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I. Policy

East Tennessee State University (ETSU) has developed this interim policy in response to the public health risks posed by Severe Acute Respiratory Syndrome ("SARS"). Although there are no known cases of SARS in the world at this time, public health officials feel that it could reemerge at any time. ETSU remains concerned about the health of every member of the university community. The university recognizes that the terms of this policy will create some hardship in individual cases, and further recognizes that it cannot eliminate every risk of potential exposure to this disease. Cooperation and compliance with this policy; however, is the university's best means of insuring that our campus remains a safe and healthy environment for everyone.

This policy is designated as an interim policy due to the dynamic nature of the available information on SARS. This policy may be revised on short notice as new information becomes available.

II. Background

Severe acute respiratory syndrome (SARS) is a newly recognized, severe febrile respiratory illness caused by a previously unknown coronavirus, SARS-associated coronavirus (SARS-CoV). SARS emerged in the southern Chinese province of Guangdong in November 2002, but the worldwide epidemic was triggered in late February 2003 when an ill physician from Guangdong infected several other guests at a hotel in Hong Kong. These persons subsequently became the index patients for large outbreaks of SARS in Hong Kong, Vietnam, Singapore, and Canada.

Recognition of this new microbial threat prompted the World Health Organization (WHO) to issue a historic global alert for SARS on March 12, 2003. WHO coordinated a rapid and intense worldwide response, which led to the identification of the etiologic agent, SARS-CoV, in less than 2 weeks and implementation of control measures that contained the worldwide outbreak within 4 months. On July 5, WHO announced that SARS had been controlled and ended the global public health emergency response. During the epidemic, a total of 8,427 probable SARS cases and 813 deaths were reported to WHO from 29 countries.

The official end of the global public health emergency affirmed the rapid and monumental response effort but also signaled the need for continued vigilance. The rapid spread of disease and the high levels of morbidity and mortality associated with SARS call for careful monitoring for the reappearance of SARS-CoV and preparations for the rapid implementation of appropriate control measures. Although the United States had only eight documented cases of SARS-CoV infection and no significant local spread, it is clear that we are susceptible to the types of outbreaks experienced in Hong Kong, Singapore, Taiwan, and Toronto.

In the absence of a vaccine, effective drugs, or natural immunity to SARS-CoV, the only currently available public health strategies to limit the impact of SARS are rapid identification of infected persons and activation of the control measures that have proven effective in preventing transmission in other locales. These measures include global and community surveillance, detection and isolation of cases, identification and monitoring of contacts, adherence to infection control precautions, and, in some instances, measures (e.g., quarantine) to restrict the movement of potentially infected persons. These are the traditional public health tools used to prevent the spread of any infectious disease, and they constitute the fundamental strategy for controlling SARS.

Procedures will be discussed for three possible SARS scenarios: 1) SARS activity worldwide, but only

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imported cases locally; 2) SARS activity locally with effective control measures; and 3) extensive local transmission with ineffective control measures. (With no SARS activity worldwide, the CDC recommends only surveillance of patients hospitalized with pneumonia and not of well travelers from previously SARS affected areas.)

III. Procedures for Students, Faculty, Staff, Visiting Scholars and Residents, and Family Members in Residents

A. Scenario 1 (SARS activity worldwide, but only imported cases locally)

1) Students

- a) Students traveling in or arriving from a SARS affected area must arrive in an area with no SARS activity at least 10 days before the start date for each semester's classes.
- b) Students who arrive on campus before they have been in an area with no SARS activity for at least 10 days must report immediately to the Student Health Clinic for initial SARS screening before they will be permitted to live in the university's temporary student housing or the residence halls. Students who can demonstrate hardship beyond their control regarding their ability to arrive in an area with no SARS activity at least 10 days before the start of classes and are symptom free will receive a conditional clearance to attend classes and live in the university's residence halls.
- c) Hardship may be demonstrated through evidence of factors such as the inability to obtain a necessary visa in time to arrive 10 days prior to the start of classes; previously purchased nonrefundable airline tickets; or convincing evidence that the student failed to receive notice of this requirement despite the university's best efforts to contact him or her regarding the requirements of this policy.
- d) The Student Health Clinic will determine, through an initial SARS screening, whether students falling within the hardship exception will receive a conditional clearance to attend classes and live in the university's residence halls. Students who receive such conditional clearance will be required to undergo twice daily monitoring by the Student Health Clinic staff for a period of 10 days (or the remainder of the 10-day period that began when they entered an area with no SARS activity). Whenever the Student Health Clinic is closed (holidays, weekends, and nights), students undergoing monitoring will be required to monitor and record his/her temperature twice daily and monitor for symptoms of SARS. The recorded temperatures will be turned in to the Student Health Clinic at the next visit to the Student Health Clinic during the monitoring process.
- e) Students who have been monitored twice daily for the applicable period and remain symptom free at the end of that period will receive complete clearance from the Student Health Clinic.
- f) Students who can demonstrate through a stamped passport, visa, airline ticket, or other document, that they arrived in an area with no SARS activity at least 10 days before the start of classes may go to the Student Health Clinic at the university after the tenth day and, provided they have remained symptom free, receive a complete clearance to attend classes.
- g) Students who chose to travel in a SARS affected area during the term of a semester must be prepared to remain away from campus, including classes, for at least 10 days after their return to an area with no SARS activity. These students will be individually responsible for making arrangements with their individual instructors to address issues of missed classes, assignments,

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and/or exams that may occur during this 10-day period. Students who can demonstrate through a stamped passport, visa, airline ticket, or other document, that they have been in an area with no SARS activity at least 10 days after their travel in a SARS affected area may go to the Student Health Clinic at the university after the tenth day and, provided they have remained symptom free, receive a complete clearance to attend classes.

- h) Students who fail to report that they have traveled in or arrived from a SARS affected area and/or fail to cooperate with the monitoring process will be subject to interim suspension from the university and its residence halls pursuant to the Student Code of Conduct until such time as they are in compliance with this policy, in addition to any other disciplinary action that may be imposed in conformance with the code.
- i) Persons living in student housing who have arrived from SARS affected areas within the last 10 days and are being monitored for symptoms may require special housing arrangements. Persons who are in quarantine (well contacts of SARS cases) or isolation (ill persons with suspect or probable SARS) who live in student housing will require special housing arrangements.

2) Faculty and Staff

The university may not support student, faculty or staff travel to SARS affected areas; however, the university recognizes that some faculty members have grant funds underwriting such travel, and that other employees may choose to travel in such areas on their own.

3) Faculty and/or Visiting Scholars

- a) Faculty and visiting scholars who travel in or arrive from SARS affected areas are expected to arrive in an area with no SARS activity at least 10 days before beginning or resuming duties. Faculty and/or visiting scholars who are not authorized to telecommute or otherwise work from their home will be required to take sick leave, or leave without pay if no sick leave is available, until the 10-day period has expired and the faculty member has received written clearance from a healthcare provider.
- b) Faculty and/or visiting scholars who can demonstrate through a stamped passport, visa, airline ticket, or other document that they arrived in an area with no SARS activity at least 10 days prior to beginning or resuming duties must go to a healthcare provider after the tenth day and, provided they have remained symptom free, receive a complete clearance in writing to assume duties.
- c) Failure to arrive in an area with no SARS activity at least 10 days before beginning or resuming duties will render a faculty member and/or visiting scholar ineligible to perform any responsibilities on campus. If the university must cover the on-campus responsibilities of the faculty member and/or visiting scholar during this period, the faculty member will be required to take sick leave until the ten-day period has expired and the faculty member has received written clearance from a healthcare provider.
- d) Faculty and/or visiting scholars who can demonstrate hardship beyond their control regarding their ability to arrive in an area with no SARS activity at least 10 days before engaging in on-campus activities, will report to a healthcare provider before their arrival on campus. Hardship may be demonstrated through evidence of factors such as the inability to obtain a necessary visa in time to arrive 10 days prior; previously purchased nonrefundable airline tickets; or convincing evidence that the staff member failed to receive adequate notice of this requirement

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despite the university's best efforts. Symptom-free staff members must arrange twice daily temperature monitoring activities until completing 10-day clearance, regarding their ability to arrive in an area with no SARS activity. Ten day clearance documentation will be confirmed by a healthcare provider before beginning or resuming employment duties on campus. Hardship exception and conditional clearance to begin or resume duties on campus must be approved by human resources.

- e) Deliberate failure to comply with this policy may subject the faculty member and/or visiting scholar to employment discipline.

4) Staff

- a) Staff members, including student workers and temporary employees, who travel in or arrive from SARS affected areas, must arrive in an area with no SARS activity at least 10 days before performing any employment duties on campus. Staff members who are not authorized to telecommute or otherwise work from their home will be required to take sick leave, or leave without pay if no sick leave is available, until the 10-day period has expired and the staff member has received written clearance from a healthcare provider.
- b) Newly hired staff members who have traveled in or arrived from a SARS affected area will not be permitted to begin working on campus until the ten-day period has expired.
- c) Staff members must go to a healthcare provider after the tenth day and, provided they have remained symptom free, receive a complete clearance in writing to begin or resume employment duties on campus. Staff members must be able to demonstrate through a stamped passport, visa, airline ticket, or other document, that they arrived in an area with no SARS activity at least 10 days prior requesting complete clearance in writing from a healthcare provider.
- d) Staff members who can demonstrate hardship beyond their control regarding their ability to arrive in an area with no SARS activity at least 10 days before engaging in on-campus activities, will report to a healthcare provider before their arrival on campus. Hardship may be demonstrated through evidence of factors such as the inability to obtain a necessary visa in time to arrive 10 days prior; previously purchased nonrefundable airline tickets; or convincing evidence that the staff member failed to receive adequate notice of this requirement despite the university's best efforts. Symptom-free staff members must arrange twice daily temperature monitoring activities until completing 10-day clearance, regarding their ability to arrive in an area with no SARS activity. Ten day clearance documentation will be confirmed by a healthcare provider before beginning or resuming employment duties on campus. Hardship exception and conditional clearance to begin or resume duties on campus must be approved by human resources.
- e) Deliberate failure to comply with this policy may subject the staff member to employment discipline.

5) Visiting Residents and Family Members in Residency

- a) Individuals traveling in or arriving from a SARS affected area who arrive to stay in campus facilities before they have been in an area with no SARS activity for at least 10 days must report to the Student Health Clinic for initial SARS screening before they will be permitted to live in the university's temporary student housing or the residence halls.
- b) Individuals who can demonstrate through a stamped passport, visa, airline ticket, or other

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document, that they arrived in an area with no SARS activity at least 10 days prior to coming to campus facilities may go to the Student Health Clinic at the university after the tenth day and, provided they have remained symptom free, receive a complete clearance.

- c) Individuals who can demonstrate hardship beyond their control regarding their ability to arrive in an area with no SARS activity at least 10 days before staying in campus facilities will be required to report immediately to the Student Health Clinic upon their arrival on campus. Hardship may be demonstrated through evidence of factors such as the inability to obtain a necessary visa in time to arrive 10 days prior; previously purchased nonrefundable airline tickets; or convincing evidence that the individual failed to receive notice of this requirement despite the university's best efforts.
- d) The Student Health Clinic will determine, through an initial SARS screening, whether individuals falling within the hardship exception will receive a conditional clearance to attend classes and live in the university's residence halls. Individuals who receive such conditional clearance will be required to undergo twice daily monitoring by the Student Health Clinic staff for a period of 10 days (or the remainder of the 10-day period that began when they entered an area with no SARS activity). Whenever the Student Health Clinic is closed (holidays, weekends, and nights), students undergoing monitoring will be required to monitor and record his/her temperature twice daily and monitor for symptoms of SARS. The recorded temperatures will be turned in to the Student Health Clinic at the next visit to the Student Health Clinic during the monitoring process.

B. Scenario 2 (SARS activity locally with effective control measures)

If SARS activity in the community is limited to certain institutions and public health officials are not advocating community-wide control measures, then the above procedures would apply also to persons who have been in areas in the community with SARS transmission (as designated by public health officials). In this scenario it would be likely that large numbers of students who are being monitored for symptoms, who are in quarantine, or who are in isolation, would require alternative housing arrangements.

Other activities might include:

- Providing information and education about SARS and how to prevent spread
- Promoting “respiratory hygiene” (wearing a surgical mask if you have fever and cough) and handwashing.

C. Scenario 3 (extensive local transmission with ineffective control measures or transmission on campus)

If SARS activity in the community is extensive or if ETSU is affected, additional measures to those mentioned above might include:

- Suspension of classes and gatherings
- Sending all nonessential personnel home or away until outbreak is controlled
- Temperature monitoring in public places
- Recommended or mandatory mask use
- Closing of public buildings and spaces

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- Cancellation of events
- Closing non-essential university operations
- Closing of school
- Restricting movement on or off campus

IV. Conformance with CDC and WHO Guidelines

In addition to the procedures outlined in the policy, the university, at a minimum, will act in conformance with the guidelines of both the Centers for Disease Control and Prevention ("CDC") and the World Health Organization ("WHO") regarding travel in and arrivals from SARS affected areas as they are issued and updated. Information regarding these guidelines may be accessed at the following locations on the Internet:

<http://www.cdc.gov/ncidod/sars/>

<http://www.who.int/csr/sars/>

Both the CDC and WHO guidelines may change as the global situation regarding SARS changes; therefore, all students, faculty and staff contemplating travel to or from SARS affected areas should check these guidelines frequently since the university will comply with the recommendations of these organizations as they are issued and updated.

Source: Approved by Senior Staff, January 14, 2004