Consistent with the OUHSC COVID-19 Return Plan, the College of Medicine (COM) regularly evaluates its Return to Service (RTS) Plan and implements new or revised requirements for return when indicated. Revised versions of this RTS Plan will be distributed to appropriate COM students and employees and posted on the COM and department websites, if possible. This RTS Plan applies to all COM employees and students, which includes residents and trainees and, for purposes of this Plan, volunteers. As the nature of COVID-19 remains dynamic, the members of the Specific Pathogens Preparedness Operations Team (SPPOT) and the OUHSC Emergency Operations Committee (EOC) will regularly evaluate the COVID-19 Return Plan and implement new or revised requirements for return when indicated. Revised versions of this Plan will be distributed to appropriate campus groups and posted on the HSC COVID-19 Updates and Resources page: https://www.ouhsc.edu/coronavirus, also accessible from the OUHSC home page.

It includes the following sections:

I. Telecommuting
II. Reopening Common Areas, Resuming Services, & Returning Employees to Campus
III. Social Distancing and Gatherings
IV. Masks and Protective Eyewear
V. Building Access and Amenities
VI. Sanitizing Facilities and Equipment
VII. Testing, Isolation, and Contact Tracing
VIII. Monitoring Workforce and Visitors for COVID-19 Symptoms
IX. Travel
X. Training
XI. Research, Patient Care, Academics
XII. Enforcement

I. **Telecommuting in Response to COVID-19: Phase-Out**

The Health Sciences Center campus has encouraged telecommuting where possible, since early 2020 as a mitigation strategy to minimize the risk of spread of COVID-19. With the wide availability of COVID-19 vaccines and the demonstrated effectiveness of other COVID-19 mitigation protocols on and off campus, in conjunction with the recommendations of infectious diseases and public health officials, telecommuting in HSC-based programs and areas will be phased out as described below.

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1 Substantive changes require the approval of the SPPOT/EOC Exec

2 If an employee or student indicates compliance with a provision of this Plan is not possible due to medical reasons, the individual should be referred to the appropriate University office to request accommodations on the basis of disability office (Human Resources for employees; Accessibility & Disability Resource Center for students).

3 Effective June 18, 2020, revisions to this Plan will be documented on the last page. Substantive changes require the approval of the Chief COVID Officer, as well.
A. **Telecommuting Phase-Out Schedule** – Telecommuting arrangements that were put into place as a COVID-19 mitigation or accommodation measure are to be phased out as follows:

1. By June 2, 2021, at least 50% of the program’s/area’s workforce will have resumed their regular (pre-COVID) schedule on campus.
2. By July 1, 2021, at least 75% of the program’s/area’s workforce will have resumed their regular (pre-COVID) schedule on campus.
3. By August 1, 2021, 100% of the program’s/area’s workforce will have resumed their regular (pre-COVID) schedule on campus.

B. **Guidelines** - Telecommuting for purposes unrelated to COVID-19 that is otherwise consistent with the University’s guidelines is not affected by this telecommuting phase-out schedule. The current guidelines are available [here](#).

C. **Staffing Plans** – During the telecommuting phase-out period, each college dean and area vice president (or their designees) will determine the telecommuting phase-in plan for their respective areas and will advise employees of their date of expected return from telecommuting, generally at least two work weeks prior, but not less than one work week prior, to that date.

   1. COVID-19 Resurgence - Each area must be prepared to slow or stop the telecommuting phase-out and/or to fully return to telecommuting as soon as possible, if the University deems it necessary.
   2. Screening – Employees returning from a telecommuting period who meet any of the instances described in Section VIII below must complete the online COVID-19 Screening and Reporting Tool [https://covidreporting.ouhsc.edu/](https://covidreporting.ouhsc.edu/) and email the results to their immediate supervisor prior to returning to campus.

II. **Reopening Common Areas, Resuming Services**

The College of Medicine departments will comply with the following:

A. **Requirements to Resume Full Services** - Departments will review this COM RTS Plan and implement the stated requirements. If a particular item cannot be accepted as is, the department will indicate that in its own RTS plan and include an alternate compliance plan and explanation and submit for approval (see #1 below):

   1. Dean Approval - The director or administrator over the area will submit a written Return to Services (RTS) Plan for approval to the Associate Dean for Executive Affairs for approval. The RTS Plan must include -- at a minimum -- how the department will meet the applicable requirements of each section of this COM Return to Service Plan and how the requirements will be communicated to those applicable individuals. The department’s RTS Plan ([see checklist](#)) should also address how services will be reduced or suspended if such is directed due to a resurgence of COVID-19.
   2. Revisions – Substantive revisions to the COM RTS plan must be approved by the Specific Pathogens Preparedness Operations Team (SPPOT) and the OUHSC Emergency Operations Committee (EOC) Exec Team and communicated to those the changes apply to, as described in the original RTS plan.
III. Social Distancing and Gatherings

Social Distancing refers to keeping a specified distance between individuals. According to the Centers for Disease Control and Prevention (CDC), it is one of the most effective methods of avoiding infection and reducing the spread of COVID-19. Social distancing requirements apply in all workplace settings on campus including public settings, common areas, and shared spaces on campus and at OUHSC events.

All departments within the College of Medicine must comply with all areas referenced below. All departments within the College have reconfigured or will reconfigure break areas, conference rooms, and public spaces to provide for social distancing by removing chairs and posting signs reminding personnel that social distancing and mask wear are mandatory. Signs will also be posted to indicate that the reconfiguration of break areas must be maintained.

A. On-Campus Spaces - Individuals must maintain a physical distance from others of at least six feet as described in this Paragraph A or must implement additional mitigation, as described in Section B below. NOTE: Effective June 1, 2021 social distancing will be reduced in on-campus spaces to 3 feet in all but patient care and eating areas.

1. Indoors - Individuals must also wear a surgical-style mask (see Section IV below).
2. Outdoors - Individuals are strongly encouraged to wear a surgical-style mask. If social distancing cannot be maintained outside, individuals must wear masks.
3. Tents – If the tent has side panels, it is considered an indoor space. Masking in the tent is mandatory, and social distancing must be observed. If the tent has no panels, it is considered an outdoor space. Masks are encouraged, and social distancing is mandatory.

B. Social Distancing in Patient Care and Campus Eating Areas—When in patient care areas or in campus eating spaces such as breakrooms and cafeterias, individuals must maintain a physical distance from others of at least six feet or must implement additional mitigation strategies.

C. Social Distancing Alternatives - When the mandated social distancing is not possible, additional mitigation, such as the following options, must be implemented where possible:
   - staggered breaks or shifts
   - re-configured physical space
   - re-configured seating designations
   - revised workflow processes (e.g., drive through, partitions, curbside pickup)
   - flexible meeting formats, such as video or telephone conferencing.

D. Organized Campus Gatherings⁴ – All organized campus gatherings that cannot comply with the requirements of this section. NOTE: Those that cannot comply with the requirements of this paragraph D must be submitted to the Dean/VP for review and recommendation for approval and then to SPPOT/EOC Executive group for review and approval.

1. Indoors - Organized campus gatherings that are hosted indoors, including meetings, must not exceed the COVID capacity for the space, which effective June 1 must allow for social distancing of at least 3 feet between individuals. Only packaged to-go food is permitted. Masks must be worn. University-

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⁴ An organized campus gathering is a meeting, event, or activity that is not a spontaneous social gathering.
sponsored events held off-campus must comply with the facility’s COVID requirements as well as those in a-f below.

- All attendees must comply with the masking requirements listed in Section IV: Masks and Protective Eyewear.
- Hand sanitizer must be available at each door to the room.
- If there are multiple entries to a room, one should be designated (signs posted) for entry and one for exit.
- Extra masks must be available in the room.
- The group managing the event must ensure the above requirements are met throughout the event; this may require reminders to attendees and a monitor at the door to maintain the COVID capacity. For assistance in determining Covid capacity, contact your campus Operations department.

f) For assistance in determining COVID capacity, contact your campus Operations department.

2. **Outdoor:** Organized campus gatherings are limited to the number of individuals who can be in the event space while observing social distancing of at least 3 feet. For assistance in determining COVID capacity, contact your campus Operations department. University-sponsored events held off-campus must comply with the COVID requirements of the space as well as those in a-e below.

- Attendees must wear masks.
- Hand sanitizer must be available at the gathering.
- Extra masks must be available at the gathering.
- Food must be individually packaged and distributed without lines or groups forming.
- Eating spaces must be arranged for 6-foot distancing.

E. Due to the nature of the clinical environment and required training aspects, as described in the Return to On-Site Instruction Plan, there are instances in which individuals cannot ALWAYS comply with the 3-foot (effective June 1) social distancing criteria during hands-on clinical training. During those periods of time in which social distancing and mitigation strategies described in III.C above are not possible, masking, hygiene, and awareness of fellow personnel and personal responsibility are required.

IV. **Masks and Protective Eyewear**

College of Medicine departments will comply with the OUHSC mandates on masking and will actively enforce them.

Indoor Masking: Until further notice, all individuals in indoor campus facilities must wear a disposable or cloth surgical-style facemask.\(^5\) Non-medical grade masks that have exhalation valves with or without filters may not be worn on campus unless a surgical style mask is worn.

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\(^5\) Provided, however, that when individuals are in their own enclosed private workspace, are at least 6 feet from others, and are not interacting with others, they may remove their masks. For purposes of this policy, a cubicle or office with an open door is not considered “enclosed.”
over it. Scarves, bandanas, gaiters, buffs, and the like are not acceptable. Masks must cover the nose and mouth.

Mask in Vehicles: Masks must be worn by all passengers in University-provided transportation, such as shuttles, buses, police safety escorts, and University owned/leased vehicles. Drivers of any University vehicles must wear a mask when passengers are present.

Outdoor Masking: Masks must also be worn in outdoor campus spaces where social distancing cannot be maintained and when otherwise required by the University, such as for certain events.

Disability Accommodation: If an employee or student indicates compliance is not possible due to medical reasons, the individual should be referred to the appropriate University office to request accommodations on the basis of disability (Human Resources for employees; Accessibility & Disability Resource Center for students). If a patient states compliance is not possible due to medical reasons, contact the clinic manager for direction. Cloth face coverings should NOT be worn by children under the age of 2 or anyone who has trouble breathing, is unconscious, incapacitated, or otherwise unable to remove the mask without assistance, per the CDC.

**Masks**

A. **Masks for COM Students and Employees** - The University will make masks available to employees and students appropriate to their on-campus responsibilities.
   1. Employees - Masks for COM employees outside of OU Physicians may be obtained from the central mask inventory. Managers should complete this form to obtain surgical-style masks for their employees. Masks for employees within OU Physicians will be obtained through the normal OU Physicians supply chain.
   2. Students - Masks for students who are on campus may be obtained from the HSC Student Affairs or OU-Tulsa Student Affairs offices. Students in off-campus rotations who need masks should contact HSC Student Affairs or OU-Tulsa Student Affairs, as applicable.
   3. Re-Use - Employees and students must observe the following re-use guidelines:
      a. Disposable Masks - Disposable filtration surgical-style masks worn in non-clinical/non-surgical areas should be worn on campus for five consecutive days, or until soiled, whichever occurs first. (Those worn in surgical, research, and clinical areas are subject to surgical, research, or department re-use policies.)
      b. Cloth Masks – Cloth masks should be washed and fully dried after each day's wear. Appropriate cleaning of the mask is the responsibility of the wearer.

B. **Masks for COM Patients and Guests** – When possible, patients should be asked to wear their own mask to their appointments and to advise their guests to do the same. The COM will make surgical-style masks available to patients and their guests who do not bring their own approved masks. Information regarding obtaining masks for patients and accompanying family members or caregivers who do not have their own masks is available from clinic staff.
C. Masks for COM Vendors and Others - Vendors and other visitors are expected to provide their own masks when on campus. Departments should advise their visitors, vendors, and service providers of this requirement. Clinic staff may provide masks if sufficient supply is available.

Protective Eyewear

A. Employees, students, and trainees providing direct patient care responsibilities in HSC and OUM facilities must wear approved protective eyewear, in addition to a surgical-style mask, to protect against exposure to respiratory secretions during patient care. Protective eyewear will be made available by the hospital or clinic; individuals who elect to provide their own must comply with the following paragraph B.

B. Protective eyewear must wrap around the front and sides of the eyes. Acceptable protective eyewear includes:
   1. Goggles
   2. Face shields that cover the front and sides of the face (thicker sides/arms; not like eyeglasses).
   3. Other protective eyewear such as safety glasses or trauma glasses—these must not have gaps between the frames of the glasses and the face. If there are gaps, they likely do not protect the eyes from all splashes and sprays.

   Prescription eyewear, reading glasses, and sunglasses are not considered protective eyewear due to the openings around the side of the frames.

C. Individuals must ensure eye protection is compatible with the respirator they wear so there is not interference with proper positioning of the eye protection or with the fit or seal of the respirator.

D. If an employee or student indicates compliance is not possible due to medical reasons, the individual should be referred to the appropriate University office to request accommodations on the basis of disability (Human Resources for employees; Accessibility & Disability Resource Center for students).

V. COM Building Access and Amenities

Administrative buildings within the College of Medicine are currently locked-down, with the exception of those buildings that also have a clinical component. Those areas are also secure, but are manned in order to screen and allow patients access as appropriate. All other buildings are only accessible by individuals with swipe-card access to the facilities. The College of Medicine, being very spread out across the campus, has worked closely with both University offices and University Hospital Authority and Trust offices to ensure proper signage and information is posted throughout the common areas. Signs in bathrooms, signs in elevators, drinking fountains, etc., have been posted and are easily apparent and visible. Departments will not remove or revise these signs and will comply with the following:

A. Building Access - Access to COM buildings must remain restricted until further notice or until expanded access is coordinated by Operations, the Associate Dean for Executive Affairs, and the building coordinator and then approved by the appropriate dean or vice president. Expanded access may be granted only if mitigation steps will be in place to limit access to only those individuals intended or scheduled to be in the building.
1. Patient Care Buildings - Public entrances to patient care buildings must be attended, and current visitor policies must be observed. Vendors entering patient care buildings must enter through the main entrance. Other entrances must be restricted to key or card access.

2. All Other COM Buildings - Entrances to other buildings must be restricted to key or card access or be attended.

3. Food Delivery, All COM Buildings – Third party food delivery services may not enter or be given access to enter campus buildings. Individuals ordering from these services must arrange to meet the delivery person outside of the building.

B. Building Amenities - All common areas must be maintained in a manner that provides for social distancing (see Section III above) and safe hygiene practices.

1. Elevators – Generally, no more than four individuals may be in an elevator at one time; 6 individuals must wear masks on elevators.

2. Seating Areas - Seating at tables and benches is generally limited to one person per 3 feet. 7

3. Restrooms - Restroom facilities should not be used when social distancing cannot be maintained.

4. Cleaning - Sanitization protocols must be in place for all departments and areas and must include, at a minimum, the items in Section VI below.

5. Hygiene - Hand sanitizer should be made available if soap and water are not readily available in the area.

6. Drinking Fountains - Use of drinking fountains that are not touch-free should be avoided.

C. Signage - University Operations and Trust personnel will place signs in common areas that address the requirements in Sections III, IV, and V, as appropriate. Departments and areas can obtain additional copies of these signs from University Operations or from https://printingstorefront.ou.edu/ou/catalog.cgi.

VI. Cleaning COM Facilities and Equipment

Departments must have mechanisms in place to acquire the needed cleaning supplies for their individual personnel and immediate areas within the departments. Working with cleaning services at the University/Trust level has ensured that mechanisms are in place to ensure that proper care of the facilities is being accomplished. All personnel throughout the College of Medicine are responsible for maintaining their individual offices as well as common/shared space within each department, as described below.

A. University Responsibility - The University will provide appropriate cleaning of frequently used University facilities and common areas, including elevators, restrooms, classrooms/lecture halls, and other high-traffic spaces with the use of approved cleaners. For high-traffic areas within facilities, the University will also provide, when possible,

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6 Reasonable exceptions include patient transport and freight elevators, patients using an elevator with their household members or caregivers, and emergency personnel. For smaller elevators, a smaller number of occupants may be preferred. On occasion, it may be appropriate for additional passengers to ride, in order to avoid groups forming while waiting on elevators.

7 Reasonable exceptions are members of the same household sitting together and patients or students sitting with their caregivers or aides.
increased placement of hand sanitizers, and installation of additional University signs encouraging good hygiene.

B. Department/Area Responsibility – As was the case prior to COVID-19, each department/area manager remains responsible for obtaining cleaning supplies and providing for the cleaning of shared office equipment, furniture, surfaces, and environment.

1. COVID-19 Positive Individuals - Department/area managers must contact General Services (405-271-2311 or 918-660-3555) for OUHSC-operated buildings or OneCall (405-271-2252) for UHAT-operated buildings and the Environmental Health and Safety Office (EHSO) (405-271-3000 or 918-660-3878) for disinfecting assistance when made aware of an individual who has tested positive, if the individual has been in their space in the past 24 hours. The supervisor should close off areas that the individual visited and open outside doors and windows, if possible, to increase air circulation in the area until it can be assessed by General Services/OneCall and EHSO.

C. Individual Responsibility – As was the case prior to COVID-19, individuals are responsible for cleaning their personal and shared spaces and office equipment.

As additional information is dispersed regarding proper cleaning at the departmental level, the information will be passed on from leadership to each level to ensure shared understanding of the requirements and individual responsibility.

VII. Testing, Isolation, and Contact Tracing

In the event of a positive test within a COM department, COM employees will comply with the following:

A. Positive Tests - If an employee or student tests positive for COVID-19, they and the COM and department(s) involved will cooperate with the appropriate State health department entity in its contact tracing efforts.

1. All COM employees and students who have received a positive COVID-19 laboratory test must obtain clearance from the Student & Employee Health via the online COVID-19 Screening and Reporting Tool https://covidreporting.ouhsc.edu/ before returning to on-campus University responsibilities. Clearance may require proof of a negative COVID-19 test. PLEASE NOTE: At this time, the University does not accept negative rapid COVID-19 antigen tests from any clinic or laboratory.

B. Confirmed Exposures – This reporting is required, even if the employee or student has received the complete COVID-19 vaccine series. Employees and students who know they were exposed to a laboratory-confirmed COVID-19 positive individual are expected to notify the Student & Employee Health Clinic via the online COVID-19 Screening and Reporting Tool https://covidreporting.ouhsc.edu/ and to follow the direction provided by the Clinic and by the applicable health department involved (if any). That direction may require certain actions, such as to remain away from University property\(^8\) and from on- and off-campus events until approved for return by Student & Employee Health.

\(^8\) Excludes individuals who live in University Village Apartments (UVA). If any UVA residents test positive for COVID-19, they are encouraged to contact Joe Schmidt, HSC Student Affairs, at 405-271-2416 for assistance.
VIII. Monitoring COM Employees, Students, and Visitors for COVID-19 Symptoms - Mandatory Reporting Process

All students and employees within the College of Medicine have been briefed by appropriate leadership and are aware of the current mandatory reporting processes. A copy of the COM RTS Plan will be provided to each department for dissemination to students and employees within each department, in addition to each time it is updated to ensure the most current information is made available.

A. Monitoring COM Employees and Students – This reporting is required, even if the employee or student has received the complete COVID-19 vaccine series. Employees and students must complete the online COVID-19 Screening and Reporting Tool at https://covidreporting.ouhsc.edu/ each time any of the incidents occurs. The Tool must be completed and then submitted before returning to work or academic responsibilities on campus or attending University-related functions. The employee or student will be notified via email of their screening results and will follow the included instructions for forwarding the email.

1. Are you experiencing symptoms that could be consistent with COVID-19, such as fever, cough, shortness of breath, chills, muscle pain, sore throat, recent loss of taste or smell, and/or extreme fatigue? (Please also contact a health care provider regarding specific symptoms.)
2. Do you have COVID-19 test results pending following an exposure or symptoms, or did you test positive for COVID-19 within the last 14 days?
3. Have you had close contact (been within 6 feet, for approximately 15 minutes or more\(^9\)) with an individual diagnosed with COVID-19 in the last 14 days or with someone who has been tested for COVID-19 and whose results are pending in the last 14?
4. Do you have a household member who has tested positive for COVID-19 in the last 14 days?
5. Have you traveled internationally? If so, in addition to completing the Screening and Reporting Tool within 48 hours of your return, and you must self-quarantine away from campus\(^10\) for the period directed by Student & Employee Health.
6. Have you taken a domestic or international cruise? If so, in addition to completing the Screening and Reporting Tool within 48 hours of your return, if you were not fully vaccinated at least 14 days prior to your travel, you must self-quarantine away from campus\(^11\) for the period directed by Student & Employee Health.

NOTE: Individuals must also comply with the screening and reporting processes in place at their assigned locations/rotations.

B. Monitoring COM Patients and Scheduled Visitors/Vendors –

\(^9\) It is possible for COVID-19 to spread in shorter periods of time or in different distances, so individuals should monitor their health and complete online Screening and Reporting Tool if they experience COVID-19 symptoms.

\(^10\) Excludes individuals who live in University Village Apartments (UVA). If any UVA residents test positive for COVID-19, they are encouraged to contact Joe Schmidt, HSC Student Affairs, at 405-271-2416 for assistance.

\(^11\) Excludes individuals who live in University Village Apartments (UVA). If any UVA residents test positive for COVID-19, they are encouraged to contact Joe Schmidt, HSC Student Affairs, at 405-271-2416 for assistance.
1. **COM Patients and Their Visitors** – Patients and accompanying visitors will be monitored via temperature checks or other clinic screening tools.

2. **COM Scheduled Visitors/Vendors** – Visitors who are scheduled to be on campus for mission critical business, such as certain job candidates and speakers, and vendors who will be in campus facilities for more than pick-up or delivery (typically 15 minutes) will be directed by the department to complete the online Scheduled Vendor/Visitor Tool (Vendor/Visitor COVID-19 Screening and Reporting Tool) at least 24 hours prior to their scheduled arrival on campus. They will be advised to notify the individual who scheduled them to be on campus if they begin to experience COVID-19 symptoms during their visit.

See the Scheduled Visitor/Vendor FAQ [here](#) for more information.

**IX. Travel**

The University Travel and Screening Committee will advise on proposed domestic and international travel for University purposes and will provide recommendations for COVID-19 mitigation strategies for travel that is approved as mission-critical.

A. **University Domestic and International Travel** – Domestic and international air travel by HSC employees for University-related business or academic purposes is permitted only if the travel is considered *mission-critical* to the University. International travel requires completion of the online COVID-19 Screening and Reporting Tool upon return – regardless of vaccine status - and may result in a mandatory period of quarantine from campus upon return to the state, as described in Section VIII.A above.

B. **Mission-critical Travel, Defined** – Mission-critical travel is travel that is necessary to the University’s ability to meet its core academic, research, or operations functions. More specifically, the purpose and timing of the travel must be such that if the travel does not occur as scheduled, the University’s ability to meet its core academic, research, or operations functions is significantly impaired. Individuals who believe domestic or international travel is mission critical must contact their dean/vice president, who will consider factors such as timing, State Department/CDC travel advisories for the destination(s), impact on competitive advantage, and actions of peer institutions, and make a written recommendation to the Senior Vice President and Provost for approval.

C. FAQs on domestic and international travel are available [here](#).

**X. Training**

COM department employees who have specific needs or questions regarding the COM COVID-19 Response Plan may contact the COM Dean’s office for additional guidance. Learners at all levels are now beginning to come back on campus and mission specific, required training is being provided to them by instructors or leadership at the departmental/College level as appropriate.

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12 Third party food vendors, as identified in Section V.A.3 above, and other vendors who are on campus solely to make deliveries or perform outdoor services are not required to complete the Tool.
A. The SPPOT/EOC Exec Team will assist with and coordinate training materials and opportunities for departments/areas, employees, and students to learn about COVID-19 and related campus policies.

B. Each college, clinic, and department will ensure its employees and students also receive information and links related to specific COVID-19 training as changes/updates occur at an institutional level.

XI. Research, Patient Care, Academics – Return to Service Plans

A. Return to Research Plans
1. The Return to Research Plan for our research endeavors is available here: [https://research.ouhsc.edu/Resources/COVID-Research-Updates](https://research.ouhsc.edu/Resources/COVID-Research-Updates).

B. Clinics – The Return to Service plans for OU Physicians, the College of Dentistry, Keys Speech and Hearing, and others are available from the appropriate administrative office.

C. Instruction - The Return to On-Site Instruction Plan is at the top of the OUHSC Teach Anywhere page: [https://www.ouhsc.edu/teachanywhere/](https://www.ouhsc.edu/teachanywhere/).

D. Other Plans – Other Return to Service plans are available from the vice president responsible for the particular area or the SPPOT/EOC Exec group.

E. Other Campus Plans –
1. Norman campus: [https://www.ou.edu/together/norman-phase-iii](https://www.ou.edu/together/norman-phase-iii)
2. Tulsa campus: [https://ou.edu/tulsa/coronavirus](https://ou.edu/tulsa/coronavirus)

XII. Enforcement

COM employees and students who refuse to comply with this Return Plan are subject to disciplinary action, in accordance with the applicable faculty, staff, or student handbook policy. Managers may consult with Human Resources for additional information.

If a COM employee or student indicates compliance is not possible due to medical reasons, the individual should be referred to the appropriate University office to request accommodations on the basis of disability office (Human Resources for employees; Accessibility & Disability Resource Center for students).

Vendors, visitors, and patients who refuse to comply with this Return Plan are subject to having their access to campus suspended or terminated.