



BOV POLICY # 21 (2016) COMMUNICABLE DISEASE PROTOCOL

Policy Title: Communicable Disease Protocol
Policy Type: Board of Visitors
Policy No.: BOV Policy # 21 (2016)
Approved Date: March 19, 2021
Responsible Office: Spartan Health Center
Responsible Executive: Vice President for Student Affairs
Applies to: University Community

POLICY STATEMENT

The Norfolk State University Board of Visitors is authorized under the *Code of Virginia* § 23- 174.6 and § 23-9.2:3 to, among other things, make all necessary policies and procedures concerning the University. As such, the Board intends to promote a safe learning and working environment for the University community at all times. This policy describes the protocols to be administered in the event of a communicable disease outbreak on campus or within the University community in accordance with [Code of Virginia § 32.1-116.3](#). The protocols are also identified in the most recent version of the [Crisis Emergency Management Plan](#), under the Section XXII Functional Annex – # 7 Infectious Disease (see attached Annex 7).

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DEFINITIONS:

Communicable Disease: means any airborne infection or disease, including, but not limited to, Covid-19 (SARS-COV2 virus infection), tuberculosis, measles, certain meningococcal infections, mumps, chickenpox and Hemophilus Influenzae Type B, and those transmitted by contact with blood or other human body fluids, including, but not limited to, human immunodeficiency virus, Hepatitis B and Hepatitis C (Code of Virginia § 32.1-116.3).

CONTACT(S)

The Vice President for Student Affairs and the Medical Director of the Spartan Health Center officially interpret this policy. The Vice President for Student Affairs is the Executive responsible for obtaining approval for any revisions as required by BOV Policy # 01 (2014) *Creating and Maintaining Policies* through the appropriate governance structures. Questions regarding this policy should be directed to the Spartan Health Center.

POLICY CONTENTS

In accordance with the Code of Virginia, section 32.1-116.3, Reporting of Communicable Disease, the University is required to:

- (a) Obtain the immunization status of all new incoming freshmen, transfer, and graduate students, facilitated by the Student Health Center; appropriate waivers for Religious belief exemptions will be obtained
- (b) Report all reportable communicable diseases to the Virginia Department of Health (VDH) and cooperate with local VDH public health investigators while maintaining individual HIPAA privacy regulations facilitated by the Student Health Center/Health Center Annex

Spartan Health Center and/or Health Center Annex staff shall notify the Vice President for Student Affairs (or his/her designee) at the earliest known opportunity whenever it is determined a communicable disease meets the definition/criteria of an outbreak. This notification must be documented in writing.

STAKEHOLDER (S) (FOR ADMINISTRATIVE POLICY)

Not associated with this policy and procedures.

EDUCATION AND COMPLIANCE

The Board of Visitors shall make available to the University community this policy by inclusion in the online Policy Library and the Board's Website. Education and training for all stakeholders and appropriate audiences on the policy's content will occur, as necessary. This policy will be maintained as a part of the Board of Visitors Policy. In accordance with Code of Virginia § 32.1-116.3 Reporting of Communicable Disease, the Spartan Health Center, shall submit reports required by the Virginia Department of Health.



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PUBLICATION

This policy shall be widely published or distributed to the University community. To ensure timely publication and distribution thereof, the Responsible Executive or Office will make every effort to:

- Communicate the policy in writing, electronically or otherwise, to the University community within 14 days of Board approval:
- Submit the policy for inclusion in the online Policy Library within 14 days of Board approval;
- Post the policy on the Board's Website and;
- Educate and train all stakeholders and appropriate audiences on the policy's content, as necessary.

REVIEW SCHEDULE

- Next Scheduled Review: March 2024
- Approved by, date: Board of Visitors: March 19, 2021
- Revision History: September 11, 2009; June 24, 2014; September 23, 2016; September 18, 2020; December 7, 2020
- Supersedes: Policy # 27.006 Communicable Disease Protocol and Policy (2014)

RELATED DOCUMENTS

- *NSU Crisis Emergency Management Plan (as revised 2016)*. LINK: <https://www.nsu.edu/Assets/websites/police/Crisis-Emergency-Management-Plan.pdf>
- Functional Annex AN7, Infectious Disease (see p. 4 of this Policy)
- *Code of Virginia § 32.1-116.3 Reporting of communicable diseases; definitions*. <http://law.lis.virginia.gov/vacode/title32.1/chapter4/section32.1-116.3/>

FORMS

There are no forms associated with this policy and procedures.



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NSU CRISIS EMERGENCY MANAGEMENT PLAN

Functional Annex (pp. 70-72)

INFECTIOUS DISEASE

AN7

Primary University Respondents

Spartan Health Center

Supporting Area / Agencies

Norfolk Department of Health, Virginia Department of Emergency Management; Centers for Disease Control (CDC); World Health Organization (WHO)

Documents and Policies

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Centers for Disease Controls and Prevention- Emergency Preparedness and Response

<https://emergency.cdc.gov/index.asp>

Virginia Department of Health Emergency Preparedness

<https://www.vdh.virginia.gov/emergency-preparedness/>

Hazard Specific Appendices/SOP

Infectious Diseases, Biological Agents and Food Poisoning

Purpose:

To establish procedures for an appropriate response level to a possible occurrence of an infectious disease outbreak at the University.

Scope of Work:

To identify the responsibilities and expected activities of all University, local, state and/or federal agencies that may be involved in responding to this situation.

Situation and Assumptions:

1. As an open campus community with a majority commuting population the likelihood that an outbreak of an infectious disease is possible.
2. Awareness and notification that such a circumstance is imminent could potentially arrive through:
 - a. Sick student(s) seeking medical assistance from the Spartan Health Center because an awareness of a pattern or reoccurrence of symptoms becomes evident



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- b. Notification from the Norfolk Health Department (NHD) or other local health departments because NSU is an open community
 - c. Information from local hospitals of increased frequency of visits for common symptoms
 - d. Notification from regional or federal CDC agencies
3. Depending on the magnitude of the spread of the disease, assistance and/or management of the response may be requested and/or assumed by local or state health care agencies.

Concept of Operations:

1. The Command Center for response to the situation would be located in the Spartan Health Center.
2. All responses to treatment areas will be under the direction of the medical personnel in the Spartan Health Center or if medically indicated and/or beyond the scope of practice, then under the direction of local or state medical personnel.
3. The Spartan Health Center, Emergency Response personnel, and the trained core of volunteers are to be called to report to the Command Center, issued appropriate protective wear and assigned duties and responsibilities in response to the emergency based on need. The Risk Management team will supply the necessary PPE.
4. If the nature and magnitude of the disease is such that transport to local medical facilities is not available, previously identified locations would be utilized for observation, isolation and treatment. Mass Care and Sheltering-in-Place protocols and procedures would be implemented.
5. If transport is available, The Spartan Health Center and University Police would coordinate the transport of individuals to local medical facilities. Evacuation procedures and protocols would be implemented.
6. Transportation arrangements include:
 - a) area emergency rescue service
 - b) local ambulance services
 - c) local fire department

Organization and Assignment of Responsibilities:

- 1) If it is decided that a biological epidemic or emergency exists, the Medical Director of the Spartan Health Center, along with the staff of the Center, will use appropriate references to form a plan of action (e.g., Control of Communicable Diseases Manual, Virginia State Health Division of Epidemiology Immunization Program. See also Spartan Health Center Clinical Manual for more



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information on Clinical Recognition and Management of Suspected Bioterrorism Events). Contacts with the Center for Disease Control and the World Health Organization (foreign travel alerts) may be made as directed by the Norfolk Health Department.

2) In the event that a biological epidemic or emergency is determined to exist, the Vice President for Student Affairs will request that the Emergency Operations Management Coordinator(s) be convened. At that meeting, the Emergency Operations Management Coordinator(s) will be briefed about the recommendations and requirements of the Norfolk Health Department. Should quarantine, mass screening, mass post exposure prophylaxis or closing of the University be recommended, activation of protocols and procedures will take place at that time. The Vice Presidents, through the deans and directors, will make notification to the campus community and the public. The Vice President for Operations/Chief Strategist for Institutional Effectiveness will coordinate efforts with the media.

If a case of bacterial meningitis or other reportable communicable disease is diagnosed, the Virginia Department of Health will be notified by medical personnel via the online reporting portal, phone or fax. Laboratories are also required to report all positive reportable communicable test results to the Virginia Department of Health.

<https://www.vdh.virginia.gov/surveillance-and-investigation/commonwealth-of-virginiastate-board-of-health/>

Contact tracing is done by public health officials to recommend antibiotic prophylaxis for close contacts. The Medical Director of the Spartan Health Center will assist with contact tracing and initiation of prophylactic antibiotics for students who are identified as close contacts of the original case.

Direction and Control:

- 1) External assistance will be requested as necessary by the Spartan Health Center.
- 2) A command post shall be established at the Spartan Health Center.
- 3) If the situation warrants the opening of the NSU and/or Norfolk Emergency Operations Center, the Incident Commander shall assure that communications with the respective Emergency Operations Center (EOC) are established and they or a designee shall go to the respective EOC to provide information and coordination.
- 4) Direction and Control, as a function, is covered in Section XV of this core plan. Continuity of command as described in Section XI Emergency Notification Protocol and Section XVI Incident Command of this core plan applies to this Annex.



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Administration and Logistics:

- 1) The University provides for accountability of its response efforts through the University Police, Office of Risk Management and the Office of Environmental Health and Safety.
- 2) External agency memoranda of understanding (MOU) agreements specific to automatic and/or mutual aid exist or are pending with numerous adjacent jurisdictions, and include:
 - a) City of Norfolk Police Department
 - b) City of Norfolk Emergency Services
 - c) City of Norfolk Fire and Rescue
 - d) City of Norfolk - Norfolk 911 Emergency Dispatch

Annex Development and Maintenance:

The Leader of the Emergency Operations Management Team has overall responsibility for Annex development and maintenance. The Emergency Operations Management Team Leader will be responsible for keeping this plan up to date by an annual review.

The Emergency Operations Planning Committee developed this Annex to support the NSU Emergency Operations Plan (CEMP). It is implemented with the approval and knowledge of individuals and organizations with assignments or responsibilities under the annex.

Following any exercise, actual emergency or disaster, the Emergency Operations Management Team will determine if this Annex provided satisfactory support and make recommendations accordingly. The President or Emergency Management Operations Team Leader may call a meeting of University response personnel in order to adjust the Annex to reflect emergency actions or recommend changes in procedures to improve its effectiveness. This Annex will be revised whenever any significant change occurs, or at least annually, as a part of the general CEMP review and revision process.