AIRBORNE INFECTIONOUS DISEASE EXPOSURE PREVENTION PLAN

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2. Introduction

   On May 5, 2021, Governor Andrew Cuomo signed the New York Health and Essential Rights Act (NY HERO Act) into law. The purpose of the NY HERO Act and this Airborne Infectious Disease Exposure Prevention Plan is to protect employees against exposure and disease during an airborne infectious disease outbreak. This plan goes into effect when an airborne infectious disease is designated by the New York State Commissioner of Health as a highly contagious communicable disease that presents a serious risk of harm to the public health. This plan is subject to any additional or greater requirements arising from a declaration of a state of emergency due to an airborne infectious disease, as well as any applicable federal standards.

3. Responsibilities

   This plan applies to all Hamilton College facilities in New York State. This plan requires commitment to ensure compliance with all plan elements aimed at preventing the spread of infectious disease. The Hamilton College Crisis Management Team is designated to enforce compliance with the plan, and includes the individuals noted below:

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
<th>Email</th>
<th>Phone</th>
</tr>
</thead>
<tbody>
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</table>
4. Exposure Controls during a Designated Outbreak

A. Minimum Controls during an Outbreak:
During an airborne infectious disease outbreak, the following minimum controls will be used in all areas of the worksite:

- **General Awareness:** Individuals may not be aware that they have the infectious disease and can spread it to others. Employees should remember to:
  - Maintain physical distancing;
  - Exercise coughing/sneezing etiquette;
  - Wear face coverings, gloves, and personal protective equipment (PPE), as appropriate;
  - Individuals limit what they touch;
  - Stop social etiquette behaviors such as hugging and hand shaking, and
  - Wash hands properly and often.

- **“Stay at Home Policy”:** If an employee develops symptoms of the infectious disease, the employee should not be in the workplace. The employee should inform their supervisor and Human Resources and follow New York State Department of Health (NYSDOH) and Centers for Disease Control and Prevention (CDC) guidance regarding obtaining medical care and isolating.

- **Health Screening:** Employees will be screened for symptoms of the infectious disease at the beginning of their shift. Employees are to self-monitor throughout their shift and report any new or emerging signs or symptoms of the infectious disease to the designated contact. An employee showing signs or symptoms of the infectious disease should be removed from the workplace and should contact a healthcare professional for instructions. The health screening elements will follow guidance from NYSDOH and CDC guidance, if available. Recommendations from the health and medical professionals affiliated with the Mohawk Valley Health System and the Oneida County Health Department will also be taken into consideration.

- **Face Coverings:** To protect your coworkers, employees will wear face coverings throughout the workday to the greatest extent possible. Face coverings and physical distancing should be used together whenever possible. The face covering must meet CDC guidelines, cover the nose and mouth, and fit snugly, but comfortably, against the face. The face covering itself must not create a hazard, e.g. have features that could get caught in machinery or cause severe fogging of eyewear. The face coverings must be kept clean and sanitary and changed when soiled, contaminated, or damaged.

- **Physical Distancing:** Physical distancing will be followed as much as feasible. Avoid unnecessary gatherings and maintain a distance of at least six feet (or as recommended by the NYSDOH/CDC for the infectious agent) from each other. Use a face covering when physical distance cannot be maintained. In situations where prolonged close contact with other individuals is likely, use the following control methods:
  - restricting or limiting visitor entry;
  - limiting occupancy;
  - allowing only one person at a time inside small enclosed spaces with poor ventilation;
  - reconfiguring workspaces;
  - physical barriers;
  - signage;
  - floor markings;
  - telecommuting;
  - remote meetings;
  - preventing gatherings;
  - restricting personal and work-related travel;
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- creating new work shifts and/or staggering work hours;
- adjusting break times and lunch periods;
- delivering services remotely or through curb-side pickup;

- **Hand Hygiene:** To prevent the spread of infection, employees should wash hands with soap and water for at least 20 seconds or use a hand sanitizer with at least 60% alcohol to clean hands BEFORE and AFTER:
  - Touching your eyes, nose, or mouth;
  - Touching your mask;
  - Entering and leaving a public place; and
  - Touching an item or surface that may be frequently touched by other people, such as door handles, tables, or screens.
    - Note—because hand sanitizers are less effective on soiled hands, wash hands rather than using hand sanitizer when your hands are soiled.

- **Cleaning and Disinfection:** See Section 5 of this plan.

- **“Respiratory Etiquette”:** Because infectious diseases can be spread by droplets expelled from the mouth and nose, employees should exercise appropriate respiratory etiquette by covering nose and mouth when sneezing, coughing, or yawning.

- **Special Accommodations for Individuals with Added Risk Factors:** Some employees, due to age, underlying health condition, or other factors, may be at increased risk of severe illness if infected. Please inform your supervisor and Human Resources if you fall within this group so that an individualized plan to continue working remotely can be developed or so other accommodations can be made if you are an essential employee.

**B. Advanced Controls During an Outbreak**

For activities where the Minimum Controls alone will not provide sufficient protection for employees, additional controls from the following hierarchy may be necessary. Employers should determine if the following are necessary, and implement in order of effectiveness.

- **Elimination & Substitution Controls:** Employers should consider the temporary suspension or elimination of risky activities where adequate controls could not provide sufficient protection for employees. Examples include:
  - Limiting or eliminating in-person learning;
  - Limiting gatherings by location (outdoors) and scale;
  - Limiting or eliminating in-person recreational and/or sporting events;
  - Limiting or restricting access to campus to authorized employees and students only
  - Limiting or eliminating personal and College-related travel.

- **Engineering Controls:** Employers should consider appropriate controls to contain and/or remove the infectious agent, prevent the agent from being spread, or isolate the worker from the infectious agent. Engineering controls are favored over administrative and personal protective equipment (PPE) for controlling existing worker exposures in the workplace because they are designed to remove the hazard at the source, before it comes in contact with the worker. Examples of engineering controls include:
  - Mechanical ventilation such as local exhaust ventilation, for example:
    - Local duct
  - General ventilation, for example:
    - Increasing the percentage of fresh air introduced into air handling systems;
    - Avoiding air recirculation;
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- Utilize air filters with rating of Minimum Efficiency Reporting Value (MERV) 13 or higher, if compatible with the HVAC system(s). If MERV–13 or higher filters are not compatible with the HVAC system(s), use filters with the highest compatible filtering efficiency for the HVAC system(s);
- If fans are used in the facility, arrange them so that air does not blow directly from one worker to another. Remove personal fans as necessary but keep heat hazards in mind and address in other methods if appropriate; and
  - Air purifiers.
    - Natural ventilation, for example:
      - Opening outside windows and doors; and
      - Opening windows on one side of the room to let fresh air in and installing window exhaust fans on the opposite side of the room so that they exhaust air outdoors.
    - Automatic disinfection systems such as ultraviolet light disinfection systems.
    - Install cleanable barriers such as partitions and clear plastic sneeze/cough guards.
    - Establish entry to building protocols that are contactless.
    - Install hand washing or sanitizing stations throughout facility.

Subject to changes based on operations and circumstances surrounding the infectious disease, engineering controls that are anticipated to be used at Hamilton are listed below:

<table>
<thead>
<tr>
<th>Engineering Controls Utilized</th>
<th>Examples</th>
</tr>
</thead>
</table>
| 1. Implementation of ventilation system enhancements. | • In buildings with central HVAC systems, heighten air exchange rates up to and including 100% outside air when/where feasible  
• In buildings whose central HVAC system cannot be upgraded to MERV-13* filtration, and/or for buildings without HVAC systems at all, deploy stand-alone air purifiers with HEPA filtration |

*The following Hamilton College buildings are currently equipped with MERV-13 filtration or better:  
- **Academic buildings**—Burke Library, Kirner-Johnson Building, List Center, Kennedy Center, Schambach Music Center, Taylor Science Center, Wellin Museum  
- **Athletic buildings**—Sage Rink, Alumni Gymnasium, Blood Fitness Center, New Field House  
- **Student activity buildings**—Bristol Center, Beinecke SAV, Tolles Pavilion, Sadove Student Center (partially)  
- **Administrative buildings**—Siuda House, Spencer House, Johnson Center

| 2. Installation of cleanable barriers such as partitions and clear plastic sneeze/cough guards. | • “High traffic points of service” on campus, including but not limited to:  
  o Registrar’s office, Campus Safety, Mail Center, Student Health Services, LITS Help Desk, select food service stations, etc.  
  o Employee offices (including student employees) where they are not partitioned from traffic by closable doors or cubicles |

| 3. Installation of hand sanitizer stations to supplement bathroom hand washing. | • Building entrances and hallways, outside elevators, inside classrooms, laboratories and studios |
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4. **Utilization of ultraviolet light disinfection systems.**
   - Student Health Center exam rooms, isolation rooms, N95 decontamination

- **Administrative Controls:** Administrative controls are policies and work rules used to prevent exposure. They are frequently used with existing processes where hazards are not particularly well controlled. Examples include:
  - Increasing the space between employees and students;
  - Disinfecting procedures for specific operations;
  - Employee (and student) training;
  - Identify and prioritize job functions that are essential for continuous operations;
  - Cross-train employees to ensure critical operations can continue during worker absence;
  - Limit the use of shared workstations;
  - Close break rooms;
  - Prohibiting eating and drinking in the work area;
  - Do not utilize drinking fountains;
  - Post signs reminding of respiratory etiquette, masks, hand hygiene;
  - Rearrange traffic flow to allow for one-way walking paths;
  - Provide clearly designated entrance and exits;
  - Provide additional short breaks for handwashing and cleaning;
  - Establishing pods or cohorts of staff and students to limit exposure;
  - Minimize elevator use, post signage of limitations;
  - Increase time between classes to allow for cleaning and ventilation;
  - Utilize remote learning methods;
  - Require health screening of employees and students upon entry to facilities; and
  - Limit attendance of in-person meetings and host the meetings outdoors or electronically instead.

Subject to changes based on operations and circumstances surrounding the infectious disease, the following specific administrative controls are anticipated to be used across all Hamilton facilities:

<table>
<thead>
<tr>
<th>Administrative Controls Utilized</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Increase the space between employees and students.</td>
</tr>
<tr>
<td>2. Establish disinfecting procedures for specific operations such as between classes, use of shared resources and events.</td>
</tr>
<tr>
<td>3. Provide employee training and frequent communication when updates in policies and procedures are made.</td>
</tr>
<tr>
<td>4. Identify and prioritize job functions that are essential for continuous operations.</td>
</tr>
<tr>
<td>5. Cross-train employees to ensure critical operations can continue during worker absence.</td>
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<tr>
<td>6. Consider remote work rotations and alternative schedules (ex. staggered work shifts, breaks, lunches) to limit the number of people in the office at any one time.</td>
</tr>
<tr>
<td>7. Limit the use of shared workstations.</td>
</tr>
<tr>
<td>9. Reduce maximum allowable occupancies in classrooms, shared offices, restrooms, breakrooms and conference rooms to support social distancing.</td>
</tr>
<tr>
<td>10. Only utilize bottle fill station portion of drinking fountains.</td>
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<tr>
<td>11. Post signs reminding individuals of College policies on topics such as respiratory etiquette, masks, hand hygiene, health screening, social distancing, modified occupancy limits, etc.</td>
</tr>
<tr>
<td>12. Post signs on floor indicating social distancing markings for areas where congregation take place.</td>
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</tbody>
</table>
13. Rearrange traffic flow to allow for one-way walking paths in narrow passageways and areas of high congestion.

14. Minimize elevator use and post signage with limitations.

15. Increase time between classes to allow for cleaning and ventilation.

16. Utilize remote and hybrid learning methods.

17. Require health screening of employees, students, and visitors upon entry to facilities.

18. Document attendance and assigned seats during classes and events.

19. Limit attendance of in-person meetings and host meetings outdoors or electronically, such as via Zoom, instead.

- **Personal Protective Equipment (PPE):** Personal protective equipment (PPE) are devices like eye protection, face shields, respirators, and gloves that protect the wearer from infection. PPE will be provided, used and maintained in a sanitary and reliable condition at no cost to the employee. The PPE provided to Hamilton employees will be based on a hazard assessment for the workplace, and appropriate information and training will be provided on when specific PPE is required to be worn, how to properly don and doff the PPE and how to properly maintain the PPE. The following PPE that are anticipated to be used are in the following table:

<table>
<thead>
<tr>
<th>PPE Required</th>
<th>Activity Involved</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Face coverings</td>
<td>• Deployed to the general community (types dependent upon guidance) when the primary goal is limit the spread of expiratory aerosols and droplets to protect others.</td>
</tr>
<tr>
<td>2. Face shields plus safety glasses,</td>
<td>• Treatment of positive or symptomatic individuals (Student Health Center).</td>
</tr>
<tr>
<td>or safety goggles</td>
<td>• Surveillance testing.</td>
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<tr>
<td></td>
<td>• Cleaning and disinfecting of areas with positive or symptomatic individuals (Student Health Center, Custodial Services).</td>
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<tr>
<td></td>
<td>• Conducting emergency maintenance in an area containing positive or symptomatic individuals (Maintenance).</td>
</tr>
<tr>
<td>3. KN95 respirators</td>
<td>• Deployed to the general community when the goal is to both limit the spread of expiratory aerosols and droplets to protect others, and to provide some level of respiratory protection to the user (at levels and exposures that fall outside of inclusion in Hamilton’s respiratory protection program).</td>
</tr>
<tr>
<td>4. N95 respirators</td>
<td>• Generally deployed only to those who require respiratory protection and full inclusion in Hamilton’s respiratory protection program, including:</td>
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<tr>
<td></td>
<td>o Treatment of positive or symptomatic individuals (Student Health Center)</td>
</tr>
<tr>
<td></td>
<td>o Evaluation of symptomatic individuals (Student Health Center, HCEMS)</td>
</tr>
<tr>
<td></td>
<td>o Transport of symptomatic individuals (Campus Safety)</td>
</tr>
<tr>
<td></td>
<td>o Cleaning and disinfecting of areas with positive or symptomatic individuals (Student Health Center,</td>
</tr>
</tbody>
</table>
### Custodial Services, including the use of the Clorox 360 mister
- Conducting emergency maintenance in an area containing positive or symptomatic individuals (Maintenance)

### 5. Surgical gloves
- Treatment of positive or symptomatic individuals (Student Health Center)
- Surveillance testing
- Cleaning and disinfecting of areas with positive or symptomatic individuals (Student Health Center, Custodial Services)
- Handling of waste from a positive or symptomatic individuals

### 6. Gowns
- Treatment of positive or symptomatic individuals (Student Health Center)
- Surveillance testing
- Cleaning and disinfecting of areas with positive or symptomatic individuals (Student Health Center, Custodial Services)

### C. Exposure Control Readiness, Maintenance and Storage
The controls Hamilton has selected will be obtained, properly stored, and maintained so that they are ready for immediate use in the event of an infectious disease outbreak and any applicable expiration dates will be properly considered.

### 5. Housekeeping During a Designated Outbreak

#### A. Disinfection Methods and Schedules
Regular cleaning and disinfecting, as prescribed by building occupancies and functions, will continue to be carried out by custodial staff, but in collaboration with building occupants, using an appropriate disinfectant. Custodial staff priorities have been adjusted to provide for more frequent cleaning and disinfecting of high-traffic areas and objects that are touched repeatedly by multiple individuals. Surfaces that are handled less often, or by fewer individuals, may require less frequent disinfection.

- **Examples of high-traffic areas include:**
  - Building entrances
  - Hallways
  - Stairwells
  - Restrooms
  - Elevators
  - Classrooms, lounges and meeting spaces
  - Dining areas

- **Examples of objects that are touched repeatedly by multiple individuals include:**
  - Door handles
  - Light switches
  - Control buttons/levers
  - Dials
  - Levers
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- Restroom fixtures (ex. water faucet handles, partitions, toilet paper/paper towel dispensers)
- Computers
- Phones
- Handrails
- ADA handicap door push plates
- Water fountains and bottle filling stations
- University vehicles
- Shared maintenance tools and equipment

The disinfection methods and schedules selected are based on specific workplace conditions. The New York State Department of Environmental Conservation (NYSDEC) and the Environmental Protection Agency (EPA) have compiled lists of approved disinfectants that are effective against many infectious agents (see www.dec.ny.gov and www.epa.gov/pesticide-registration/selected-epa-registered-disinfectants). Disinfectants will be selected based on NYSDOH and CDC guidance and will follow manufacturer guidance for methods, dilution, use, and contact time.

B. Adjustments to Normal Housekeeping Procedures

Normal housekeeping duties and schedules should continue to be followed during an infectious disease outbreak, to the extent practicable and appropriate consistent with NYSDOH and/or CDC guidance in effect at the time. However, routine procedures may need to be adjusted and additional cleaning and disinfecting may be required. Custodial staff may be at increased risk because they may be cleaning many potentially contaminated surfaces. Some custodial activities, like dry sweeping, vacuuming, and dusting, can resuspend into the air particles that are contaminated with the infectious agent. For that reason, alternative methods and/or increased levels of protection may be needed. Rather than dusting, for example, the CDC recommends cleaning surfaces with soap and water before disinfecting them. Conducting housekeeping during “off” hours may also reduce other workers’ exposures to the infectious agent. Best practice dictates that housekeepers should wear respiratory protection. See www.cdc.gov for more guidance.

As feasible, liners should be used in trash containers. Empty the containers often enough to prevent overfilling. Do not forcefully squeeze the air out of the trash bags before tying them closed. Trash containers may contain soiled tissue or face coverings.

C. Housekeeping Procedures for Areas with Symptomatic Individuals

If an individual develops symptoms of the infectious disease at Hamilton, it is ideal to isolate the area in accordance with guidance issued by NYSDOH or the CDC, before cleaning and disinfecting the sick individual’s impacted area. This delay will allow contaminated droplets to settle out of the air and the space to be ventilated.

6. Infection Response During a Designated Outbreak

If an actual, or suspected, infectious disease case occurs at Hamilton, take the following actions:

- Instruct the sick individual to wear a face covering and leave the worksite and follow NYSDOH/CDC guidance.
  - Students will be assessed (in person or electronically, such as via Zoom, if appropriate) to determine the need for further medical evaluation and treatment.
- Follow local and state authority guidance to inform impacted individuals.

7. Training and Information During a Designated Outbreak
Human Resources will verbally inform all employees of the existence and location of this Plan, the circumstances it can be activated, the infectious disease standard, applicable Hamilton College policies, and employee rights under the HERO Act.

When this plan is activated, all personnel will receive training that will cover all elements of this plan and the following topics:

- The infectious agent and the disease(s) it can cause;
- The signs and symptoms of the disease;
- How the disease can be spread;
- An explanation of this Exposure Prevention Plan;
- The activities and locations at Hamilton that may involve exposure to the infectious agent;
- The use and limitations of exposure controls; and
- A review of the standard, including employee rights provided under Labor Law, Section 218-B.

The training will be:

- Provided at no cost to employees and take place during working hours. If training during normal work hours is not possible, employees will be compensated for the training time (with pay or time off);
- Appropriate in content and vocabulary to your educational level, literacy, and preferred language; and
- Verbally provided in person or through telephonic, electronic, or other means.

8. Plan Evaluations During a Designated Outbreak

Hamilton College will review and revise the plan periodically, upon activation of the plan, and as often as needed to keep up-to-date with current requirements. The plan’s revisions can be viewed below:

<table>
<thead>
<tr>
<th>Plan Revision History</th>
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<td>Date</td>
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9. Retaliation Protections and Reporting of Any Violations

Hamilton College shall not discriminate, threaten, retaliate against, or take adverse action against any employee for exercising their rights under this plan, including reporting conduct the employee reasonably believes in good faith violates the plan or airborne infectious disease concerns to their employer, government agencies or officials or for refusing to work where an employee reasonably believes in good faith that such work exposes him or her, other workers, or the public to an unreasonable risk of exposure, provided the employee, another employee, or representative has notified the employer verbally or in writing, including electronic communication, of the inconsistent working conditions and the employer’s failure to cure or if the employer knew or should have known of the consistent working conditions.

Notification of a violation by an employee may be made verbally or in writing, and without limitation to format including electronic communications. To the extent that communications between Hamilton and the employee regarding a potential risk of exposure are in writing, they shall be maintained by Hamilton College for two years after the conclusion of the designation of a high risk disease from the
Commissioner of Health, or two years after the conclusion of the Governor’s emergency declaration of a high risk disease. Contact points to report violations of this plan and/or retaliation are as follows:

- **During Regular Business Hours:**
  - Human Resources—315-859-4302
- **Weekends/other Non-regular Business Hours:**
  - [Ethics Point](#) on-line reporting tool