University of Oklahoma Health Sciences Center
COVID-19 Return Plan – Adopted May 1, 2020
Last Updated September 11, 2020

The return to full, normal operations in all areas of the University of Oklahoma Health Sciences Center campus will be a gradual, phased process. Effective May 1, 2020, each dean and vice president is responsible for reviewing and distributing this Plan in their areas and for the specifics of the return process to be implemented for their areas; the phases and timing for return must comply with the Oklahoma Open Up and Recover Safely Three-Phase Approach to Open Oklahoma’s Economy, as applicable, and the requirements in this COVID-19 Return Plan, as well as any local, state, and federal laws or orders that are more restrictive.

As the nature of COVID-19 remains dynamic, the Specific Pathogens Preparedness Operations Team (SPPOT) and the OUHSC Emergency Operations Committee (EOC) will regularly evaluate the COVID-19 Return Plan and implement new or revised requirements for return when indicated. Revised versions of this Plan will be distributed to appropriate campus groups and posted on the HSC COVID-19 Updates and Resources page: https://www.ouhsc.edu/coronavirus, also accessible from the OUHSC home page. This Plan applies to all OUHSC employees and students, which includes residents and trainees and, for purposes of this Plan, volunteers. It includes the following sections:

I. Telecommuting
II. Reopening Common Areas, Resuming Services, & Returning Employees to Campus
III. Social Distancing
IV. Masks
V. Building Access and Amenities
VI. Sanitizing Facilities and Equipment
VII. Testing, Isolation, and Contact Tracing
VIII. Monitoring Workforce and Visitors for COVID-19 Symptoms
IX. Travel
X. Training
XI. Research, Patient Care, Academics
XII. Enforcement

I. Telecommuting
The Health Sciences Center campus encourages telecommuting where possible, until further notice.
A. Guidelines - Human Resources will continue to update the University’s telecommuting guidelines as appropriate. The current guidelines are available here.

1 Effective June 18, 2020, revisions to this Plan will be documented on the last page. Substantive changes require the approval of the Chief COVID Officer, as well.

2 If an employee or student indicates compliance with a provision of this Plan is not possible due to medical reasons, the individual should be referred to the appropriate University office to request accommodations on the basis of disability office (Human Resources for employees; Accessibility & Disability Resource Center for students).
B. **Staffing Plans** - Each college dean and area vice president (or their designees) are responsible for determining the telecommuting versus in-person staffing needs for their respective areas and will advise employees of scheduling and location changes, generally at least one work week prior, but not less than 48 hours prior, to a change in assigned work location.

   1. **Phased Return** - The return to work from telecommuting should be phased, when possible, to allow sufficient time to ensure the return is efficient, effective, and meets the requirements of this Return Plan.
   2. **Resurgence** - Each area must be prepared to slow or stop the return to campus and/or to fully return to telecommuting as soon as possible, if the University deems it necessary.
   3. **Screening** – Employees returning from a telecommuting period who meet any of the instances described in Section VIII below must complete the online COVID-19 Screening and Reporting Tool [https://covidreporting.ouhsc.edu/](https://covidreporting.ouhsc.edu/) and email the results to their immediate supervisor prior to returning to campus.

II. **Reopening Common Areas, Resuming Services, and Returning Employees and Students to Campus**

The Health Sciences Center will comply with the following in reopening areas and resuming services on campus.

A. **Requirements to Reopen/Resume** - Common areas that have been closed or have substantially reduced operations as a result of COVID-19, such as health clubs, eating areas, mass transit, and clinics/services, may not reopen until both of the following have occurred:

   1. **Dean/VP Approval** - The director or administrator over the area has submitted a written Return to Services (RTS) Plan for approval to the appropriate dean or vice president, and the RTS has been approved. The RTS Plan must include -- at a minimum -- how it will meet the applicable requirements of each section of this Return Plan and how it will be communicated to those individuals to whom it applies. The RTS Plan \(\text{see checklist}\) should also address how services will be reduced or suspended if such is directed due to a resurgence of COVID-19.
   2. **Final Approval** - The SPPOT/EOC Exec Team has reviewed and approved the RTS Plan.
   3. **Revisions** – Substantive revisions to the RTS plan must be approved by the SPPOT/EOC Exec Team and communicated to those the changes apply to, as described in the original RTS plan.

B. **Screening for Employees to Return to Campus** - Employees who have been telecommuting or on administrative leave must complete the online COVID-19 Screening and Reporting Tool [https://covidreporting.ouhsc.edu/](https://covidreporting.ouhsc.edu/) and submit it before returning to work on campus if they have any instances described in Section VIII below.

C. **Screening for Students to Return to Campus** - Students who have been away from on-site instruction at their assigned campus location or from an on-campus clinical rotation\(^3\) must

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\(^3\) For purposes of this policy, assigned hospital rotation sites are considered to be on-campus rotation sites.\(^4\)

Provided, however, that when individuals are in their own enclosed private workspace, are at least 6 feet from
complete the online COVID-19 Screening and Reporting Tool https://covidreporting.ouhsc.edu/ before returning to campus if they have any of the four instances described in Section VIII below. The Student & Employee Health Clinic will notify students via their University email address of their screening results and will provide additional instruction on how the students are to share the email from Student & Employee Health before they attend a clinical rotation or on-site instruction.

D. Screening for Scheduled Visitors and Vendors – See section VIII.B.2 below.

III. Social Distancing
Social Distancing refers to keeping a distance of at least 6 feet between individuals. According to the Centers for Disease Control and Prevention (CDC), it is one of the most effective methods of avoiding infection and reducing the spread of COVID-19. Social distancing requirements apply in all workplace settings on campus including public settings, common areas, and shared spaces on campus and at OUHSC events.

A. On Campus - When on campus, individuals must maintain a physical distance from others of at least six feet.
   1. Indoors - Individuals must also wear a surgical-style mask (see Section IV below).
   2. Outdoors - Individuals are strongly encouraged to wear a surgical-style mask. If social distancing cannot be maintained outside, individuals must wear surgical style masks.
   3. Tents – If the tent has panels, it is considered an indoor space. Masking in the tent is mandatory, and social distancing must be observed. If the tent has no panels, it is considered an outdoor space. Masks are encouraged, and social distancing is mandatory.

B. Social Distancing Alternatives - When social distancing of at least six feet is not possible in an indoor or outdoor public setting, common area, or shared space, a mask must be worn and additional mitigation, such as the following options, must be implemented where possible:
   - staggered breaks or shifts
   - re-configured physical space
   - re-configured seating designations
   - revised workflow processes (e.g., drive through, partitions, curbside pickup)
   - flexible meeting formats, such as video or telephone conferencing.

C. Large Groups – Gatherings of more than 10 people indoors, including for meetings, must be avoided unless the gathering is determined by the appropriate vice president to be necessary for a mission-critical function and additional precautionary measures will be taken, including at a minimum, those described in this Section III.

IV. Masks

others, and are not interacting with others, they may remove their masks. For purposes of the masking policy, a cubicle is not considered “enclosed.” An office is considered “enclosed” if the door is closed or slightly ajar.
Indoors: Until further notice, all individuals in indoor campus facilities must wear a disposable or cloth surgical-style facemask. Non-medical grade masks that have exhalation valves with or without filters may not be worn on campus unless a surgical style mask is worn over it. Scarves, bandanas, gaiters, buffs, and the like are not acceptable. Masks must cover the nose and mouth.

Masks must be worn by all passengers in University-provided transportation, such as shuttles, buses, police safety escorts, and University owned/leased vehicles. Drivers of any University vehicles must wear a mask when passengers are present.

Outdoors: Masks must be worn in outdoor campus spaces where social distancing cannot be maintained and when otherwise required by the University, such as for certain events.

NOTE: If an employee or student indicates compliance is not possible due to medical reasons, the individual should be referred to the appropriate University office to request accommodations on the basis of disability (Human Resources for employees; Accessibility & Disability Resource Center for students). If a patient states compliance is not possible due to medical reasons, contact the clinic manager for direction. Cloth face coverings should NOT be worn by children under the age of 2 or anyone who has trouble breathing, is unconscious, incapacitated, or otherwise unable to remove the mask without assistance, per the CDC.

A. **Masks for Students and Employees** - The University will make masks available to employees and students appropriate to their on-campus responsibilities.
   1. Employees - Masks for employees outside of OU Physicians may be obtained from the central mask inventory. Managers should complete this form to obtain surgical-style masks for their employees. Masks for employees within OU Physicians will be obtained through the normal OU Physicians supply chain. Masks for clinical providers in the College of Dentistry will be provided through normal College of Dentistry supply chain.
   2. Students - Masks for students who are on campus may be obtained from the HSC Student Affairs or OU-Tulsa Student Affairs offices. Masks for students in Lawton, Weatherford, Ardmore, and Bartlesville may be obtained from the program coordinators. Students in off-campus rotations who need masks should contact HSC Student Affairs or OU-Tulsa Student Affairs, as applicable.
   3. Re-Use - Employees and students must observe the following re-use guidelines:
      a. Disposable Masks - Disposable filtration surgical-style masks worn in non-clinical/non-surgical areas should be worn on campus for five consecutive days, or until soiled, whichever occurs first. (Those worn in surgical, research, and clinical areas are subject to surgical, research, or department re-use policies.)

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4 Provided, however, that when individuals are in their own enclosed private workspace, are at least 6 feet from others, and are not interacting with others, they may remove their masks. For purposes of the masking policy, a cubicle is not considered “enclosed.” An office is considered “enclosed” if the door is closed or slightly ajar.
b. Cloth Masks – Cloth masks should be washed and fully dried after each day’s wear. **Appropriate cleaning of the mask** is the responsibility of the wearer.

B. **Masks for Patients and Guests** – When possible, patients should be asked to wear their own mask to their appointments and to advise their guests to do the same. The University will make surgical-style masks available to patients and their guests who do not bring their own approved masks. Information regarding obtaining masks for patients and accompanying family members or caregivers who do not have their own masks is available from clinic staff.

C. **Masks for Vendors and Others** - Vendors and other visitors are expected to provide their own masks when on campus. Departments should advise their visitors, vendors, and service providers of this requirement. Clinic staff may provide masks if sufficient supply is available.

D. **Masking Compliance Program** – The Health Sciences Center, through SPPOT/EOC and OU Physicians, will implement a masking compliance program for its on-campus facilities. The program will include, at a minimum, a regular review of masking compliance in each facility, followed by a weekly report detailing findings to the building coordinator and deans and vice presidents located in the facility for action (education, signage, training, etc.).

V. **Building Access and Amenities**

Building access and amenities must be managed in a manner that minimizes the risk of infection and spread of COVID-19.

A. **Building Access** - Access to campus buildings must remain restricted until further notice or until expanded access is coordinated by Operations and the building coordinator and then approved by the appropriate dean or vice president. Expanded access may be granted only if mitigation steps will be put in place to limit access to only those individuals intended or scheduled to be in the building.

1. **Patient Care Buildings** - Public entrances to patient care buildings must be attended, and current visitor policies must be observed. Vendors entering patient care buildings must enter through the main entrance. Other entrances must be restricted to key or card access.

2. **All Other Buildings** - Entrances to other buildings must be restricted to key or card access or be attended.

3. **Food Delivery, All Buildings** – Third party food delivery services may not enter or be given access to enter campus buildings. Individuals ordering from these services must arrange to meet the delivery person outside of the building.

B. **Building Amenities** - All common areas must be maintained in a manner that provides for social distancing (see Section III above) and safe hygiene practices.

1. **Elevators** – Generally, no more than four individuals may be in an elevator at one time. Reasonable exceptions include patient transport and freight elevators, patients using an elevator with their household members or caregivers, and emergency personnel. For smaller elevators, a smaller number of occupants is preferred. On occasion, it may be appropriate for additional passengers to ride, in order to avoid groups forming while waiting on elevators. **Individuals must wear masks in elevators.**
2. Seating Areas - Seating at tables and benches is generally limited to one person per 6 feet. Reasonable exceptions are members of the same household sitting together and patients or students sitting with their caregivers or aides.

3. Restrooms - Restroom facilities should not be used when social distancing cannot be maintained.

4. Cleaning - Sanitization protocols must be in place for all departments and areas and must include, at a minimum, the items in Section VI below.

5. Hygiene - Hand sanitizer should be made available if soap and water are not readily available in the area.

6. Drinking Fountains - Use of drinking fountains that are not touch-free should be discouraged.

C. Signage - University Operations personnel will place signs in common areas that address the requirements in Sections III, IV, and V, as appropriate. Departments and areas can obtain additional copies of these signs from University Operations or from https://printingstorefront.ou.edu/ou/catalog.cgi.

VI. Sanitizing Facilities and Equipment
Clean facilities and equipment require a commitment from all levels of the University community. Everyone has an important role and responsibility in maintaining a healthy work environment.

A. University Responsibility - The University will provide increased daily cleaning and sanitizing of frequently used facilities and common areas, including elevators, restrooms, classrooms/lecture halls, and other high-traffic spaces with the use of BPA-approved cleaners that meet CDC guidelines for disinfecting COVID-19. For high-traffic areas within facilities, the University will also provide, when possible, no-touch disposal receptacles, increased placement of hand sanitizers, MERV -13 filters, and installation of additional University signs encouraging good hygiene.

B. Department/Area Responsibility – As was the case prior to COVID-19, each department/area manager remains responsible for obtaining appropriate cleaning supplies and providing for the cleaning of shared office equipment, furniture, surfaces, and environment. Note these specific responsibilities related to cleaning, however:

1. Office Electronics –Cleaning instructions for many types of common in-office computers and peripheral devices, including University-owned equipment for individual use as well as shared-use equipment, are available here: http://www.ou.edu/ouit/workanywhere/get-started/equipment-sanitization. For equipment not listed on the webpage above, individuals should refer to the manufacturer’s recommended instructions or contact their local IT support personnel.

2. COVID-19 Positive Individuals – Frequently used campus spaces are disinfected on a daily basis. Department/area managers who are notified of a COVID-19 positive individual in their space should contact General Services (405-271-2311 or 918-660-3555) for OUHSC-operated buildings or OneCall (405-271-2252) for UHAT-operated buildings to confirm when disinfecting of the space last occurred. If the positive individual has been in the space since it was last disinfected, General
Services/OneCall will, in consultation with EHSO, assess what, if any, interim disinfecting is appropriate, and the supervisor should close off affected areas and/or open outside doors and windows, if instructed by General Services/OneCall while the assessment is pending. This procedure should be followed in off-campus leased spaces as well, by contacting the leasing agent or building maintenance team.

3. Environment - Increased ventilation (open doors, for example) and purchase and use of portable HEPA filters when possible, should be considered.

C. Individual Responsibility – As was the case prior to COVID-19, individuals are responsible for cleaning their personal and shared spaces and office equipment.
   1. Workspace - Individuals are encouraged to disinfect their individual workspaces (desk, phone, keyboard, etc.) daily.
   2. Equipment from Home - Individuals bringing electronic equipment to University buildings from off-campus locations must first clean all equipment following the instructions in Section VI.B.1 above.
   3. Shared Items - Individuals must avoid using others’ phones, desks, offices, computers, work tools, etc., when possible. Individuals using shared office items, such as copiers, must clean and disinfect the items before and after use.
   4. Food Preparation - Individuals may prepare food in common areas, only one person at a time and must clean the area after their use.

VII. Testing, Isolation, and Contact Tracing

A. Positive Tests - If an employee or student tests positive for COVID-19, they and the University will cooperate with the appropriate health department in its contact tracing efforts.
   1. Supervisors who are made aware that an individual in their area has tested positive should contact General Services as described in Section VI.B.2 above for disinfecting assessment, if the individual was on campus in the past 2 days.
   2. All employees and students who have received a positive COVID-19 laboratory test must obtain clearance from the Student & Employee Health via the online COVID-19 Screening and Reporting Tool https://covidreporting.ouhsc.edu/ before returning to on-campus University responsibilities. Clearance may require proof of a negative COVID-19 test. PLEASE NOTE: At this time, the University does not accept negative rapid COVID-19 antigen tests from any laboratory.

B. Confirmed Exposures - Employees and students who know they were exposed to a laboratory-confirmed COVID-19 positive individual are expected to notify the Student & Employee Health Clinic via the online COVID-19 Screening and Reporting Tool https://covidreporting.ouhsc.edu/ and to follow the direction provided by the Clinic and by the applicable health department involved (if any). That direction may require certain actions, such as to remain away from University property\(^5\) and from on- and off-campus events until approved for return by Student & Employee Health.

\(^5\) Excludes individuals who live in University Village Apartments (UVA). If any UVA residents test positive for COVID-19, they are encouraged to contact Joe Schmidt, HSC Student Affairs, at 405-271-2416 for assistance.
VIII. Monitoring Employees, Students, and Visitors for COVID-19 Symptoms - Mandatory Reporting Process

A. Monitoring Employees and Students - Employees and students must complete the online COVID-19 Screening and Reporting Tool at https://covidreporting.ouhsc.edu/ before resuming on-campus activity or responsibility each time they answer **YES** to any of the questions below. The employee or student will be notified via email of their screening results and will follow the instructions included for forwarding the email. NOTE: Individuals must also comply with the screening and reporting processes in place at their assigned locations/rotations.

1. Are you experiencing symptoms that could be consistent with COVID-19, such as fever, cough, shortness of breath or difficulty breathing, chills, muscle pain, sore throat, recent loss of taste or smell, and/or extreme fatigue? (Please also contact a health care provider regarding specific symptoms.)

2. Do you have COVID-19 test results pending, or did you test positive for COVID-19 within the last 14 days?

3. Have you had close contact (been within 6 feet, for approximately 15 minutes or more\(^6\)) with an individual diagnosed with COVID-19 in the last 14 days or with someone who has been tested for COVID-19 and whose results are pending in the last 14?

4. Do you have a household member who has tested positive for COVID-19 in the last 14 days?

B. Monitoring Patients and Scheduled Visitors/Vendors –

1. Patients and Their Visitors – Patients and accompanying visitors will be monitored via temperature checks and other clinic screening tools. NOTE: OUHSC and OUMI employees who are accompanying family or friends on patient visits are considered to be visitors and must comply with the clinic’s screening process.

2. Scheduled Visitors/Vendors\(^7\) – Visitors who are scheduled to be on campus for mission critical business, such as certain job candidates and speakers, and vendors who will be in campus facilities for more than pick-up or delivery (typically 15 minutes) will be directed by the scheduling department to complete the online Scheduled Vendor/Visitor COVID-19 Screening and Reporting Tool at least 24 hours prior to their scheduled arrival on campus. They will be advised to notify the individual who scheduled them to be on campus if they begin to experience COVID-19 symptoms during their visit. See the Scheduled Visitor/Vendor FAQ here for more information.

\(^6\) It is possible for COVID-19 to spread in shorter periods of time or in different distances, so individuals should monitor their health and complete the online Screening and Reporting Tool if they experience COVID-19 symptoms.

\(^7\) Third party food vendors, as identified in Section V.A.3 above, and other vendors who are on campus solely to make deliveries or perform outdoor services are not required to complete the Tool.
C. **Temperature Checks** - Temperature checks may be required only for individuals entering buildings/areas where patient care is provided. Employees in these buildings/areas may be required to check their temperatures at home or upon entry. Prior approval from the Office of Human Resources is required for employee temperature checks in any other buildings/areas.

1. Employees - Employees with an elevated temperature (100.4°F and above) may not return to campus until they have had no elevated temperature and no evidence of COVID-19 symptoms for at least 24 hours and they have been cleared by Student & Employee Health via the online COVID-19 Screening and Reporting Tool at [https://covidreporting.ouhsc.edu/](https://covidreporting.ouhsc.edu/).

2. Patients and Accompanying Visitors - Patients with an elevated temperature (100.4°F and above) at screening will be managed in accordance with clinic protocol. Accompanying visitors with an elevated temperature (100.4°F and above) may not enter the facility.

IX. **Travel**

A. **University Domestic and International Travel** – Domestic and international air travel for University-related business or academic purposes is permitted only if the travel is considered *mission-critical* to the University.

B. **Mission-critical Travel, Defined** – Mission-critical travel is travel that is necessary to the University’s ability to meet its core academic, research, or operations functions. More specifically, the purpose and timing of the travel must be such that if the travel does not occur as scheduled, the University’s ability to meet its core academic, research, or operations functions is significantly impaired. Individuals who believe domestic or international travel is mission critical must contact their dean/Vice President, who will consider factors such as timing, State Department/CDC travel advisories for the destination(s), impact on competitive advantage, and actions of peer institutions, and make a written recommendation to the Senior Vice President and Provost for approval.

C. FAQs on domestic and international travel are available [here](https://growthengagement.ouhsc.edu/).

X. **Training**

A. The SPPOT/EOC Exec Team will assist with and coordinate training materials and opportunities for departments/areas, employees, and students to learn about COVID-19 and related campus policies.

B. Each college, clinic, and department will ensure its employees and students also receive COVID-19 training specific to their areas on an ongoing basis.

XI. **Research, Patient Care, Academics – Return to Service Plans**

A. **Return to Research Plans**

1. The Return to Research Plan for laboratory research is available here: [https://research.ouhsc.edu/Resources/COVID-Research-Updates](https://research.ouhsc.edu/Resources/COVID-Research-Updates).

B. **Clinics** – The Return to Service plans for OU Physicians, the College of Dentistry, Keys Speech and Hearing, and others are available from the appropriate administrative office.

C. **Instruction** - The Return to On-Site Instruction Plan is at the top of the OUHSC Teach Anywhere page: [https://www.ouhsc.edu/teachanywhere/](https://www.ouhsc.edu/teachanywhere/).

D. **Other Return to Service Plans** – Other Return to Service plans are available from the vice president responsible for the particular area or the SPPOT/EOC Exec group.

E. **Other Campus Plans** –
   1. Norman campus: [https://www.ou.edu/together/norman-phase-iii](https://www.ou.edu/together/norman-phase-iii)
   2. Tulsa campus: [https://ou.edu/tulsa/coronavirus](https://ou.edu/tulsa/coronavirus)

XII. **Enforcement**

Employees and students who refuse to comply with this Return Plan are subject to disciplinary action, in accordance with the applicable faculty, staff, or student handbook policy. Managers may consult with Human Resources for additional information.

If an employee or student indicates compliance is not possible due to medical reasons, the individual should be referred to the appropriate University office to request accommodations on the basis of disability office (Human Resources for employees; Accessibility & Disability Resource Center for students).

Vendors, visitors, and patients who refuse to comply with this Return Plan are subject to having their access to campus suspended or terminated.
<table>
<thead>
<tr>
<th>Effective Date of Substantive Revision</th>
<th>Section Revised</th>
<th>Description of Substantive Revision</th>
<th>Approved By</th>
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<tr>
<td>6/29/2020</td>
<td>Introduction</td>
<td>Added distribution/posting requirement to 2d paragraph</td>
<td>SPPOT/EOC Exec; Chief COVID Officer (CCO)</td>
</tr>
<tr>
<td>6/29/2020</td>
<td>II.A.1</td>
<td>Omitted reference to stay-at-home Plan; added communication requirement</td>
<td>SPPOT/EOC Exec; CCO</td>
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<tr>
<td>6/29/2020</td>
<td>II.A.3</td>
<td>Added approval process for RTS Substantive revisions</td>
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<tr>
<td>6/29/2020 7/2/2020</td>
<td>IV Intro</td>
<td>Added University transportation to masking requirements; moved text from footnote to policy re: those who say they cannot wear a mask</td>
<td>SPPOT/EOC Exec; CCO</td>
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<td>6/29/2020</td>
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<td>Added language re: patients and guests to bring own masks</td>
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<td>6/29/2020</td>
<td>IV.C</td>
<td>Added language re: vendors and Others to bring own masks</td>
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<tr>
<td>6/29/2020</td>
<td>V.B.1</td>
<td>Increased passenger number from two to four</td>
<td>SPPOT/EOC Exec; CCO</td>
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<td>7/2/2020</td>
<td>VIII.A.4</td>
<td>Revised to include gatherings and to define event, venue, and group size as 10 or more people and to exclude household members from the 10</td>
<td>SPPOT/EOC Exec; CCO</td>
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<td>6/29/2020</td>
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<td>Added new Positive Test section</td>
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<td>Omitted paragraph B</td>
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<tr>
<td>6/29/2020</td>
<td>X.A-B</td>
<td>Added new section requiring training at the EOC and at the department level</td>
<td>SPPOT/EOC Exec; CCO</td>
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<tr>
<td>7/30/2020</td>
<td>Throughout</td>
<td>Inserted “online” prior to each reference to the Screening and Reporting Tool to distinguish from the screening app that may be used in limited circumstances.</td>
<td>SPPOT/EOC Exec; CCO</td>
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<tr>
<td>8/10/2020</td>
<td>II.C and III.A</td>
<td>Updated instructions to students re: sharing email response</td>
<td>SPPOT/EOC Exec; CCO</td>
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<tr>
<td>8/10/2020</td>
<td>III.A.3</td>
<td>Added section addressing tents</td>
<td>SPOT/EOC Exec/ CCO</td>
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<tr>
<td>8/10/2020</td>
<td>IV</td>
<td>Added prohibition on non-medical grade masks with valves; added prohibition on gaiters and buffs as masks.</td>
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<tr>
<td>8/10/2020</td>
<td>IV footnote</td>
<td>Added clarification re: cubicles and open</td>
<td>SPPOT/EOC Exec;</td>
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<td>Date</td>
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<td>8/10/2020</td>
<td>VIII.A.4</td>
<td>Revised to add reporting time for events</td>
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<td>VIII.A.5, 7</td>
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<td>8/10/2020</td>
<td>VIII.B.2</td>
<td>Added clarifications for scheduled Visitors to campus; added FAQ link</td>
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<td>8/10/2020</td>
<td>IX</td>
<td>Added Travel FAQ link</td>
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<td>8/10/2020</td>
<td>XII</td>
<td>Added reference to Human Resources</td>
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<tr>
<td>8/13/2020</td>
<td>IV footnote</td>
<td>Additional clarification re: cubicles and open doors for “enclosed” spaces.</td>
<td>SPPOT/EOC Exec; CCO</td>
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<tr>
<td>9/08/2020</td>
<td>Page 1, first Paragraph</td>
<td>Added reference to more restrictive local, state, and federal laws/orders</td>
<td>SPPOT/EOC Exec; CCO</td>
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<tr>
<td>9/08/2020</td>
<td>III.A, 1,2</td>
<td>Edited for clarity; added reference to surgical-style mask</td>
<td>SPPOT/EOC Exec; CCO</td>
</tr>
<tr>
<td>9/08/2020</td>
<td>IV,D</td>
<td>Added reference to outdoor events in IV And to masking compliance Program. In IV.D.</td>
<td>SPPOT/EOC Exec; CCO</td>
</tr>
<tr>
<td>9/08/2020</td>
<td>VI.B.2 and VII.A</td>
<td>Updated reporting process</td>
<td>SPPOT/EOC Exec; CCO</td>
</tr>
<tr>
<td>9/08/2020</td>
<td>VIII.A</td>
<td>Revised to put in question form and to omit travel, 7-day absence from campus, and event attendance</td>
<td>SPPOT/EOC Exec; CCO</td>
</tr>
<tr>
<td>9/08/2020</td>
<td>VIII.B.1</td>
<td>Added clarification regarding OU/OUMI employees as visitors</td>
<td>SPPOT/EOC Exec; CCO</td>
</tr>
<tr>
<td>9/08/2020</td>
<td>IX</td>
<td>Revised to address domestic and International travel and to define mission-Critical and to omit screening requirement</td>
<td>SPPOT/EOC Exec; CCO</td>
</tr>
<tr>
<td>9/08/2020</td>
<td>XI</td>
<td>Added Paragraph E to include links to other OU campus plans</td>
<td>SPPOT/EOC Exec; CCO</td>
</tr>
</tbody>
</table>
| 9/11/2020  | I.B.3 and II.B and C | Omitted references to 7-day absence from campus                      | SPPOT/EOC Exec; CCO; sam