### Infection Control Policies and Procedures

Implement infection control policies and procedures that help limit the spread of influenza on campus (e.g. promotion of hand hygiene, cough/sneeze etiquette). (See Infection Control [www.cdc.gov/flu/pandemic/healthprofessional.htm](http://www.cdc.gov/flu/pandemic/healthprofessional.htm)). Make good hygiene a habit now in order to help protect employees and students from many infectious diseases such as influenza. Encourage students and staff to get annual influenza vaccine ([www.cdc.gov/flu/protect/preventing.htm](http://www.cdc.gov/flu/protect/preventing.htm)).

Procure, store and provide sufficient and accessible infection prevention supplies (e.g., soap, alcohol-based hand hygiene products, tissues and receptacles for their disposal). Establish policies for employee and student sick leave absences unique to pandemic influenza (e.g., non-punitive, liberal leave).

Establish sick leave policies for employees and students suspected to be ill or who become ill on campus. Employees and students with known or suspected pandemic influenza should not remain on campus and should return only after their symptoms resolve and they are physically ready to return to campus.

Establish a pandemic plan for campus-based facilities that addresses issues unique to healthcare settings (See [www.cdc.gov/flu/pandemic/healthprofessional.htm](http://www.cdc.gov/flu/pandemic/healthprofessional.htm)). Ensure health services and clinics have identified critical supplies needed to support a surge in demand and take steps to have those supplies on hand.

Adopt CDC travel recommendations ([www.cdc.gov/travel/](http://www.cdc.gov/travel/)) during a pandemic and be able to support voluntary and mandatory movement restrictions. Recommendations may include restricting travel to and from affected domestic and international areas, recalling nonessential employees working in or near an affected area when an outbreak begins, and distributing health information to persons who are returning from affected areas.

### Communications Planning

Assess readiness to meet communications needs in preparation for an influenza pandemic, including regular review, testing, and updating of communications plans that link with public health authorities and other key stakeholders (See [www.hhs.gov/pandemicflu/plan/sup10.html](http://www.hhs.gov/pandemicflu/plan/sup10.html)).

Develop a dissemination plan for communication with employees, students, and families, including lead spokespersons and links to other communication networks. Ensure language, culture and reading level appropriateness in communications.

Develop and test platforms (e.g., hotlines, telephone trees, dedicated websites, local radio or television) for communicating college response and actions to employees, students, and families.

Assure the provision of redundant communication systems/channels that allow for the expedited transmission and receipt of information.

Advise employees and students where to find up-to-date and reliable pandemic information from federal, state and local public health sources.

Disseminate information about the college pandemic preparedness and response plan. This should include the potential impact of a pandemic on student housing closure, and the contingency plans for students who depend on student housing and campus food service, including how student safety will be maintained for those who remain in student housing.

Disseminate information from public health sources covering routine infection control (e.g., hand hygiene, coughing /sneezing etiquette), pandemic influenza fundamentals (e.g., signs and symptoms of influenza, modes of transmission), personal and family protection and response strategies (including the HHS Pandemic Influenza Planning Guide for Individuals and Families at [www.pandemicflu.gov/plan/tab3.html](http://www.pandemicflu.gov/plan/tab3.html)), and the at-home care of ill students or employees and their family members.

Anticipate and plan communications to address the potential fear and anxiety of employees, students and families that may result from rumors or misinformation.