



**NY HERO ACT
Airborne Infectious Disease
Exposure Prevention Plan
August 5, 2021; Updated September 17, 2021**

The purpose of this 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.

Employees should report any questions or concerns with the implementation this plan to the designated contact.

This plan applies to all “employees” as defined by the New York State HERO Act, which means any person providing labor or services for remuneration for a private entity or business within the state, without regard to an individual’s immigration status, and shall include part-time workers, independent contractors, domestic workers, home care and personal care workers, day laborers, farmworkers and other temporary and seasonal workers. The term also includes individuals working for digital applications or platforms, staffing agencies, contractors or subcontractors on behalf of the employer at any individual work site, as well as any individual delivering goods or transporting people at, to or from the work site on behalf of the employer, regardless of whether delivery or transport is conducted by an individual or entity that would otherwise be deemed an employer under this chapter. The term does not include employees or independent contractors of the state, any political subdivision of the state, a public authority, or any other governmental agency or instrumentality.

As of the date of the initial publication of this document, while the State continues to deal with COVID-19 and a risk still exists, no designation was in effect. On September 6, 2021, the State announced that COVID-19 is an Airborne Infectious Disease under the Hero Act. Please check the websites of Departments of Health and Labor for up to date information on whether a designation has been put into effect, as any such designation will be prominently displayed. No employer is required to put a plan into effect absent such a designation by the Commissioner of Health.

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I. RESPONSIBILITIES

This plan applies to all employees of Niagara University, and:

Sites currently located in Niagara County. Niagara University previously adopted the Forward Niagara plan in response to the COVID-19 pandemic and intends to leverage components of that plan if a designated airborne infectious disease outbreak occurs. In addition, Niagara University utilizes an Emergency Response Plan and a Crisis Response Team to respond to incidents including a pandemic. These resources will be utilized to manage an outbreak of an airborne infectious disease.

This plan requires commitment to ensure compliance with all plan elements aimed at preventing the spread of infectious disease. The following supervisory employee(s) are designated to enforce compliance with the plan. Additionally, these supervisory employees will act as the designated contacts unless otherwise noted in this plan:

Name	Title	Location	Phone
Debra Colley	Executive Vice President and Emergency Director	Alumni Hall	(716) 286-8359
Robert Morreale	Chief Financial & Innovation Officer and Assistant Emergency Director	Alumni Hall	(716) 286-8344
John Barker	Director of Campus Safety and Emergency Coordinator	Campus Safety Building	(716) 286-8220
Derek Puff	Director of Recreation, Intramural & Club Sports and Alternate Emergency Coordinator	Kiernan Center	(716) 286- 8659

II. 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 the designated contact 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.

4. **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 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 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.
5. **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 customer or 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 travel;
 - creating new work shifts and/or staggering work hours;
 - adjusting break times and lunch periods;
 - delivering services remotely or through curbside pickup;
6. **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, gas pumps, shopping carts, or electronic cashier registers/screens.Because hand sanitizers are less effective on soiled hands, wash hands rather than using hand sanitizer when your hands are soiled.
 7. **Cleaning and Disinfection:** See Section V of this plan.
 8. **“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.
 9. **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 or the HR department if you fall within this group and need an accommodation.

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:

1. Elimination: Employers should consider the temporary suspension or elimination of risky activities where adequate controls could not provide sufficient protection for employees. Examples include:
 1. Limiting or eliminating in-person learning,
 2. Limiting gatherings by location (outdoors), and scale
 3. Limiting or eliminating in-person recreational and/or sporting events.
2. 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. Examples of engineering controls include:
 - Mechanical Ventilation such as local exhaust ventilation, for example:
 - Local duct.
 - a. General Ventilation, for example:
 - Increasing the percentage of fresh air introduced into air handling systems;
 - Avoiding air recirculation;
 - 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.
3. 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 are listed in the following table:

Engineering Controls Utilized/Location:
Dining always matters in the Russell Salvatore Dining Commons, the Gallagher Center, and through catering. Innovative opportunities to ensure safety protocols for dining venues, grab-and-go options, distancing protocols (e.g., 6 ft. taping and floor decals for entering and exiting), and cleaning procedures will ensure that we support our campus community with ample food and meals. Additional stations will be added to high usage venues, e.g., Tim Hortons.
Cutting-edge technology will be deployed to support real-time communication. Effective campus navigation and digital information will be augmented through automated reality technology to disseminate distancing protocols and occupancy status (e.g., upon entry/exit, occupancy in dining commons, stairwells, hallways, and elevator occupancy). This technology is AReverywhere technology and is a mobile application (scanned codes) with video links for the movement of people into and out of each building on our campus and provides real-time updates on occupancy levels.
Our library leadership and staff will ensure access and extended support from the university library. Research and teaching support, use of digital collections, and the health of library patrons and employees will elevate the needs of an academic community with degree levels which extend to graduate and doctoral study and provide a robust and safe approach to this valued resource.
<i>Note to Employer: One of the best ways to reduce exposure to infectious agents is to improve ventilation. The aim is to deliver more “clean air” into an occupied area and exhaust the contaminated air to a safe location. In some cases, the air may have to be filtered before it enters the work area and/or before it is exhausted. Direct the contaminated air away from other individuals and from the building’s fresh air intake ports. Consult your ventilation system’s manufacturer or service company to determine if improvements are possible for your system.</i>

4. “Administrative Controls” are policies and work rules used to prevent exposure. Examples include:

- Increasing the space between employees and students;
- Disinfecting procedures for specific operations;
- Employee 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 students upon entry to facilities; and
- Limit attendance of in-person meetings. Host the meetings outdoors or electronically.

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

Administrative Controls Utilized/Location:

- Face-to-face [classrooms](#) may be structured and assigned in compliance with CDC and professional organization COVID-19 guidelines. This may include 6 ft. distancing, taping and floor decals (including in elevators).
- Access into classroom buildings may be managed with specific directions to direct the flow of students and faculty with specified entrances and “up” stairwells, and specific exits and “down” stairwells. Taping, floor decals and use of the AReverywhere technology (real-time updates on distancing, directional use - includes elevators, hallways, entrances, among other spaces).
- Informal learning space on campus (Lower Level Gallagher, the library, study spaces in the Academic Complex, St. Vincent Hall, and Bisgrove) may be re-designed to promote social distancing, and will require each individual to exhibit appropriate behavior as defined by the CDC or New York State Department of Health. Please see the plan submitted by the library as a guiding document for all non-classroom learning spaces on our campus.
- We may implement a preference for single-occupancy residential arrangements. [While providing for safe common environments](#), each student in traditional residence halls will be provided individual living quarters either in existing residences or in off-campus housing (staff and administrative on-site). Choices for double occupancy will be based on health and safety protocols. Distancing protocols will be in place in common areas of the resident halls, including restrooms.
- Models of service through the IMPACT office will continue only through Impact Connects for remote, customized projects (fall semester).
- Enhanced virtual programming and traditional programming that maintains COVID-19 compliance will be available. This includes new and challenging modalities for initiatives of student clubs and organizations.
- Niagara’s great athletic tradition will be ensured through restructured athletic facilities and modifications [to training, travel, and competition protocols to](#) emphasize the health and safety of our scholar-athletes.
- New and exciting virtual career fairs and hybridized and remote internships will be developed with the cooperation of our business and education partners.
- Training will be developed and implemented for all members of the university community to ensure understanding of general guidelines and specific regulations for maintaining a healthy environment. Students will live and interact in myriad ways and locations, and they must understand their personal responsibility for the common good.
- We will ensure attention to appropriate arrangements for those who are vulnerable. Physical, mental, and emotional needs will be met with appropriate measures from across student services.
- The Office of Health Services will adapt student support services like telehealth and telecounseling. Technology will be acquired and protocols established to provide tele services in keeping with national requirements. It is expected that additional personnel will be needed for counseling based on need.
- Upgraded cleaning and sanitation protocols may be implemented through UG2 (Niagara’s cleaning company). All residence halls, student gathering spaces, co-curricular venues, and common areas may be subject to upgraded and comprehensive cleaning, hygiene and disinfection protocols when warranted.

5. 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 an employee will be based on a hazard assessment for the workplace. The following PPE that are anticipated to be used are in the following table:

PPE Required -Activity Involved/Location:
<ul style="list-style-type: none"> • hand sanitizer (individual, office, stations in common space). • masks (cloth, N95, surgical, or clear). • pulse-oximeters (athletics). • gloves, face shields, and gowns (health services); • infrared temperature scanners. • Lab coats and lab-specific equipment.
Niagara University will purchase and stockpile sufficient quantities for each category and monitor use.
Personal Protective Equipment, as defined by the CDC and/or NYS Department of Health, and will be required of all faculty and students if teaching/learning in a traditional classroom environment, which will include (at a minimum) acceptable face coverings and hand sanitizer.
<p><i>1 The use of respiratory protection, e.g. an N95 filtering facepiece respirator, requires compliance with the OSHA Respiratory Protection Standard 29 CFR 1910.134 or temporary respiratory protection requirements OSHA allows for during the infectious disease outbreak.</i></p> <p><i>2 Respirators with exhalation valves will release exhaled droplets from the respirators. Respirators are designed to protect the wearer. Surgical masks and face coverings, which are not respirators, are designed to protect others, not the wearer.</i></p>

C. EXPOSURE CONTROL READINESS, MAINTENANCE AND STORAGE:

The controls we have 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.

III. HOUSEKEEPING DURING A DESIGNATED OUTBREAK

A. Disinfection Methods and Schedules

Objects that are touched repeatedly by multiple individuals, such as door handles, light switches, control buttons/levers, dials, levers, water faucet handles, computers, phones, or handrails must be cleaned frequently with an appropriate disinfectant. Surfaces that are handled less often, or by fewer individuals, may require less frequent disinfection.

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 dec.ny.gov and epa.gov/pesticide-registration/selected-epa-registered-disinfectants). Select disinfectants based on NYSDOH and CDC guidance and 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.

Housekeeping staff may be at increased risk because they may be cleaning many potentially contaminated surfaces. Some housekeeping 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 cdc.gov for more guidance.

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

IV. INFECTION RESPONSE DURING A DESIGNATED OUTBREAK

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

- Instruct the sick individual to wear a face covering and leave the worksite and follow NYSDOH/CDC guidance.
- Follow local and state authority guidance to inform impacted individuals.

V. TRAINING AND INFORMATION DURING A DESIGNATED OUTBREAK

- A. The Emergency Director (Executive Vice President) will verbally inform all employees of the existence and location of this Plan, the circumstances it can be activated, the infectious disease standard, employer policies, and employee rights under the HERO Act. (Note: training need not be provided to the following individuals: any individuals working for staffing agencies, contractors or subcontractors on behalf of the employer at any individual work site, as well as any individual delivering goods or transporting people at, to or from the work site on behalf of the employer, where delivery or transport is conducted by an individual or entity that would otherwise be deemed an employer under this chapter)

VII. RETALIATION PROTECTIONS AND REPORTING OF ANY VIOLATIONS

No employer, or his or her agent, or person, , acting as or on behalf of a hiring entity, or the officer or agent of any entity, business, corporation, partnership, or limited liability company, shall 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 the employer and employee regarding a potential risk of exposure are in writing, they shall be maintained by the employer 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. Employer should include contact information to report violations of this plan and retaliation during regular business hours and for weekends/other non-regular business hours when employees may be working.

