

**Direct Contact Communicable Disease Preparedness Plan**  
**Ebola Hemorrhagic Fever**  
**UL Lafayette**  
*Revised: October 2014*

**1.0 Introduction and Purpose**

UL Lafayette is committed to ensuring, to the best of its ability, the safety of its students, faculty, and staff. For the purpose of this document, the term “Direct Contact” refers to a method of transmission in which a communicable disease can be transmitted from one person to another by that person coming into direct contact (within a prescribed and pre-determined distance) with the infected person or their bodily fluids.

Personnel at the Centers for Disease Control and Prevention (CDC), the Department of Health and Hospitals (HHS), the World Health Organization (WHO), the American College Health Association, and the Louisiana Office of Public Health (OPH) have all identified the Ebola virus as a potential threat. These institutions have instructed Universities to educate themselves on and prepare for the appearance of Ebola Hemorrhagic Fever. The purpose of this document is to provide guidance to University employees on the proper procedure for implementing a response to Ebola Hemorrhagic Fever, a communicable disease in which the method of transmission is direct contact.

**2.0 Goals**

In developing and implementing this document, the University has identified the following goals to be included in the Incident Action Plan (IAP):

- *Monitoring and Surveillance:* Through coordination with OPH, CDC, and others, University emergency response personnel will track the worldwide incidence of Ebola Hemorrhagic Fever, which could trigger an implementation of any and all parts of this plan.
- *Essential Personnel:* The University has determined critical personnel who may be needed at every stage of its plan implementation. These persons have been formally notified that their job duties may require their services, even during times of University emergency closure.
- *Mission Critical Functions:* The University has identified operations and logistics that must continue, in whole or in part, during all stages of this plan implementation. During an emergency, the incident command system (ICS) will be implemented.
- *Establish Roles/Responsibilities:* The University has adopted an All Hazards Emergency Operations Plan to include functional annexes. Functional Annex H, Health and Medical Services, is the predominant annex associated with the plan that will be used to identify roles and responsibilities.
- *Communication:* The University recognizes that, during advanced stages of the medical emergency, traditional communication devices (telephone, internet, and radio) may be overwhelmed and compromised. The University has identified

efficient ways to utilize its communications infrastructure during all phases of the emergency.

- *Student Care:* The University does not support a 24/7 medical facility. However, during school closure, a small percentage of students may have no place to go. Consequently, the University has prepared for identifying these students and addressing their needs.
- *Continuance of Research:* The University supports plans for research activities that cannot cease for extended periods of time.
- *Education:* The University has developed plans to educate and train its entire community on awareness of Ebola Hemorrhagic Fever, sickness prevention, well health, and the implementation of the emergency plan (see section 6.0).

### **3.0 Ebola Response Plan Responsibilities**

The central leadership for the University's Ebola response plan resides with the Student Health Services (incident command, IC) with overall guidance from the Emergency Management Executive Group. The Incident Action Plan should include, but not limited to the following objectives:

- Coordinating activities related to the classroom as they relate to the plan, with a major focus on maintaining and/or restoring the normal university schedule.
- Ensuring business continuity within the University during all phases of the plan.
- Addressing the needs of University researchers, specifically those involved in physical and biological science research activities, during all phases of the plan.
- Meeting the needs of our students outside of the classroom.
- Coordinating all forms of communication between the response team, the University administration, students, DHH/OPH and the public during all phases of the plan.

### **4.0 Four (4) Phased Pandemic Plan Implementation**

In order to accomplish its objectives, the University has developed a four-phased model that will identify the various execution triggers for the pandemic plan:

- *Phase I, General Readiness:* During normal times, the University shall remain engaged at this stage. During phase I, there are no confirmed cases of Ebola Hemorrhagic Fever at the University or within the region. There may however, be one or more confirmed cases of Ebola Hemorrhagic Fever in the United States or worldwide. To maintain its readiness, the University focuses its planning toward education during phase I. Regular training is provided to all University employees (see section 6). The University's website maintains general educational information regarding Ebola Hemorrhagic Fever for the public.
- Travel restrictions may be implemented by the University to affected areas or countries where Ebola Hemorrhagic Fever is occurring, even if no such restrictions are being implemented by the State or Federal government. However,

if no such travel restrictions are implemented by the University, the following procedures shall occur and be overseen by SHS:

- A. All University employees and students are required to report such travel to SHS who shall report to the Department of Health and Hospitals, Infectious Disease Epidemiology section (EPI), within forty-eight (48) hours of receiving the information if prior to travel and within twenty-four (24) hours of receiving the information if subsequent to travel.
  - B. Communicate restrictions or advisories regarding use of commercial transportation (including airplane, ship, bus, train, taxi, or other public conveyance) for twenty-one (21) days after departing an impacted area.
  - C. Communicate restrictions or advisories regarding going to places where the public congregates, including but not limited to, restaurants, grocery stores, gymnasiums, theaters, etc. for twenty-one (21) days after departing an impacted area.
  - D. SHS will implement daily communication and monitoring, if determined necessary, by public health officials for twenty-one (21) days after departing an impacted area.
- *Phase II, Heightened Readiness:* At Phase II, the University learns that one or more cases of Ebola Hemorrhagic Fever have entered the region, the parish, and/or the UL Lafayette campus. Travel restrictions may be imposed at the Federal and/or State level. However, the University remains open to all students and employees. The University begins working very closely with CDC and OPH to determine the extent of the outbreak and its possible ramifications. The EMEG (Emergency Management Executive Group) may turn their focus toward preparing for a possible school closure. Supplies are stockpiled and essential personnel are notified of a possible school closure. Employees are encouraged to prepare their personal families and implement Non-Pharmaceutical Interventions (NPIs) such as:
    - *Social Distancing:* Staying at least 3 feet from other persons to minimize the chance of direct physical contact
    - *Quarantine* (as per OPH and CDC guidelines-to be developed)
    - *Transportation from campus via EMS and exclusion from campus until non-infectious:* of persons who are ill or may be ill with Ebola Hemorrhagic Fever (go to [CDC.gov](http://CDC.gov) for the most up to date guidance)
  - *Phase III, School Closure:* At Phase III Ebola Hemorrhagic Fever has become widespread in our region. Under direction from CDC and OPH, the University must close and suspend all classes and other activities. The length of the closure depends on the severity of the outbreak. Campus buildings will be locked down and severely limited to access for all persons. Students and employees will be sent

home. University research is strongly discouraged and allowed only on a pre-planned approved basis. All faculty and staff, except essential personnel assigned to the emergency response team, are sent home until further notice.

In the event of a school closure, Classified employees under Civil Service Rule 1.23 (d) & (g) serving with job appointment, probationary or permanent status shall be given time off without loss of pay, annual leave or sick leave. Classified employees that remain at work during this closure will receive compensation pay over and above their regular pay.

If this period is for an extended period of time, the University will seek to place the employees not at work with other agencies or allow them to take annual or sick leave, whichever is applicable.

Regular updates of information will be available on the University's website and campus hotline. The Student Affairs team turns their attention to addressing the needs of students who must remain on campus such as:

1. Those who have been exposed but are not symptomatic and must be quarantined
  2. International students living on campus who are bound by travel restrictions.
- *Phase IV, School Re-Opening:* At Phase IV, CDC and OPH have determined that the number of Ebola cases has dwindled to a safe measure and it is safe for people to congregate again. As such, the University re-opens, classes re-convene, and business is returned to normal. However, employees and students who were exposed and who might become sick will be encouraged to stay home until they are determined not to be contagious. The University will likely re-open at Phase II and be ready to re-close if another outbreak occurs.

## **5.0 University Response**

The University has adopted an All Hazards Emergency Operations Plan and follows the Incident Command System (ICS).

ICS will be used in the event of a Phase II declaration. Functional annex leads will follow their respective plans. The Incident Commander for this plan is the Lead Physician with Student Health Services. The three deep staffing rule will apply.

Supporting team members are included in Functional Annex H, Health and Medical Services. The primary supporting units are as follows: Public Safety- Environmental Health and Safety, Public Safety- Police Department, Communications and Marketing, LA Department of Health and Hospitals/Office of Public Health, Acadian Ambulance, and Housing.

## **6.0 Training**

Training on the appropriate PPE will be conducted by qualified personnel to all first responders and SHS staff. This will include the donning and doffing of PPE and general precautions. Protocols for first responder call takers are established as an addendum to this policy. General information for the University community, developed and reviewed by SHS, is disseminated by Communications and Marketing and updated as necessary.