

Laramie County Community College
Health Sciences and Wellness
COVID-19 Information and Guidelines

These guidelines are being issued as a supplement to the School of Health Sciences and Wellness' Policies Handbook (12/10/19 version) to be used for all students and clinical education settings associated with Laramie County Community College's health programs. Additional guidelines and updates will be provided as needed as the COVID-19 situation evolves and changes.

General Information

Coronavirus Disease 2019 (COVID-19) is a respiratory disease caused by the SARS-CoV-2 virus. This zoonotic virus spread from China to many other countries around the world, including the United States. This has resulted in COVID-19 being deemed a pandemic. (CDC, 2020)

The virus is thought to spread mainly from person-to-person in three principle ways:

- Between people who are in close contact with one another (within 6 feet).
- Through respiratory droplets and aerosol particles produced when an infected person exhales, speaks, sings, coughs, or sneezes. These droplets and aerosol particles can land on the mucous membranes, such as those found within the mouths, noses, or eyes of people who are nearby or possibly be inhaled directly into the lungs.
- It is also possible that a person can get COVID-19 by touching a surface or object that has SARS-CoV-2 on it and then touching their own mouth, nose, and eyes. (<https://www.cdc.gov/coronavirus/2019-ncov/science/science-briefs/sars-cov-2-transmission.html#print>; Retrieved 6/17/21)

People are thought to be most contagious when they are most symptomatic. However, there is evidence to show that spread is possible before people show symptoms (pre-symptomatic transmission). In addition, studies have shown that asymptomatic COVID-19 infected individuals account for approximately 50% of disease transmission. (<https://www.cdc.gov/coronavirus/2019-ncov/science/science-briefs/masking-science-sars-cov2.html#print> Retrieved 6/17/21)

The primary symptoms of COVID-19, which can occur between 2 and 14 days after exposure, include:

- Fever or chills
- Cough
- Shortness of breath or difficulty breathing
- New loss of taste and smell
- Sore throat
- Fatigue
- Muscle or body aches
- Headache
- Congestion or runny nose
- Some digestive symptoms such as nausea, vomiting, or diarrhea have also been reported.

Individuals diagnosed with COVID-19 can exhibit mild to moderate symptoms, but up to 20% of those infected exhibit severe symptoms and complications, including pneumonia, persistent chest pain or pressure, difficulty breathing, cyanosis, and death. According to the Center for Disease Control and Prevention (CDC) (2020), all individuals are at risk for becoming infected, but current epidemiology studies indicate that older adults (those over age 65) and people of any age who have underlying medical conditions might be at higher risk for severe illness from COVID-19.

(www.cdc.gov/coronavirus/2019-ncov)

Until early 2021, there were no vaccines for COVID-19 or drugs to treat the condition once an individual has been diagnosed with the disease; only supportive care can be provided. Therefore, the best methods to fight the spread of this communicable disease are through prevention and strict infection control procedures. For the general population and LCCC students, these prevention procedures include:

- Being immunized with an FDA-approved COVID-19 vaccine
- Frequent and thorough hand washing. If soap and running water are not immediately available, provide alcohol-based hand rubs containing at least 60% alcohol
- Avoid touching your eyes, nose, and mouth with unwashed hands.
- Staying home if ill
- Completing all required health screening protocols* prior to coming to campus or attending clinical education facilities;
- Respiratory etiquette, including covering coughs and sneezes
- Practice social distancing whenever possible and avoid large indoor gatherings;
- Wearing face masks or face coverings on campus if unvaccinated when social distancing is not possible; and
- Following stay-at-home or other public health orders.

(R2B Plan Phases I, II, and III. www.lccc.wy.edu, 6/2021) *See Appendix A for example health screening questions

Healthcare Workers and Student Clinical Guidance

According to the CDC, healthcare personnel (HCP) refers to, "...all paid and unpaid persons serving in healthcare settings who have the potential for direct or indirect exposure to patients or infectious materials, including body substances; contaminated medical supplies, devices, and equipment; contaminated environmental surfaces; or contaminated air. For this document, HCP does not include clinical laboratory personnel." (<https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assessment-hcp.html#table1>) Based on this definition, students enrolled in one of the Health Sciences and Wellness programs at Laramie County Community College (LCCC) with clinical assignments in healthcare facilities are subject to the same procedures and guidance followed for the employees of their clinical sites.

For healthcare workers, spread of the SARS-CoV-2 virus is thought to occur mostly from person-to-person via respiratory droplets and aerosol particles among close contacts. Close contact for healthcare exposures is defined as follows: Any individual within 6 feet of a laboratory-confirmed or probable COVID-19 patient for a cumulative total of 15 minutes or more over a 24- hour period. This could occur in various settings such as caring for or visiting the patient; or sitting within 6 feet of the patient in a healthcare waiting area or room); or b) having unprotected direct contact with infectious secretions or

excretions of the patient, including sputum, serum, respiratory droplets, and blood (i.e., being coughed on, touching used tissues with a bare hand). (www.cdc.gov, 2020 & June 2021) (CRMC COVID-19 Guidance 5/2020) Laramie County Health, Kasey Mullins, RN, email, 9/14/2020; www.cdc.gov; <https://www.cdc.gov/coronavirus/2019-ncov/php/contact-tracing/contact-tracing-plan/appendix.html#contact10/21/2020>

Infection Control in Healthcare

In addition to the infection control procedures for the general public discussed earlier, healthcare facilities are actively taking additional steps based on CDC recommendations to prevent the transmission of COVID-19 using three primary approaches:

- 1) *Limiting how pathogens enter the facilities:* These include measures such as limiting entrances, screening patients for respiratory symptoms, encouraging respiratory hygiene in the facility, the increased use of telemedicine, and the cancellation of elective or non-critical procedures.
- 2) *Isolating symptomatic patients as soon as possible:* Many facilities have reconfigured their entrances, waiting rooms, and treatment areas to place patients with COVID-19 or suspected COVID-19 in separate areas or different buildings altogether. COVID-19 patients must be provided with a mask upon entering the facility, and if admitted, must be placed in private rooms--and a private bathroom, whenever possible.
- 3) *Protecting healthcare personnel:* These measures include an emphasis on hand hygiene, creating barriers to the triaged entrance area, placing COVID-19 patients in separate areas of the facility, limiting the number of staff providing care for COVID-19 patients, prioritizing and limiting aerosol-generating procedures, and implementing Personal Protective Equipment (PPE) procedures and strategies, adhering to standard and transmission-based precautions. <https://www.cdc.gov/coronavirus/2019-ncov/infection-control/>

It is for the reasons above that several clinical education centers made the decision in March 2020 to not host LCCC students for an indefinite period. With vaccinations, more testing and monitoring now available, the majority of clinical facilities have now allowed students to resume their clinical experiences, but as of August 2021, some of these facilities are now requiring employees, students, and faculty to document COVID-19 vaccination in addition to their other vaccination requirements. Therefore, each HSW health program will continue to monitor their clinical sites' requirements to ensure that students and faculty remain in compliance with all COVID-19 policies. (UC-Health Vaccination Policy (8/1/2021)

It is important to note that student assignments may still be subject to change if COVID-19 cases begin to increase, if public health orders change, and/or based on individual facility circumstances and resources. Due to this, programs are encouraged to continue to monitor their clinical sites' policies and availability, along with their accrediting bodies' policies, in the event that contingency plans are needed so that students are able to complete their programs as expediently as possible.

When students participate in their clinical rotation assignments, the following principles should be considered:

- 1) Because the physical layout and workflow of the clinical site and specific clinical assignment area may have changed due to the facility's revised infection control procedures, clinical sites are expected to provide an orientation to all students regarding their COVID-19 containment measures, their expectations of student participation in potential COVID-19 patient interactions, and the expected PPE and infection control protocols.
- 2) To maintain social distancing, students are expected to maintain a distance of at least 6 feet from others whenever possible. In addition, congregating in groups is discouraged (i.e., cafeteria, lobbies, and waiting rooms.)
- 3) Generally, students have not been routinely assigned to patients kept in Isolation, and due to the transmissibility of COVID-19 and the finite supply of personal protective equipment (PPE), it is likely that students will also not be routinely assigned to directly care for patients diagnosed with COVID-19. However, this will vary with each facility's protocols and each program's clinical assignments, and this can still place a student in the medium-risk of exposure, based on OSHA guidelines (OSHA, 2020). Workers with a medium exposure risk may still need to wear some combination of gloves, a gown, a face mask, and/or a face shield or goggles. CDC instructions for donning and doffing PPE may be found at: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/using-ppe.html>. A video tutorial for putting on PPE is available from the CDC at: <https://youtu.be/of73FN086E8>.
- 4) **Recognizing that a student's exposure risk could be medium to high, depending upon their clinical assignment, students are required to strictly follow their facility's COVID-19 infection control and PPE guidelines.**
- 5) Because COVID-19 is a respiratory illness, face coverings serve as the most commonly worn type of PPE in health care facilities. Face coverings will be worn each clinical day and students are expected to follow these general guidelines:
 - a. Students will be required to wear a medical grade face mask during clinical hours in all patient care and common areas such as waiting rooms, coffee bar etc. as specified by the clinical site. With vaccines available, some clinical sites may now allow face coverings to be removed in meeting areas where patients or visitors are not present. Each student and faculty member are responsible for inquiring and following each site's policies in this regard;
 - b. Ideally, disposable masks will be disposed of after each day of clinical, or anytime the mask becomes wet or soiled. However, in the event of PPE shortages, a surgical or mask that remains dry and unsoiled may be worn for a period of up to one week (three to five clinical or lab days.) Students may also wear a cloth mask over the surgical mask for additional protection and/or to extend life of mask if clinical policies allow. Cheyenne Regional Medical Group and Cheyenne Regional Physicians Group: email correspondence; 9/10/2020
 - c. Cloth masks must be laundered daily using detergent, hot water, and dried using the highest heat setting. CDC guidelines for appropriate laundering are available at: <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/how-to-wash-cloth-face-coverings.html>;
 - d. Eye protection: Eye protection (either face shields or safety glasses with side shields) is required for all aerosol-generating procedures and should be worn when working with all COVID-positive or suspected COVID-positive patients. When worn, safety glasses and face

shields must be in working order **and** not visibly damaged or difficult to see. CDC guidelines for appropriate cleaning of eye protection can be found at:

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/ppe-strategy/eye-protection.html>.

- e. If a student has been issued an N-95 mask, the clinical site may require proof of proper fit-testing;
 - f. Clinical policies may be more stringent than outlined here; in these cases, clinical policy will prevail. Students are advised to check with their clinical instructors on the required face coverings at their respective clinical sites.
 - g. If a student fails to arrive with or follow the clinical site's face mask or PPE protocols, the student may be sent home and an absence or tardy may be documented using each program's clinical attendance policies.
- 6) Due to the limited availability of PPE, a clinical site may ask individual programs to supply the necessary PPE for the students assigned to their site. LCCC will make every effort to comply with these requests. In the event that the request cannot be met, a student may need to be re-assigned to another alternative site.

COVID-19 Vaccines and Immunity

Starting in January 2021, vaccinations preventing COVID-19 infection became available in the United States. Currently, there are three vaccines that have been approved for use by the Food and Drug Administration (FDA): Pfizer-BioNTech, Moderna, and Johnson & Johnson (Janssen). The Pfizer and Moderna use mRNA technology in two injections to promote immunity while the Johnson & Johnson vaccine uses the traditional vector method in a single vaccine dose. The vector method uses a deactivated adenovirus to trigger an immune response, similar to the commonly used MMR and poliomyelitis vaccines.

mRNA vaccines work differently by delivering mRNA fragments to the body's cells, giving them instructions to manufacture the relatively harmless spike protein present on the coronavirus. (Note that the spike protein is only how the virus attaches to host cells, it does not contain any virus.) Once several cells have manufactured the spike protein, the immune system produces T-lymphocytes and B-lymphocytes to destroy the original mRNA material and the "foreign" spike proteins produced. If the vaccinated individual is later exposed to a COVID-19-infected patient, they would be protected from infection because this exposure to the spike proteins present on the virus would trigger the immune system to produce the T-lymphocytes and B-lymphocytes in its memory to deactivate any COVID-19 virus attempting to attach to and enter the individual's host cells.

Based on clinical trials performed in the U.S. between March 2020 and April 2021, all three types of vaccines are effective against the COVID-19 virus, and an individual is considered "fully vaccinated," or more correctly, have the most effective immunity against the virus, two weeks after the last injection of the vaccine (cdc.gov.) This amount of time is needed for the body's immune system to manufacture the necessary antibodies to confer immunity. Exposure to the SARS-CoV-2 virus prior to the end of the two-week period could still lead to infection, so it is important to follow all masking, PPE and other protective measures for the full 14 days after the last vaccine dose. (Sources: Understanding How COVID-19 Vaccines Work, cdc.gov.6/3/21; <https://www.nih.gov/news-events/news-releases/nih-clinical-trial-investigational-vaccine-covid-19-begins>. 6/25/21; <https://www.cdc.gov/coronavirus/2019->

[ncov/vaccines/keythingstoknow](https://www.cdc.gov/coronavirus/2019-ncov/vaccines/keythingstoknow), 6/25/21; <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/different-vaccines>, 6/25/21)

Please see the table on the next page for a comparison of the three most common vaccines available in the United States.

As of August 1, 2021, in order to ensure the safest environment possible for their patients and staff, some of LCCC's clinical settings are now mandating that LCCC students and faculty are vaccinated against COVID-19 due to the vaccines' proven ability to hinder the transmission of the SARS-CoV-2 virus. In addition, this measure ensures that required staff-to-patient ratios are maintained because **vaccinated individuals are typically not required to be placed in quarantine after exposure to a COVID-possible individual**. Following CDC and FDA guidelines, it is recommended that both doses of the two-dose series are from the same manufacturer in the case of the Pfizer and Moderna vaccines. An example of a COVID-19 vaccination card is provided in Appendix B.

As a result of these clinical partner policy changes, and as supported by the HSW Policy Handbook that states that, "In there is a communicable disease outbreak, additional vaccinations may be required..." (p.3), LCCC will now be adding the documentation of COVID-19 vaccination to its list of required vaccinations. Individual programs will document student COVID vaccinations in a similar manner to the program's other required immunizations using CastleBranch. In the event that an exemption for the COVID-19 vaccination is requested at a clinical site that has mandated COVID-19 vaccinations, program faculty will work with the individual to ensure that the proper forms are completed. It is up to the clinical facility to grant or deny the exemption based on the documentation provided. If an exemption is granted, individuals may also be asked to complete regular COVID-19 testing, often on a weekly basis. Additional PPE protocols may also be required. The failure to comply with the clinical site's policies with regard to vaccination and/or exception requirements will result in removal from the clinical site and may include further disciplinary action, up to, and including, program dismissal.

In the event the exemption is denied, the program may attempt to place the student at another clinical site, depending on program clinical capacity requirements, the ability of the student to meet other clinical site's COVID-19 policies, and provided no other students' clinical experiences are impacted. If the program is unable to place a student, this may delay the student's program completion. Students are advised that the inability to gain clinical education experiences can result in the inability to meet program objectives and outcomes. These circumstances may prevent final acceptance into and/or progression through the program, and ultimately result in dismissal from the program.

COVID-19 Vaccine Comparisons

	PFIZER	MODERNA	JOHNSON & JOHNSON/ JANSSEN
TYPE OF VACCINE	mRNA	mRNA	Adenovirus-based non-replicated viral vector
PROTECTION FROM SEVERE DISEASE	90% clinical trial 97-100% real world	100%	85% (100% after day 49)
PROTECTION FROM HOSPITALIZATION	100% clinical trial 94% real world	100% clinical trial 94% real world	100% clinical trial
PLANS FOR VARIANTS IF EFFICACY DROPS	Booster in development	Booster in development	Booster in development
APPROVED FOR AGES	12 and over	18 and over	18 and over with FDA warning for blood clots
NUMBER OF REQUIRED DOSES	2	2	1
DOSE INTERVALS	3 weeks	4 weeks	N/A
STORAGE INFORMATION	-25 to -15 C	-25 to -15 C	2 to 8 C
PEDIATRIC AUTHORIZATION	Authorized 12 and over, childhood trial in progress	Adolescent trial ongoing, childhood trial started	Enrolling childhood trial
PREGNANCY AUTHORIZATION	*DART complete, no adverse events	*DART complete, no adverse events	*DART complete, no adverse events
BLA STATUS **	Application submitted	Application date tbd	Application date tbd

*Developmental and Reproductive Toxicology (DART).
 **Biologics License Applications (BLA) Process
 Last updated 5/14/2021.

(<https://health.wyo.gov/publichealth/immunization/wyoming-covid-19-vaccine-information/covidvaccineproviders/covid-19-vaccine-comparison-chart/> Retrieved 6/17/21)

COVID-19 Exposure Documentation and Clinical Attendance Guidelines

Because of their potential frequent and close contact with vulnerable individuals in healthcare settings, CDC guidelines recommend that healthcare workers and students are also responsible for monitoring themselves to quickly identify early COVID-19 symptoms and prevent transmission to patients, other healthcare workers, and visitors. Even if vaccinated, if a student or faculty member develops signs of a

respiratory condition (fever, sore throat, cough, or shortness of breath), they should not attend clinical while they exhibit any of these symptoms, following the normal clinical absence notification procedures of the applicable program. Individual programs are encouraged to develop or revise their clinical attendance policies to prevent the spread of COVID-19.

Health Monitoring

As part of Laramie County Community College's Phase III Return to Business Plan, all students, LCCC employees, and visitors to campus are encouraged to screen themselves for any possible COVID-19 symptoms. This self-screening is to be completed **prior to** coming on campus for any in-person classes, labs, or other LCCC business, **or before arriving** at an off-campus clinical site. If an individual is experiencing any symptoms consistent with COVID-19, they should NOT attend their on-campus or off-campus clinical sites and are advised to contact the appropriate instructor or supervisor using the program's or LCCC's normal absence notification procedures.

NOTE: The daily Eagle Health Screening questionnaire is no longer mandatory for the general campus community, but may still be accessed by scanning the QR Code shown in Appendix C. Once all of the answers to the questionnaire are submitted indicating that no COVID-19 symptoms or conditions are present, the student or faculty member will receive a confirmation email stating they are cleared to come to campus (or the clinical site, as applicable.)

In addition to LCCC's R2B Phase III general wellness self-screening, each HSW health program will determine the clinical clearance requirements and screening frequency that meet their needs and their clinical facilities' needs. In general, most clinical facilities require that all health screening criteria are met (i.e., that no symptoms of COVID-19 are present) each day the student attends clinical. Clinical sites may also require the completion of their daily health screening protocols in addition to those required by LCCC, including the documentation of normal temperature readings prior to a clinical assignment.

To document that students are meeting the COVID-19 health monitoring requirements of clinical facilities, the LCCC Health Sciences and Wellness (HSW) School has contracted with CastleBranch* to electronically record this information in addition to the student's immunization, drug screening, and background check account. This module includes questionnaires regarding exposure to COVID-19, symptoms, educational training on infection control and proper handwashing techniques, and a daily temperature log.

* Individual programs may have health monitoring requirements with other vendors as a requirement of their program in addition to, or in lieu of CastleBranch. Check with your program for their requirements.

Temperature Monitoring: To comply with CDC and clinical policies, daily temperature monitoring is required under the following circumstances:

- 1) The student or faculty member is assigned to a clinical site that mandates this as a condition for student assignment at its clinical facilities;
- 2) The student's educational program is requiring this health monitoring component; and/or

- 3) The student has been exposed to COVID-19, either in the clinical setting or through a personal contact (a family member or friend), and is completing the required 14-day quarantine period. (See pages 6-7 regarding COVID-19 Exposure.)

Temperature Monitoring Instructions: Students are expected to take their temperature with an electronic thermometer two times a day, once in the morning, and again in the evening. If you do not have an electronic thermometer, please let your Clinical Coordinator and/or Program Director know as soon as possible. It is recommended that the temperature be taken at the same times each day, and that they are not taken immediately after any meals or beverages. Record each reading in the CastleBranch website form (and/or the applicable clinical facility's form) as soon as possible.

Please also note the following policies and procedures regarding this health requirement. Any temperature reading 100 degrees F or higher:

- 1) Will light up in red on the CastleBranch record;
- 2) Prevents you from attending clinical or an on-campus class or lab;
- 3) Must be reported to the appropriate program representatives and/or your clinical instructors/preceptors;
- 4) Must also be documented on that day's health screening questionnaire as appropriate; and
- 5) Will require further medical intervention. Students will need to call their primary care provider for further guidance, testing, and treatment.

Students are advised that the failure to complete any of their program's required health screenings in an honest and timely manner may prevent or delay their clinical placement and students may also be subject to disciplinary action, up to, and including, program dismissal. The inability to obtain the necessary clinical hours and/or competencies may also prevent or delay the student's completion of the applicable clinical course and/or the program.

Exposure Reporting

Regardless of student or faculty vaccination status, for the safety of patients, other students and faculty, any exposure/close contact with a positive COVID-19 individual must still be reported to the appropriate program officials as monitoring for COVID symptoms for up to a 14-day period post-exposure is still a CDC guideline and is followed by the majority of our clinical facilities.

If Exposure Occurs At the Clinical Setting: In support of the Standard Health and Safety Practices and Exposure Guidelines outlined in the Health Sciences and Wellness Policy Handbook on pages 9-11, student exposure to COVID-19 should be handled as follows: In the event that a student is exposed to the COVID-19 virus as a result of their clinical assignment, this should be reported immediately to their on-site clinical instructor/preceptor, the program's Clinical Coordinator (if applicable), and the Program Director. An Incident Report or other documentation will be completed; a meeting with the facility's Infection Control and/or Occupational Health staff may also be required. At a minimum, the following information should be included in the exposure report as recommended by the recent *Infection Control for Healthcare Personnel* document published by the CDC in October 2019, "...Include(ing) where, when, and how the exposure occurred, the duration and extent of the exposure, and whether appropriate PPE

was used and functioned correctly.” (<https://www.cdc.gov/infectioncontrol/pdf/guidelines/infection-control-HCP-H.pdf>, p.40) In addition, it is important to document the student’s or faculty member’s vaccination status, including the brand name of the vaccine and the date(s) of each vaccine dose administration. This information can then be used to determine the need for quarantine and/or further follow-up and testing for the virus.

Testing for the virus will follow the clinical site’s protocol for documented COVID-19 exposures. As outlined in current guidance from the CDC have established the following testing guidelines based on the type of exposure and the symptoms presented:

- 1) Critical infrastructure workers, healthcare workers, or first responders may need to get tested according to your employer’s or clinical site’s guidelines for the purposes of surveillance testing or if displaying symptoms of COVID-19;
- 2) Health Sciences and Wellness students with COVID-19 symptoms are required to complete the Eagle Health Screening and notify the Dean of Students and program faculty. Students will be advised to see their healthcare provider for testing;
- 3) Any unvaccinated individual who has been in close contact, such as within 6 feet of a person with a confirmed or probable SARS-CoV-2 infection for at least 15 minutes over a 24-hour period even if they do not have symptoms.
- 4) Any vaccinated individual who has been in close contact who develops symptoms consistent with COVID-19 within the 14-day post-exposure monitoring period.

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/testing-overview.html> (9/21/2020, 10/23/2020)

The risk of the exposure is based on the type and extent of contact, [vaccination status](#), and the presence of PPE as outlined in the following link: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assesment-hcp.html#table1>.

The presence and type of PPE, [vaccination status](#), and the location of the exposure are used by Public Health Officials to determine whether a quarantine period is necessary as outlined by the two scenarios provided below. In all cases of exposure, this should be documented by the program director or other appropriate program faculty member should be notified so that the appropriate infection control and symptom monitoring protocols can be initiated.

- 1) “When an unvaccinated student is in a classroom or lab setting, the student needs to try to maintain 6 feet of social distancing. If unable to maintain the 6 feet [it is recommended that they](#) wear a mask. It does not matter the type of mask in this setting as they will be quarantined if they meet the definition of close contact (6 feet x 15 cumulative minutes). **While in the role of the “Student” they are not exempt from quarantine.** In the case of a vaccinated student, they will be exempt from quarantine, but must monitor themselves for symptoms for the 14-day period after the exposure with the assistance of the appropriate faculty member. *CDC recommendations also specify that face coverings also be worn in all public indoor settings during this monitoring period.* If any symptoms emerge during the monitoring period, the student will follow the reporting requirements outlined on pages 9-10.
- 2) “When an unvaccinated student is **in a clinical setting/ healthcare agency** (i.e VA, CRMC, or CRG) the student needs to wear a surgical mask not a cloth mask. If they are in an aerosolized procedure, they must wear a N95 and Eye protection. If they are exposed and the positive is also

wearing a surgical mask, the student will not be quarantined as **they fall into the Healthcare Provider role**. If the positive is not wearing a mask, the student would need to have on a mask and eye protection. **If not wearing both, the student will be quarantined.** If the student is fully vaccinated, they will still be exempt from quarantine, but will be required and monitor themselves for symptoms for the 14-day period after the exposure with the assistance of the appropriate faculty member. *CDC recommendations also specify that face coverings also be worn in all public indoor settings during this monitoring period.* If any symptoms emerge during the monitoring period, the student will follow the reporting requirements outlined on pages 9-10. (Laramie County Health, Casey Mullins, RN, 9/9/2020 email correspondence; confirmed and updated with telephone call 6/30/21). CDC.gov.8/1/21

Due to these guidelines, all students in clinical experiences will wear surgical masks in all patient care and all common areas during their clinical rotations and eye protection for the situations and procedures as outlined on page 4 of this policy.

Quarantine/Isolation Orders

Once an individual has tested positive for the COVID-19 virus, public health officials begin a process called contact tracing. Laramie County Health is responsible for conducting contact tracing for Laramie County Community College. Once they receive the positive test result from their lab or from the State of Wyoming Health Department, they will call the individual to ask about all close contacts the individual has had in the 48 hours prior to the positive test or the onset of symptoms, if symptoms were present prior to the test. The positive individual will also be sent Health Orders from the State of Wyoming (or the respective state) to remain home, isolating themselves from others for the duration of the order, which can be a period of 10 to 14 days.

Based on the information provided by the COVID-positive individual, the public health official will make the determination of the individuals who meet the definition of close contacts, and who will need to therefore be issued quarantine orders. They will call each individual to notify them of their exposure to COVID-19 due to the close contact which occurred, verify the vaccine status of the exposed individual, and, if unvaccinated, they will advise the affected contacts to remain home, avoiding close contact with others for a period of up to 14 days. They are also issued a stay-at-home quarantine order by the State of Wyoming (or respective state.) An example of a quarantine order is available in the Appendix. Quarantined individuals will also be advised to monitor themselves for COVID symptoms, including recording a temperature reading twice a day. (An example of a symptom monitoring chart is provided in the Appendix.) Vaccinated individuals will also still be advised to wear a face covering and monitor themselves for any COVID-19 symptoms for up to 14 days after the exposure per CDC guidelines. If they develop symptoms, they are advised to contact the public health office and seek medical care if symptoms become severe. Close contacts who become symptomatic are then considered probable cases, and are logged as such, even if no test is conducted. It is important to note that only a Public Health Officer can issue quarantine orders.

The preferred method for student screening if an exposure has occurred is testing for the virus. If testing is available, a period of 7-10 days with temperature and symptom monitoring may still be necessary due to the incubation period of the virus, and this guidance will be provided by the Public Health Officer. If the test is positive, or the student has been issued a quarantine stay-at-home order, the student is not to attend any in-person classes or clinical and the Clinical Coordinator and/or Program Director and the

Dean of Students must be notified. Notification to the Dean of Students may be completed by filing a CARE Team Report with the required documentation or calling 307.778.1223.

Through July 31, 2021, after the Dean of Students verifies the COVID-related illness and/or quarantine order, an Excused Absence email will be sent to all of the faculty of the courses that the student is enrolled in and the associated Academic Dean(s). It is important to note that an Excused Absence issued in this case:

- Applies only to COVID-19. Other illnesses and students waiting for COVID test results will be handled following each program's existing illness and absence policies.
- Starts from the date and time that the Dean of Student's email is sent/received
- Extends for as long as fourteen days (or as long as the isolation or quarantine order is in effect.)
- Does not pre-empt program policies for competency completions and other professional expectations.

Through July 31, 2021 only, if a student has a positive test or has been issued a quarantine order, the student will be excused from all face-to-face clinical and on-campus activities for the duration of the illness/quarantine. If it has been determined that students or faculty members may have been exposed to a positive COVID individual due to positive COVID-19 test results received by the Dean of Students' Office, the Dean of Students' Office and/or HR will contact the affected faculty and students, verify vaccination status, and recommend COVID-19 testing as appropriate. They will also provide information about obtaining and completing a test. (LCCC Dean of Students, 10/21/2020, 6/25/21.)

PLEASE NOTE: Beginning August 1, 2021, the Dean of Students will no longer issue Excused Absences or Excused Absence emails for COVID-19. Contact tracing and COVID-19 testing will still be available for students and faculty, but programs and students are advised that they will be required to follow their published illness and absence policies as outlined in their respective handbooks. (LCCC Dean of Students, 10/21/2020, 6/25/21.)

Students and faculty may return to clinical once the quarantine order expires or when they are symptom-free as follows using CDC guidelines: At least 24 hours have passed since the last fever without the use of fever-reducing medications and improvement in respiratory symptoms (e.g., cough, shortness of breath) **AND** at least 10 days have passed since symptoms first appeared and that no new symptoms consistent with COVID-19 have appeared. An expired quarantine order and/or a physician's note are both acceptable documents to provide to Human Resources (for LCCC employees) or the Dean of Students (for students) to return to campus and/or clinical. LCCC Dean of Students and HR (Melissa Dishman), 6/25/21

Clinical sites may also require this type of documentation in order to resume clinical experiences and/or may require wearing a medical face mask at the site until all respiratory symptoms, if present, have dissipated. In addition, clinical sites may require a letter from the program verifying the student is cleared to return to the clinical setting. In this case, a letter from the Program Director to the clinical site listing the day after the quarantine period has expired will suffice. R2B Plan Phase I and II. www.lccc.wy.edu; <https://www.cdc.gov/coronavirus/2019-ncov/healthcare-facilities/hcp-return-work.html>; Dean of Students and Clinical Correspondence, September 2020.

As outlined in the Health Sciences and Wellness Policy Handbook on page 9, it is highly recommended that students carry their own health insurance. If a student requires treatment, clinical site policy will prevail, and all costs are the responsibility of the student.

If Exposure Occurs Outside the Clinical Setting: If a student has been in close contact with an individual outside of clinical (i.e., a friend or family member) who tests positive for COVID-19, they must answer “yes” to the close contact question on the daily Eagle Health Screening, and report this to the program’s Clinical Coordinator (if applicable), and the Program Director as soon as possible. The Dean of Students must be notified, and the student will not be allowed to participate in in-person activities, clinical, or labs, but synchronous online participation or virtual learning activities should be used as much as possible. In this case, the exposed individual should be contacted by Public Health within 48 hours. If, at the end of 48 hours, no contact has come from the Public Health Office, the student may call the county or State Health Office to determine if the individual they believe they were exposed to is on the list of positive cases. If the answer is “yes,” the Public Health Office will provide the quarantine orders and other instructions at that time. If the answer is “no,” the individual should follow the instructions provided by the public health officer, which may include a full return to in-person activities.

To illustrate the use of quarantine and testing in the event of an exposure occurring due to close contact with a COVID-positive individual, testing for the virus can still be used to clear the student for clinical or class participation. However, the source of the exposure can affect the quarantine period as outlined below:

Vaccinated Individual: Exposure occurs and is NOT considered a healthcare worker exposure	Unvaccinated Individual: Exposure occurs and is NOT considered a healthcare worker exposure and is NOT due to a household member	Unvaccinated Individual: Exposure occurs due to a household member
<p>--Notification provided to appropriate program official or LCCC HR; --No quarantine period required; <i>--Individual will be advised to be tested 3-5 days after the exposure, and to wear a mask in public indoor settings, monitoring themselves for any COVID-19 symptoms for 14 days after the exposure, or until they receive a negative test result per CDC guidelines.</i> (CDC.gov. 8/1/21)</p>	<p>--For on-campus activities: If testing is available, a PCR test may be administered as early as Day 5 after the exposure. If the test is positive, the Public Health orders for a positive test will be followed and the 10-14-day isolation period will be required. If the test is negative, the student may return to campus for in-person activities on Day 8. --For clinical clearance: To be cleared to return to clinical, the clinical site’s required notification and documentation requirements for an exposure and testing must be completed. Please be advised that each clinical agency’s testing and</p>	<p>--If testing is available and the household member is being tested, the student will follow Public Health orders which will typically include quarantine and self-monitor for symptoms until the family member’s test results are available. If the family member’s test results are negative, the student may return to clinical and other in-person activities, providing the necessary documentation to both the Dean of Students and the Program Coordinator/Director for appropriate clearance. --If the family member’s test is positive, the student/faculty member will be required to quarantine for the period of time required by public health officials.</p>

	<p>quarantine policies may be more stringent than LCCC's. Starting August 1, 2021, any absences resulting from COVID-19 exposure and quarantine will be handled following normal illness and absence policies as published in each program's handbook.</p>	<p>(Please note that the 14-day quarantine period of the other household members will start based on whether the infected household member was able to be physically separated from the other household members. If they are not able to physically separate, the quarantine period for household members will not start until the infected individual's symptoms have resolved.)</p> <p>Starting August 1, 2021, any absences resulting from COVID-19 exposure and quarantine will be handled following normal illness and absence policies as published in each program's handbook.</p>
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Programs are advised to also document student self-reported exposures and their results or resolution that may have occurred when LCCC classes were/are not in session.

Laramie County Community College and the School of Health Sciences and Wellness will continue to monitor public health recommendations and the policies of its clinical partners. It is important to note that HSW COVID-19 policies may still be subject to change if COVID-19 cases begin to increase, if public health orders change, and/or based on individual clinical circumstances and resources.

Thank you for your assistance in assuring the health and safety of the LCCC Health Sciences and Wellness community and the patients and stakeholders we serve. Everyone is responsible for containing the spread of the coronavirus by complying and cooperating with all public health orders, public health officer and healthcare provider recommendations regarding their exposure and/or potential exposure, and any contact tracing efforts regarding potential exposure.

RESOURCES

The U.S. Department of Health and Human Services' Centers for Disease Control and Prevention (CDC) provides the latest information about COVID-19 and the global outbreak at:

www.cdc.gov/coronavirus/2019-ncov.

The OSHA COVID-19 webpage offers information specifically for workers and employers at:

www.osha.gov/covid-19.

Laramie County Community College's webpage offers information for LCCC employees and students at

www.lccc.wy.edu/covid.

The State of Wyoming's Public Health Office and Updated Orders for COVID-19 are available at:

<https://health.wyo.gov/publichealth/infectious-disease-epidemiology-unit/disease/novel-coronavirus/>

University of Colorado-Health Coordinator of Education Programs (Anetria Cain):

studentsuhealthnorth@uhealth.org; June 2020, September 2020, **June 2021**, August 2021

Banner Health Western Division Hospitals – Education Systems Notification (myClinical Exchange) June 2020

Iverson Memorial Hospital – Student Pandemic Safety Precautions (Ivan Olson) June 2020, **June 2021**

Cheyenne Regional Medical Center, Occupational Health (Darrallynn Patterson) June 2020

Return2Business Phases I, II, and III; Laramie County Community College; June/July 2020, **September 2020**, **June 2021**.

Laramie County Health, Kasey Mullins, RN, emails, 9/14/2020, 6/30-7/3/21

LCCC Dean of Students Correspondence, September 2020, October 21, 2020, June 25, 2021

LCCC Human Resources (Melissa Dishman) October 2020, June 25, 2021

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/testing-overview.html> (9/21/2020)

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/ppe-strategy/eye-protection.html>.

Cheyenne Regional Medical Group and Cheyenne Regional Physicians Group: email correspondence; 9/10/2020, Occupational Health (Ann Proulx) telephone conversations: 6/20/21, 6/25/21

<https://www.cdc.gov/coronavirus/2019-ncov/php/contact-tracing/contact-tracing-plan/contact-tracing.html> Retrieved September 2020

Understanding How COVID-19 Vaccines Work, cdc.gov. Retrieved 6/3/21;

(<https://www.cdc.gov/coronavirus/2019-ncov/science/science-briefs/masking-science-sars-cov2.html#print> Retrieved 6/17/21)

(<https://www.cdc.gov/coronavirus/2019-ncov/science/science-briefs/sars-cov-2-transmission.html#print>; Retrieved 6/17/21)

<https://health.wyo.gov/publichealth/immunization/wyoming-covid-19-vaccine-information/covidvaccineproviders/covid-19-vaccine-comparison-chart/> Retrieved 6/17/21)

<https://www.nih.gov/news-events/news-releases/nih-clinical-trial-investigational-vaccine-covid-19-begins>. Retrieved 6/25/21

<https://www.cdc.gov/coronavirus/2019-ncov/vaccines/keythingstoknow>, Retrieved 6/25/21

<https://www.cdc.gov/coronavirus/2019-ncov/vaccines/different-vaccines>, Retrieved 6/25/21

APPENDIX A1 – CastleBranch Health Screening and Temperature Monitoring Record (Program-specific use only)

Update your Wellness record

► Instructions

Temperature *

Scale *

Fahrenheit Celsius

Date *



Time *



Ongoing Monitoring Questions require an answer once every 24 hours.

Have you experienced any COVID-19 symptoms? * ?

Yes No

Have you been in close contact with someone who has COVID-19, or has symptoms of COVID-19? * ?

Yes No

Have you been in close contact with someone who has been exposed to COVID-19? * ?

Yes No

Have you traveled around other people? * ?

Yes No

Submit

!021)

COVID-19 Visitor & Employee Self-Screening Form

Note: Employees and Students are intended to answer these questions at home prior to attending campus. Generally a physical copy of this form is not required. It is primarily for reference to the required self-screening questions.

The safety of our employees, students and visitors, remains the college's primary concern. As the coronavirus (COVID-19) outbreak continues to evolve and spread globally, the company is monitoring the situation closely and will periodically update company guidance on current recommendations from the CDC and WHO.

To help prevent the spread of COVID-19 and reduce the potential risk of exposure to our employees and visitors, we are conducting a simple screening questionnaire. Your participation is important to help us take precautionary measures to protect you and everyone in the building.

Thank you for your assistance!

I am a: LOCC Employee Visitor

Contact Information (Visitor only)

Name: Mobile Number:

Email Address: Location:

Employee Details

id #:

Visitor Details

Company Name:

Name of Host:

If you answer yes to any of the following, do not access campus. Contact your supervisor and contact a medical provider.

Do you currently have any of the following?

- | | | |
|----------------------------|----------------------------|--|
| <input type="checkbox"/> Y | <input type="checkbox"/> N | Fever (100.4 Fahrenheit or higher) or feeling feverish? |
| <input type="checkbox"/> Y | <input type="checkbox"/> N | Chills? |
| <input type="checkbox"/> Y | <input type="checkbox"/> N | A new or worsening cough not caused by another health condition? |
| <input type="checkbox"/> Y | <input type="checkbox"/> N | New or worsening difficulty breathing not caused by another health condition? |
| <input type="checkbox"/> Y | <input type="checkbox"/> N | Sore throat? |
| <input type="checkbox"/> Y | <input type="checkbox"/> N | New or worsening muscle aches not caused by another health condition? |
| <input type="checkbox"/> Y | <input type="checkbox"/> N | New or worsening headache that is not normal for you and not caused by another health condition? |
| <input type="checkbox"/> Y | <input type="checkbox"/> N | New loss of sense of taste or smell? |

In the last two weeks, have you had close contact (within 6 feet for at least 10 minutes) with anyone who has been diagnosed with COVID-19?

Y N


Is the information on this form true and correct to the best of your knowledge?

Yes No

APPENDIX B

COVID-19 Vaccination Record Card

Please keep this record card, which includes medical information about the vaccines you have received.
Por favor, guarde esta tarjeta de registro, que incluye información médica sobre las vacunas que ha recibido.



Last Name: [REDACTED] First Name: [REDACTED] MI: [REDACTED]

Date of Birth: [REDACTED] Patient number (medical record or IIS record number): [REDACTED]

Vaccine	Product Name/Manufacturer Lot Number	Date	Healthcare Professional or Clinic Site
1 st Dose COVID-19	MODERNA 04021A	[REDACTED] 21 mm dd yy	Stines
2 nd Dose COVID-19	MODERNA 05051A	[REDACTED] 21 mm dd yy	Stines
Other		____/____/____ mm dd yy	
Other		____/____/____ mm dd yy	

APPENDIX C



APPENDIX D

Public Health Isolation & Quarantine Order

To: _____,

The Wyoming Department of Health has reasonable cause to believe that you may have been exposed to a communicable disease that affects the public health: Coronavirus Disease 19 (COVID-19).

Under the authority of Wyoming Statutes §§ 35-1-240(a)(ii) and (iii) and as necessary for the protection of the public health, you are hereby ordered to implement the following isolation and quarantine measures effective immediately:

1. You shall remain at your home located at _____, Anytown WY 8____. You may leave only to seek medical care or to spend time outside on the property as long as you distance yourself from others.
2. You shall not have close, prolonged contact with others. Close, prolonged contact is defined as being within six (6) feet of others for greater than ten (15) minutes.
3. You shall notify the Wyoming Department of Health if you develop signs or symptoms of Coronavirus Disease 19 (COVID-19) (fever, cough, shortness of breath, or sore throat).

If you do not comply with this Order, you may be subject to criminal prosecution under Wyoming Statutes §§ 35-1-105 and -106.

This Order will be effective for 14 days after the date of your last contact with an infected individual. This Order will be effective until the 16th day of September, 2020. When this order expires, you may return to work and resume normal activities.

Any questions regarding this Order may be directed to Dr. Alexia Harrist at (307)

-777-7716. Done this ___ day of _____, 2020.

APPENDIX C

APPENDIX E

14-Day Symptom Monitoring Sheet, Days 1–7

Name: _____ Age (years): _____ Sex: M F

Date of last exposure (mm/dd/yyyy): _____ Last date of monitoring: _____

Take your temperature twice a day, in the morning and in the evening, and write it down. Mark if you have any of the symptoms: circle "Y" for Yes and "N" for No. **Do not leave any spaces blank.**

If you have a fever (100.0° F or above) or any symptom, **seek prompt medical attention.** Before seeking care, call your healthcare provider and tell them that you may have been exposed to novel coronavirus. Put on a facemask before you enter the facility. These steps will help the healthcare provider's office to keep other people from getting infected or exposed. Ask your healthcare provider to call the local or state health department. **If you need emergency medical care call 911** and be sure to tell them you may have been exposed to 2019-nCoV.

Day # (from last exposure)	1		2		3		4		5		6		7	
Date														
AM or PM	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM
Temperature														
Felt feverish	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N
Cough	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N
Sore throat	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N
Difficulty breathing	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N
Shortness of breath	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N
Muscle aches	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N
Headache	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N
Abdominal discomfort	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N
Vomiting	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N
Diarrhea	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N