

COVID-19 Mitigation Plan

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Introduction

The COVID-19 Mitigation Plan (further referred to as "The Plan") is a supplement to the <u>SBCC</u> <u>Emergency Operations Plan</u> (EOP) and is referred to in Board Policy 3506 and Administrative Procedure 3506. The overarching approach of the Plan is for Santa Barbara City College to follow guidance given by "Public Health" or "Public Health Authorities". This term collectively refers to the Santa Barbara County Department of Public Health (SBCDPH), California Division of Occupational Safety and Health (Cal/OSHA), California Department of Public Health (CDPH), and/or Center for Disease Control (CDC). There may be additional health authorities that apply to specialized areas of the campus (e.g. SBCC Athletics Department following the guidance of the California Community College Athletic Association).

The California <u>SMARTER</u> plan provided information on the disproportionate effects the pandemic had on historically underserved, low-income, and disabled Californians. This plan aims to improve equity in our prevention and safety mitigation strategies.

Specifically, the Plan aims to:

- expand on the <u>SBCC Influenza Pandemic Plan</u> (EOP, Attachment 2, pg. 185 197) to include preparation, response and recovery from COVID-19 and similar infectious diseases
- build on the experience, feedback and learnings from the current SBCC COVID-19 crisis response

and

• outline a sustainable, integrated strategy to retain a broad range of college operations through similar future infectious-disease outbreaks and in a post pandemic SARS-CoV-2 environment.

Disclaimer

While the intention of this Plan is to offer a broad framework for the operations of SBCC departments and units in an infectious-outbreak and/or endemic infectious environment, nothing in this document precludes the primary parties and key stakeholders from modifying their actions to meet whatever unique conditions arise in the future.

Infection Mitigation Tools:

As the risk to society from COVID-19 and infectious diseases change, the mitigation model will be adapted from a societal level of protection to an individual level of protection. The benefits of each mitigation tool must be carefully weighed against the cost it inflicts on the SBCC mission.

Vaccinations

The requirement of vaccines either under the Emergency Use Authorization (EUA) or full FDA approval may be considered based on Public Health guidance with the goal of providing access to vaccines and meeting the SBCC mission. Continuous review of the importance of the vaccinations will be done as the healthcare professionals learn and provide more tools and guidance.

Daily Health Screening and Check-in

Depending on COVID-19 Community Levels established by the CDC, in an effort to help students and staff monitor and make responsible decisions about their health and the health of the community, each person may be asked to complete a health survey prior to coming to campus. The health survey tool can also support contact tracing, testing, and immunization record keeping as deemed necessary. SI/President may decide based on public health guidance and Community Levels to end its use or to continue utilizing its functions.

Environmental (i.e., Heating and Ventilation and Air Conditioning)

Adequate ventilation reduces viral transmission by reducing the concentration of small aerosols that remain airborne. As the risk assessment metrics indicate, and OSHA requirements permit, facilities will adjust the environmental mitigation strategies in order to preserve the functionality of the ventilation system. The independent mitigation measures that are classroom and location specific can continue as needed. This includes HEPA air-purifiers and all measures to increase air exchange, as long as outside air quality permits, including venting fans, and opening doors and windows.

(CDC-Ventilation in Buildings, SBCC Ventilation and HVAC, ASHAE Epidemic Task Force, California - Requirements for ventilation, Cal-OSHA COVID-19 Prevention, Air Quality)

Physical Distancing Classroom Capacities

As long as masks and respirators are made available and as long as mask wearing is deemed an effective mitigation strategy, classroom and office capacities do not need to be reduced in the tiered COVID-19 mitigation strategy. Current public health recommendations state that preventing students from attending in-person classes is more harmful than the benefit provided by physical distancing. If other mitigation strategies are not possible or not deemed effective, physical distancing may be utilized depending on public health recommendations, but every effort should be made to maintain a full offering of face-to-face classes.

Testing

SBCC will facilitate testing as needed based on the public health requirements and recommendations. As the need for testing diminishes, based on the risk assessment metrics and public health recommendations, SBCC will modify testing requirements. Please see the <u>CDC's</u> <u>Testing Strategies for SARS-CoV-2</u> for further information about testing strategies.

Rationale. Testing will be implemented to offer access to testing to the most underserved populations and those at greatest need for this service. Any testing requirements should not interfere with access to services and must be equitably accessible. If individuals cannot adhere to any requirements, services need to adapt to continue meeting the SBCC Mission. SBCC testing requirements may vary depending on testing groups as defined below.

Defined Testing Groups¹:

- Universal: As broad reaching as possible, with only necessary exceptions.
- **Focused:** Those at <u>elevated risk</u> for either spreading the pathogen or becoming seriously ill from the disease (e.g., high-risk unvaccinated individuals, groups traveling together, participants in unmasked activities, those with a known or potential risk for exposure, classes with elderly or very young students).
- Selective: Groups, departments, or campuses with unique testing needs or requirements (i.e. Athletics, ADN, Radiography).

¹ The people and departments on campus that are included within these groups will be recommended formally to the Superintendent/President by the department lead. If no recommendation is made, the department will follow the testing regiment specified in the current infectious tier.

Masks - Personal Protective Equipment (PPE)

Various types of face coverings are used to prevent the transmission of airborne and droplet spread illnesses. The requirement of face coverings will be adjusted based on the risk assessment metrics and public health recommendations.

- Respirator: N95, KN95, KF94 (Note: Fit-testing is optional, but necessary to ensure the highest level of personal protection)
- Surgical mask: 3-4 layer with a water resistant outer layer
- Cloth mask: multilayered tightly woven cloth with a very wide range of efficacy.

Contact Tracing

Contact tracing helps slow the spread of an infection (e.g., COVID-19). It is used to identify, notify and provide guidance to people who have been exposed to someone with an infectious disease. These people are referred to as close "contacts" hence the term "contact tracing". The people who have been determined to have an infection are referred to as "cases".

The definition of a close contact changes depending on the characteristics of the infectious disease. SBCC will use the CDPH definition for close contact for COVID-19 as required by Cal/OSHA. For reference, the <u>CDC definition for a close contact for COVID-19</u> is "anyone who was less than 6 feet away from the case for a combined total of 15 minutes or more over a 24-hour period."

Generally, the contact tracing process consists of the following steps, which apply to all Community Levels:

- Case investigation in which the "case" is provided with information and support needed to respond to their infection and help to identify the persons who were their "close contacts" during the infectious period.
- Contact notification close contacts are notified about exposure and provided with the appropriate follow-up guidance and support.

Individual contact tracing is the process of contacting, notifying, and providing the follow-up guidance to individual contacts identified by the positive case. In situations where individual contact tracing is no longer a viable public health strategy, the exposure notifications are provided to a group of potential contacts who may have come into contact with someone during

their infectious period (as defined by public health guidance). This latter approach is referred to as **group tracing.** In both of these approaches, the confidentiality of the positive case is protected. SBCC may use both the individual contact tracing and the group-tracing strategies outlined by local and regional public health departments.

The epidemiological characteristics of SARS-CoV-2 represent a unique challenge in terms of the viability of contact tracing. The fact that the virus is transmitted by people days before the onset of symptoms, as well as by people who never develop symptoms, increasing the expediency of the contact tracing process and minimizing the time-to-identification and the time-to-quarantine or alert close contacts is critical. Therefore, the most effective contact tracing is one where individuals take a personal responsibility for their and other's well-being as well as the health and safety of the SBCC community and notify their close contacts as soon as possible.

Upon confirmation of a positive case, appropriate contact tracing procedures will be initiated. HR Risk Management assures OSHA compliance and provides notifications and reports to the <u>Santa Barbara Public Health Department</u>.

Public Access

Regulating public access of *visitors*, *vendors*, and *student visitors* may be implemented as a mitigation strategy if deemed necessary and appropriate. Limiting public access to SBCC facilities should be carefully and strategically used in order to continue achieving the SBCC mission.

All visitors to large group meetings and events will be required to follow specific <u>CDPH</u> <u>guidance</u>.

Information on Infection Characteristics

Current characteristics of the infection are determined using the CDC COVID-19 Community Levels (see Figure 1 for current metrics). The Community Levels may change depending on updated CDC guidance. The level of community risk and impact is currently assessed with three metrics: 1. New COVID-19 cases per 100,000 in the past seven days. 2. New COVID-19 hospital admissions per 100,000 population (7-day total), and 3. Percent of staffed inpatient beds occupied by COVID-19 patients (7-day average).

Figure 1. <u>COVID-19 Community Levels</u> – Use the Highest Level that Applies to Your Community

New COVID-19 Cases Per 100,000 people in the past 7 days	Indicators	Low	Medium	High
Fewer than 200	New COVID-19 admissions per 100,000 population (7-day total)	<10.0	10.0-19.9	≥20.0
	Percent of staffed inpatient beds occupied by COVID-19 patients (7-day average)	<10.0%	10.0-14.9 %	≥15.0%
200 or more	New COVID-19 admissions per 100,000 population (7-day total)	NA	<10.0	≥10.0
	Percent of staffed inpatient beds occupied by COVID-19 patients (7-day average)	NA	<10.0%	≥10.0%

Tiered Response To Current COVID-19 Situation

Following is a tiered approach for the use of infection mitigation tools based on transmission rates and hospital admission and utilization. The tiers proceed from low to increasingly higher transmission and hospitalization and are intended to provide a dynamic and tailored response to the situation. The College will evaluate the transmission rate and hospital admission and utilization rates weekly as long as the CDC uses these criteria. When this weekly evaluation indicates that a tier change is warranted, the College will be notified and the transition will go into effect within two weeks. This will allow time for planning, orderly transition, and proper communication to the campus community.

Tier 1: Low Community Level

When the Community Level is low, there will be a strong emphasis on personal risk assessment and supporting the individuals that are themselves at risk for severe outcomes and illness if they are infected. At this level, mitigation strategies that interfere with student access to campus resources cause more harm than benefit.

Health Screening

Cleared4, or a similar platform, may be used for contact tracing, testing, and immunization record keeping, but may not be actively monitored. Until further notice, daily health screening should be used to record COVID-19 symptoms and positive test results to facilitate follow-up for COVID-19 related resources and excused absences. The health survey tool can also support contact tracing, testing, excused absence reporting, and immunization record keeping as deemed necessary.

Testing

Any potential testing requirements are based on Public Health guidance. Focused testing as indicated for contact tracing may be requested.

Masking

SBCC follows the guidance on masking issued by public health authorities for higher education institutions. Masks will be provided as needed. Individuals are encouraged to learn how best to protect themselves based on their personal risk factors.

Public Access

There are no restrictions for visitors in the Low Tier. In the Low Tier, all meetings may be held in person. Committees and department teams should decide on the modality that works best for them; in-person meetings are encouraged when productive.

Tier 2: Medium Community Level

When community levels are medium, there will be a strong emphasis on self protection and the preservation of healthcare and community systems by reducing transmission levels while also minimizing disruptions to the SBCC mission.

Health Screening

Cleared4, or a similar platform, may be used for contact tracing, testing, and immunization record keeping, with an increased level of active monitoring and enforcement. Daily health screening should be used to record COVID-19 symptoms and positive test results to facilitate follow-up for COVID-19 related resources and excused absences. The health survey tool can also support contact tracing, testing, excused absence reporting, and immunization record keeping as deemed necessary.

Testing

Any potential testing requirements are based on Public Health guidance. Focused testing as indicated for contact tracing may be requested.

Masking

Surgical masks (or respirator-type masks) are required indoors. With a strong emphasis on personal risk assessment, individuals at an <u>elevated-risk</u> for contracting, spreading, or becoming seriously ill can consider N95, KN95 or KF94 masks.

CDC approved masks will be provided as needed. Surgical masks will be provided along with one or more of the following respirator-type masks: N95, KN95, or KF94.

Public Access

Visitors to any SBCC campus are expected to follow all mitigation recommendations and requirements. Meetings may be held in person. Committees and department teams should decide on the modality that works best for them.

Tier 3: High Community Level

At this level, mitigation strategies may be implemented to protect vulnerable populations and healthcare systems in alignment with Public Health guidance.

Health Screening

Cleared4, or a similar platform, may be in use for contact tracing, testing, and immunization record keeping with an increased level of active monitoring and enforcement. Daily health screening may be used to record COVID-19 symptoms and positive test results to facilitate follow-up for COVID-19 related resources and excused absences.

Testing

Any potential testing requirements are based on Public Health guidance. Focused testing as indicated for contact tracing may be requested.

Masking

Surgical masks (or respirator-type masks) are required indoors. With a strong emphasis on personal risk assessment, individuals at an <u>elevated-risk</u> for contracting, spreading, or becoming seriously ill can consider N95, KN95 or KF94 masks.

CDC approved masks will be provided as needed. Surgical masks will be provided along with one or more of the following respirator-type masks: N95, KN95, or KF94.

Public Access

Visitors to any SBCC campus are expected to follow all mitigation recommendations and requirements. Meetings may be held in person. Committees and department teams should decide on the modality that works best for them.

Post-Pandemic

This period will be communicated by the Public Health Department.

Testing

SBCC will maintain an adequate supply of tests for the students they serve. Additional test reserves will be distributed to departments as needed and in compliance with the terms of use.

Masking

SBCC campus safety will maintain an adequate supply of PPE for distribution as needed for either air quality issues or infection prevention needs.

Contact Tracing

Human Resources assumes responsibility for any necessary contact-tracing activity related to CalOSHA compliance. COVID-19 diagnostics and medical/behavioral guidance will be provided through the regular health care system. Human Resources will assign or hire staff as needed to meet the contact tracing needs based on seasonal or episodic requirements.

Public Access

All <u>vendors</u>, <u>visitors</u>, and <u>student visitors</u> will comply with the minimum safety measures indicated by their personal risk factors and public health guidance.

Glossary

Emergency use authorization (EUA) is a designation used for the use of medical countermeasures for public health emergencies and is designated when a countermeasure has been proven safe and effective but has not completed the full FDA application and review for full FDA approval. EUA can only be used when there is a public health emergency declaration by the Secretary of HHS.

Exemptions will be accepted for all legally required and medically recommended reasons. There are multiple vaccines that do not have religious or philosophical exemption protection under the law in California, COVID-19 vaccines not on that list and continue to have these exemptions. SBCC will allow for these exemptions as necessary in order to meet its mission (<u>Section 120325</u>).

Fit testing ensures proper fit and seal of respirators to achieve maximal personal protection. For more information on fit testing please visit <u>OSHA Fit Testing</u>.

Focused groups include those at <u>elevated risk</u> for either spreading the pathogen or becoming seriously ill from the disease (e.g., high-risk unvaccinated individuals, groups traveling together, participants in unmasked activities, those with a known or potential risk for exposure, classes with elderly or very young students).

Fully Vaccinated: A person is fully vaccinated two weeks after receiving all recommended doses in their <u>primary series</u> of a COVID-19 vaccine.

Inconclusive results are not considered negative results and can either indicate a person is in the earliest phase of an infection, post-infectious, or an inadequate test sample. When an individual receives inconclusive results, they should behave as if they are infectious until a conclusive test result is achieved.

Proof of Recovery will be a positive PCR test result that is older than 11 days and no older than 90 days or a doctors note.

Respirators are face masks or devices that are designed to protect the wearer against inhaled particles. Other masks are primarily designed to prevent others from exhaled or expelled particles.

Selective groups include departments or campuses with unique testing needs or requirements (e.g., athletics, ADN, Radiography).

Serial testing is testing that is performed at standardized intervals (e.g., weekly or daily before entering a campus building).

Student visitors: Enrolled students who are not attending or actively enrolled in face-to-face classes.

Universal group: This group includes as many people as possible with as few exceptions as possible. Maintaining exceptions is important to avoid unnecessary conflicts that will distract from the purpose of universal precautions and testing.

U.S. Food and Drug Administration (FDA) is a consumer protection agency responsible for regulating foods and drugs marketed and distributed within the United States.

Vendors: Individuals or groups entering indoor campus building for purposes directly involving SBCC missions will be screened by the college or the department that they are serving based on the level of exposure (see Appendix A) that they possess and the need for the service.

Viral virulence includes the manifestations a virus exhibits on its host and is dependent on the host's susceptibility to the virus. This is simply understood as how sick a virus is able to make the individuals it infects.

Visitor: Individuals or groups entering indoor campus buildings on a voluntary basis (e.g. events or meetings), who will interact with SBCC students or staff.