RETURN TO CAMPUS OPERATIONAL PLAN – CLINIC

Phase IV – Closed Campus

Intent: On-campus operations restricted to critical functions only and preparation for Phase III.

Personnel Status: During closed-campus operations, all team members are working remotely with an approved Remote Work Agreement with exception of those positions designated as essential core* and those approved for non-work pandemic leave.

- Vulnerable individuals** should shelter in place or request special accommodation to ensure safety at work.
- All team members (faculty, staff, and students) must wear protective face coverings when on campus with the exception of eating and drinking which should be done privately.
- All team members should avoid gathering in groups of more than 10 people in circumstances that do not readily allow for appropriate social distancing (greater than 6 feet).

Campus Operations

General Operations

- Cancel all travel and events.
- Critical hiring is approved by a hiring review approval committee
- Conduct all operations remotely, except for minimum essential workforce, as approved by the President, required for:
  - Operation of critical clinics as determined by respective Vice President (VP) and Deans
  - Operation of Animal Resource Centers
  - Maintenance of buildings and equipment
  - Police department and security guards
  - Other university-specific positions.

Clinical Operations

- Noncritical and routine clinical care to be conducted via telehealth visits when appropriate, as determined by the Department Chair and Dean
- Only the patient is allowed to attend in-person clinical appointments, unless (s)he is a minor or an individual with assistance needs in which case they can be accompanied by one adult caregiver.
- Patients and accompanying caregivers will be screened upon entry to TTUHSC clinic buildings. Appropriate screening methods will be determined by the Office of Occupational Health.
• All patients and accompanying caregivers must wear protective face coverings when on campus.

*Essential core functions, including:

• Security
  o Police department
  o Dispatch
• Environmental health and safety
• Food services
• Marketing and Communications
  o VP, Chief Information Officer
• Managing Director of Employee Assistance Program
• Direct patient care providers
• Clinical department chairs
• Facilities, operations
• Budget accounting (emergency purchasing and processing authority)
• Human Resources (selected staff)
• Payroll and tax services
• President’s executive leadership

**Current federal guidelines define vulnerable individuals as those with serious underlying health conditions, including high blood pressure, chronic lung disease, diabetes, obesity (BMI>40), moderate to severe asthma, and those whose immune system is compromised such as by cancer treatment, organ transplantation and prolonged steroid use.

Phase III – Restricted Operations

Intent: Continue operations with limited on-campus presence and preparation for Phase II. We will move to Phase II based on specific conditions in each operational function.

Personnel Status: During restricted operations, team members identified in Phase IV as essential core are on duty “working remotely” or “working on campus.” Non-mission critical individuals may be on campus if approved by their respective Dean or VP.

• Vulnerable individuals (as defined by current federal guidelines) should continue to shelter in place or request special accommodation to ensure their safety at work.
• Continue Remote Work Agreements and Non-Work Pandemic Leave procedures.
• Team members who cannot work from home will return to work on campus. Remote work agreements will be updated electronically by entering an END DATE to the online form at https://app4.ttuhsc.edu/RemoteWorkAgreement/
• All team members (faculty, staff, and students) must wear protective face coverings when on campus with the exception of eating and drinking which should be done privately.
• Clinical team members, and other with regular patient contact will wear appropriate PPE as designated by their supervisor.
• All individuals, when in public, should maximize physical distance from others.
• Avoid socializing in groups of more than 10 people in circumstances that do not readily allow for appropriate physical distancing.
• Access to TTUHSC El Paso facilities will be at approved entrance points only and all individuals must undergo screening procedures (i.e., temperature monitoring) and must complete an online attestation regarding absence of common COVID 19 symptoms. See Appendix B for entrance points.
• Any changes to or termination of Remote Work Agreements should be submitted via the online application.

Campus Operations:

General Operations:
• Continue university essential operations unless otherwise directed by the respective President, VP or Dean.
• Employee recruitments for critical positions are approved by the respective Dean, VP, President or chief financial officer (CFO) (based on university specific authority) prior to posting.
• Frequent cleaning of high use surfaces. Facilities/maintenance department will maintain an inventory of disinfectant wipes and antibacterial hand sanitizers for distribution to non-clinical departments.
• Minimize non-essential travel and adhere to CDC and State of Texas and/or local guidelines regarding isolation after travel.
• University-sponsored conferences and events may resume with maximum attendance at 25% of room space capacity or no more than 10 people, whichever is less. All attendees will wear appropriate facial covering and maintain social distancing of 6 feet or more.
• Campus patio lunch areas modified to maintain social distancing.

Clinic Operations –
1- Patient conditions
   a. Continue entrance screening.
   b. Strongly encourage all to bring their own mask/face covering. Provide mask on arrival if needed.
   c. Continue limiting accompanying visitors unless patient is a minor or requires caregiver assistance.
   d. Maintain 6 feet distances between patients:
      i. Re-arrange waiting rooms
      ii. Mark distances in front desk lines and separation from front desk staff
      iii. Separate vital signs stations
      iv. Determine number of patients that can be accommodated in each clinic waiting area.
   e. Maximize remote check-in via Phreesia.
   f. Implement waiting outside building (i.e., in car) “on-call” pre or post check-in if needed.
2- Clinic Staff/Providers conditions  
   a. Back-office staff working remotely remains partially off campus (i.e., contact center, referral management, authorization/benefits verification teams, etc). Staff requiring more direct supervision may be moved on campus.  
   b. Continue entrance screening.  
   c. Wear surgical or cloth masks at all times.  
   d. Keep safe separation in working stations (re-arrange as needed).  
   e. Safety Services will periodically inspect working stations.  
   f. Expand to under-utilized clinic spaces as needed.  
   g. Determine number of providers/staff that can be accommodated in-clinic.  

3- Providers schedules  
   a. In-person visits limited to those that cannot be performed via tele-medicine.  
   b. Determine in-person visits capacity in each clinic according to number of patients and providers/staff that can be accommodated (estimate this as patients/hour).  
   c. Distribute in-person visits evenly throughout the week (week days, am and pm, hours of each session) according to capacity.  
   d. Extend clinic hours beyond usual business hours as needed.  
   e. Maximize tele-medicine visits in same or separate sessions.  

4- Non-urgent procedures  
   a. May proceed with adherence to guidelines outlined above for patient conditions and scheduling (see paragraphs 1 and 3).  
   b. If gowns and/or instrument re-processing needed, clinic must have 2 months of expected needed gowns in stock (i.e., does not apply to procedures that only require surgical mask, gloves and or disposable instruments)  
   c. Procedures on the mucous membranes -- including the respiratory tract -- with a high risk of aerosol transmission should be done with appropriate protection (N95 masks and face shields)  

5- COVID-19 Suspect Designated Areas  
   a. Remains open during business hours for COVID-19 suspect patients to be seen.  
   b. Alberta:  
      i. Internal Medicine (IM) staffing of COVID-19 suspect designated area in Breast Care Center area continues  
      ii. Pediatrics to see COVID-19 suspects in Breast Care Center area if space needed  
      iii. Breast Care Center to operate on 3rd (surgery) and 2nd (Oncology) floors.  

6- Other Screening  
   a. Primary care contact center screening continues, followed by clinic triage/tele-visits.  
   b. Phreesia screening tool continues to be active.
7- PPE
a. All clinics
   i. Two surgical masks provided to each provider and clinical staff
      per week (unless cloth mask assigned)
   ii. Inventory monitored weekly and reported.
   iii. Ordering is responsibility of individual clinics
b. N95 cannot be used outside designated areas except for procedures in
   OMFS, ENT clinics

8- Providers and Staff Protection:
a. Vulnerable individuals (as defined by current federal guidelines) may
   request accommodations from supervisors when their presence is
   required on campus.
b. Environmental services (for common areas) and clinic staff (for clinic
   spaces) to disinfect surfaces at least 4 times a day.
c. Isolation and testing of symptomatic and/or exposed individuals per
   current established process.

9- Planned date of increase in total and tele-health visits: May 18th

10- Sequence of clinics to move-in staff, if needed:
    a. Surgical specialties and neurology
    b. Transmountain and Kenworthy
    c. IM and pediatrics at Alberta campus
    d. Psychiatry

11- Risk Monitoring
    a. Weekly number of clinic staff reporting COVID-like symptoms
    b. Weekly number of patients seen in COVID designated areas
    c. Daily monitoring of waiting room conditions by each clinic
    d. Periodic inspection of working stations by Safety Services.

Phase II - Limited Operations (Current Status)

Intent: Resume university operations with modifications and prepare for Phase I.

Personnel Status: Team members begin moving to their normal work locations. All
faculty and staff are classified as “on campus.” Remote work agreements will be
updated electronically by entering an END DATE to the online form at

- Non-work pandemic leaves are terminated. Pandemic leave may continue for
  those required to quarantine.
- Team members sick for any cause will use normal sick leave procedures.
- Emergency Remote Work Agreements may be converted to Telework Agreements for selected individuals.
• Team members on campus must undergo daily screening (i.e., symptoms check) to be completed at the departmental level
• At the supervisor’s discretion, begin return of team members to campus work locations. Submit end dates for Remote Work Agreements or convert to Telework Agreements to Human Resources. Coordinate return to work with Information Technology to return loaned equipment and/or set up equipment previously taken home.
• Vulnerable individuals (as defined by current federal guidelines) may request accommodation from supervisors when their presence is required on campus. This is the final group who will return to campuses to ensure their safety and that of others.
• All team members will continue to wear protective face coverings when on campus with the exception of eating and drinking which should be done privately.
• All individuals, when in public areas, should maximize physical distance from others.
• All team members should avoid gathering in groups of more than 50 people in circumstances that do not readily allow for appropriate social distancing (greater than 6 feet).

Campus Operations:

General Operations—
• Move employee online trainings to in-person, where appropriate.
• Resume all university clinical operations as normal unless otherwise directed by the President.
• At the supervisor’s discretion, begin moving team members back to campus work locations and submit the end date for Remote Work Agreements and nonwork pandemic leave.
• University-sponsored conferences and events may resume with max attendance at 50% of room capacity or no more than 50 people, whichever is more conservative. All attendees will wear appropriate face coverings and maintain social distancing of 6 feet or more.
• Use discretion to minimize the presence of third-party vendors to only those essential to ongoing university operations.
• Use discretion to minimize all non-essential in-person meetings.
• Resume non-essential and international travel based on CDC, US Department of State, and Texas State guidelines.

Clinic Operations –
• Discontinue entrance screening for patients/visitors
• Discontinue separate COVID-19 designated clinics/pods/tents
• Screening will occur at front desks of each individual clinic
• Each clinic will have the following designated accommodations for patients who screen positive
  o Waiting room section
  o Exam room(s), with post-visit cleaning
  o Vital signs equipment
- Staff and PPE to see these patients
- Non-primary care clinics will determine whether to proceed with visit or re-schedule
- Discontinue employee entrance screening. Request self-reporting at Department level
- Other screening (contact center and Phreesia) continues
- Vulnerable individuals (as defined by current federal guidelines) returning to campus may request accommodations from supervisors

**Phase I - Normal Operations**

**Intent:** Return to daily operations in all areas with no restrictions. Normal work location for some team members (i.e., on campus vs. remote working) may change following successes observed during Phase IV-Phase II operations. Vice Presidents and Deans have approving authority for determining new work locations.

**Personnel Status:**
- Vulnerable individuals (as defined by current federal guidelines) can resume public interactions, but should practice physical distancing, minimizing exposure to social settings where distancing may not be practical, unless precautionary measures are observed.
- All team members should consider minimizing time spent in crowded environments.
- Face coverings are no longer required.
- Continue to avoid physical contact including handshakes, hugs, and typical greetings.

**Campus Operations:**

**General Operations** –
- Large venues can operate without the need for social distancing.

**Clinic Operations** –
- Resume allowing visitors in healthcare clinics. Those team members who interact with patients must be diligent regarding hygiene.
Appendix A: On-Campus Personal Protective Equipment (PPE) Guidelines

Obtaining PPE:
- All clinical team members will be provided with appropriate face coverings by their clinical supervisor or director, based on the level of interaction with patients and visitors.
- All Residents will receive two cloth face coverings for use in the clinics.
- Nonclinical team members are responsible for obtaining personal face coverings prior to arrival on campus.
- Students will be provided personal face coverings prior to arriving on campus or at other university facilities for didactic studies. PPE for students on clinical rotations will be provided by the clinical site based on the level of interaction with patients and visitors.

Recommendations for cleaning and replacing PPE:
- All team members are responsible for regular laundering of cloth face coverings.
- Surgical masks may be worn continually without need of daily replacement; proper fitting and face coverage should be of top priority at all times.
- For information on decontamination of N-95 masks, please contact the Infection Control Nurse.

PPE Enforcement:
- Department supervisors will be responsible for enforcing the PPE requirements listed above. Noncompliance with PPE requirements will be reported to the respective Dean, Vice-President or Provost.
Appendix B: Main campus point of entry screening sites

Phase IV Screening Sites:
- Clinical Sciences Building (CSB) – Patients and visitors to the clinics will be screened at the main entrance. Employees will be rerouted to the rear building entrance for screening and entry. All are given bracelets on a daily basis when successfully passed through screening.

Phase III Screening Sites:
- To streamline the screening process, all employees will be required to complete an online self-attestation at https://elpasotuhsc.co1.qualtrics.com/jfe/form/SV_cUQtWNYmiXSSmrP
- Clinical Sciences Building (CSB)- continue as Phase IV with the addition of AEC employees.
- Academic Education Center (AEC)- Will screen at CSB unless volumes require a screening station set up at main entrance.
- Medical Education Building (MEB)- set up on-line, self-reporting screening process for all east-side campus personnel and visitors. Temperature checks will be done at the MEB for personnel working at MEB, ASB/ASB Annex, SON, and FSB.
- Medical Sciences Building (MSB) – entry will be limited to one door and MSB personnel will take temperatures at the entrance. Self-reporting screening process will also occur online.

Screening process: Clinic and AEC
- All persons (employees and visitors) who enter campus will be required to go through screening. At Clinic spaces, patient and visitors are screened at a separate checkpoint than employees to reduce unnecessary employee exposure to sick persons.
  - Temperature scan- A temperature below 100 will allow the person to continue with the screening questions. If the temperature exceeds 100, a second reading will be performed. If it remains above the threshold, follow “positive screening” process. If the second reading is below the threshold, a 3rd temperature will be obtained to verify that the first was inaccurate. If the first reading was above the threshold, it will take two readings of below 100 before entry is allowed.
  - Screening questions: Employees; faculty, residents, and students should attest to having no symptoms at the TTUHSC El Paso website above prior to entering campus buildings.

b. Positive screening process:
  - If an employee screens positive, they are denied entry and are directed to call their supervisor for guidance.
  - They will be given a card with information as to how to follow the President’s guidance for self-isolation.
  - If a visitor screens positive, they are denied entry with an explanation of the concern.

Phase II Screening: Symptom screenings can be conducted by supervisor as a general welfare check on their employees as they report to work.