

COVID-19 Pandemic After Action Report

September 2022



Idaho State University

Executive Summary



On March 13, 2020, the State of Idaho's [Declaration of Emergency](#) for the public health emergency was issued in response to what would become a global pandemic. On this same day, Idaho State University (ISU) activated an Incident Command Group and established a system-wide coordination call with universities across Idaho. By March 25th, Governor Little enacted a [statewide stay-at-home order](#). ISU had to quickly identify and implement changes to instructional practices and day-to-day operations to preserve education and protect staff, faculty, and students.

From March 2020 to the present, COVID-19 has directly affected operations, enrollment, and student learning. The pandemic tested the university's capabilities to manage resources, provide command and coordination functions, effectively communicate and share information, as well as promote mental tenacity.

The pandemic confirmed that effective emergency response takes a whole-community approach and that the willingness of individuals to come together directly impacts a community's ability to rise above adversity. To counter the many challenges COVID-19 presented, ISU streamlined communication and coordination processes across the campus community and engaged with partnering agencies and institutions in Idaho to aid in its information-sharing and response efforts.

ISU has taken many precautions to reduce the exposure of its students, faculty, staff, and the community to COVID-19. ISU's focus on systematically approaching the COVID-19 pandemic utilizing an intra-agency command structure and a dedicated campus community of students, faculty, and staff can be accredited to much of its success. Over the past two years, ISU faced many challenges, yet opportunities to create a stronger campus community emerged throughout this time. By spring 2022, ISU operations were largely back to normal operations.

To develop this report, Idaho State University:

- Collected and analyzed data compiled from the ISU COVID Health Team;
- Reviewed communications and marketing strategies;
- Assessed meeting minutes from the Incident Command Group and Roaring Back Chair Committee;
- Analyzed survey results from the Incident Command Group;
- Analyzed data from the CDC and Idaho Health Department; and
- Incorporated Subject Matter Expertise in the review process.

The ISU COVID-19 After Action Report presents findings and recommendations based on the four phases of emergency management: Preparedness, Mitigation, Response, and Recovery. The recommendations in this report can be utilized to sustain response efforts that worked well and implement improvements to operations to aid in the recovery of future disasters.

“Leaders have an unshakable belief that things can get better...We have an opportunity to create a deeper fabric of community that we might have thought impossible. We can come out of this with a new and unprecedented level of compassion for those around us.”

*-President Satterlee
Message from Kevin, March 25, 2020*

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Introduction

March 13, 2020, marked the beginning of the COVID-19 Pandemic in Idaho. On this date, a State declaration of emergency was announced, prompting immediate and significant activities for Idaho State University (ISU), including: activating an Incident Command Group utilizing a virtual Emergency Operations Center; system-wide coordination with higher education institutions; and the extension of spring break activities. The following day, the first confirmed case of COVID-19 was identified in Idaho, a student at the ISU Meridian campus. Almost immediately, campus operations changed to meet the needs of remote work and learning in an attempt to stop the spread of COVID-19 with a statewide stay-at-home order issued on March 25, 2020, by the Governor. By the first of April, social distancing measures were implemented, distance-based instruction began, and a collection of ongoing response activities were enacted.

"Choose hope. Choose resilience and grit. Choose positivity. And ultimately, choose each other."

*– President Satterlee
Message From Kevin, March 25, 2020*

Over the two-year course of the pandemic, ISU utilized a systematic approach to share information, provide coordination, and increase the effectiveness of decision-making. Communications with students, staff, and faculty dramatically increased, and the Roaring Back website was created and utilized to provide additional information and resources for the campus community. The University also launched several initiatives to help stop the spread of the COVID-19 virus and keep the campus community safe, including: a campus-wide screening program, mask ambassador program, vaccine incentive initiatives, and a health exceptions process. Testing for symptomatic individuals and vaccines were also widely available on campus. Another significant undertaking was the expansion of remote learning and remote work capabilities, allowing the University's mission to continue throughout the pandemic.

Topics Addressed:

- Decision Making Strategies
- Health Response Activities
- Policies, Plans, and Procedures
- Use of Incident Command System and Emergency Operations Center
- Protection of Campus Infrastructure
- Engagement and Communications
- Application of Technology
- Ability to Provide Protective Measures
- Ability to Maintain Learning
- Community Partnerships
- Campus Experiences & Tools for Success

This report was developed by the ISU Department of Public Safety's Emergency Management team to identify strengths to be maintained and built upon, identify opportunities for improvement, and support the development of corrective actions to improve future response efforts. It covers aspects related to Preparedness, Mitigation, Response, and Recovery to facilitate and support the planning efforts for future potential pandemic events.

Findings & Recommendations

Preparedness: *Preparedness planning is an essential function for universities to adequately protect the campus community from disasters and is most effective when incorporated into the University's culture.*

Findings

- Prior to March 2020, ISU had 13 **Continuity of Operations Plans** that were updated in 2017. It is unclear if they were utilized during COVID. In March 2020, at the request of senior leadership, 36 departments/units completed a [Continuity of Operations Template](#) outlining the order of succession and critical functions for both temporary closure and fully remote services.
- The University's **Emergency Operations Plan** was last approved in 2016 (under a previous president), and is not made widely available to the staff, faculty, and/or students of ISU. The associated training and exercise program has been neglected.
 - Command and control functions for the COVID response were established using a different command structure than outlined in the Emergency Operations Plan.
 - Training for the ISU Incident Command Team and ISU Emergency Operations Center has not occurred at the university in 5 or more years.
- The University's [Pandemic Flu/Communicable Disease Response and Recovery Plan](#) was updated in 2017. This plan was referenced but found to be too general as it only covered the initial identification and evacuation of facilities. It is unclear if this plan was referenced or useful for the COVID response.
- The University updated its [Communicable Disease Policy \(Policy #5020\)](#) in January of 2021, nearly one year after the pandemic's start.

Recommendations

- Prioritize University preparedness and invest accordingly in the development of plans and mitigation measures. This investment now, rather than when the emergency happens, will enhance the ISU response capabilities.
- Continuity of Operations Plans should be standardized, consistently updated, and reviewed for effectiveness by unit/department heads.
- Consideration as to the most effective command structure should be given prior to updating the ISU Emergency Operations Plan. Once approved, the plan should be easily accessible and widely available to the campus community.
- Invest time and resources to provide situational training and the opportunity for employees to participate in scenario-based exercises for emergency operations functions.
- Planning consideration should be given for situations where an extended response may be necessary as this leads to depletion of resources and staff burnout.

Mitigation: *The application of diverse mitigation measures contribute to the ability of universities to perform critical services while helping the campus community recover from disasters more quickly.*

Findings

- ISU had a **strong working relationship** with the local health department for its main campus. This relationship enhanced coordination and information sharing between ISU and local health experts resulting in:
 - An early, targeted, and layered approach to disease mitigation utilizing nonpharmaceutical interventions.
 - The ability to quickly mobilize screening, testing, and vaccination efforts for the campus community.
- ISU had a surplus of **personal protective equipment**, like masks. This supply was both centralized and prioritized usage implemented to ensure that mission essential personnel and clinical operations could continue.



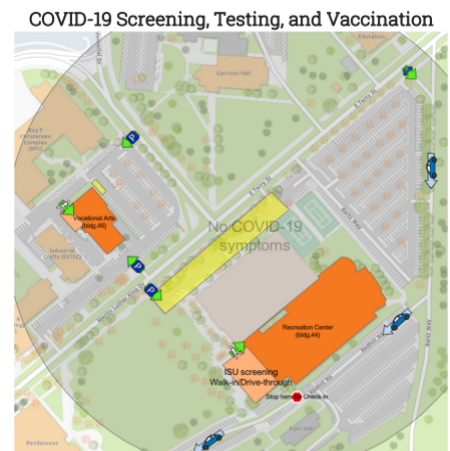
Recommendations

- Evaluate ventilation systems in all ISU buildings and implement necessary improvements to outdated systems as part of future strategic and capital projects.
- Ensure adequate staffing and resources are available to meet the fit-testing requirements for N95 masks and that current supplies of other types of personal protective equipment are rotated prior to expiration.
 - Evaluate current supplies of N95s and consider strategically what those reserve levels should be for clinical usage.
- Improving the University's ability to perform epidemiological surveillance for the ongoing collection, analysis, and interpretation of health data could provide an opportunity for ISU to implement strategies for disease protection prior to a large outbreak on campus.
- Establishment of local planning councils and/or a dedicated team for public health-related activities could improve public health preparedness while increasing pandemic education for the campus community.
- Pre-pandemic planning scenarios and the creation of activation triggers could enhance the University's ability to respond to disease outbreaks more effectively and confidently.
- Continuation of the flexibility for both work and classes during times of increased disease activity provides for a reduction in disease spread.
- Incorporation of the increased environmental cleaning, sanitation, and other infection control measures into day-to-day operations could reduce the spread of future outbreaks.

Response: Immediate and ongoing actions are necessary for an effective response during disasters to enhance personal safety and well-being while protecting critical infrastructure.

Findings

- ISU utilized personal, administrative, and environmental strategies to help prevent the spread of COVID-19. This layered approach was largely successful thanks to an engaged campus community and dedicated faculty and staff.
 - **Personal** prevention strategies, including vaccinations, masking, and the mindset to stay home when sick, allowed individuals to protect themselves and others.
 - **Administrative** adjustments were made to the ISU operations and governing policies to slow the spread of COVID-19. This included changes to travel policies, flexibility for attendance and sick leave, restriction of non-mission critical campus activities, and the development of a robust screening program.
 - **Environmental** changes and enhancements included improvements to select ventilation systems, physical distancing standards, decreasing room occupancy, and signage encouraging social distancing and masking requirements. Personal protective equipment was also widely dispersed on all ISU campuses.
- The ability to make rapid decisions and establish mission objectives was achieved by creating an **Incident Command Group and activating the Emergency Operations Center Group**. Operational divisions for instruction, student and campus services, employee operations, and community engagement enhanced information sharing and allowed for university-wide strategic planning.
 - The activation of a virtual Emergency Operations Center provided an additional avenue for identifying departmental needs, problem-solving, and immediate decision-making capacity during the rapidly changing environment.
 - For decisions that did not require immediate attention, division and department leadership created decision memos that were reviewed and approved at the Administrative Council's weekly meetings.
 - Advanced operational planning resulted in documents outlining operational levels to provide a visual for the campus community of the University's critical area response activities based on the progression of disease activity and severity of illness.
 - The capturing of meeting minutes and dissemination of Situational Reports allowed for information to be shared, archived, and reviewed.



Incident Command Group Objectives

- Share information
- Make imminent decisions
- Elevate issues to leadership
- Communicate to campus

Guiding philosophy: Develop clearly defined actionable tasks/decision points that are coordinated in a group effort.

- A **COVID-19 Health Committee** was utilized to provide expertise to promote the health and safety of the campus community. This team of twelve consisted of health professionals across campus, including medical professionals, public health experts, covid investigators, and administration. Several valuable initiatives resulted from this team:
 - Implementation of a screening program on the Idaho Falls, Meridian, and Pocatello campuses.
 - Ability to provide up-to-date information on disease activity, mitigation measures, and case trends to ISU Administration for decision-making purposes.
 - Ease the burden on local health districts by conducting contact tracing for ISU staff, faculty, and students after COVID exposure or a positive test result.
- At the beginning of the 2021 semester, ISU implemented a mandatory **COVID-19 screening program** using CARES funding. Proactive screening provided for the discovery of non-symptomatic cases of COVID-19. The program consisted of two parts and applied only to those with a physical presence on campus:
 - A return-to-campus screening program required all students, faculty, and staff to be screened twice within a five-day period during January 2021.
 - An ongoing COVID-19 screening program for select populations of students, faculty, and staff (i.e., housing, athletics, etc.)
 - This program continued for the duration of the pandemic in varying capacities providing for testing of non-symptomatic individuals after exposure and for the purposes of travel free of charge.
- Engagement in the implementation of **non-pharmaceutical interventions** allowed for diversification in mitigation measures helping to reduce the spread of COVID-19.
 - Masks of all grades were available to the campus community and distributed free of charge to staff, faculty, students and visitors. To aid in the usage of masks on campus ISU posted signage, utilized students as mask ambassadors, and applied mandates during times of increased disease activity.
 - Social distancing and event cancellations and/or size restrictions were implemented before returning to campus after the statewide stay-at-home order.
 - Providing for isolation and quarantine guidance along with contact tracing was implemented into the COVID-19 response activities by the ISU Health Team
 - Ensuring accurate and timely public information about mitigation measures proved very challenging due to rapidly changing and, at times, conflicting information from disease experts. The University did well in staying ahead of issues by continually providing updates through its website.



- **Vaccinations** were not widely available until late spring of 2021. Once available, vaccine efforts were made a priority for campus leadership. Bengal pharmacy started providing vaccines to the Pocatello campus beginning April 2021.
 - Vaccines were made available consistently on the Pocatello campus, with pop-up sites provided to the Idaho Falls and Meridian Campuses.
 - In August of 2021, ISU launched a Vax for Cash incentive program for all students using CARES funds. Vaccinated students received \$100 cash and were put in weekly drawings for gift cards and cash. Four awards were given that were equivalent to one semester of classes.
 - By offering vaccinations in a variety of settings, including the Student Union Building and football games, the University made it very easy for anyone who wanted a vaccine to get one.
- **Community partnerships** were already established with local health districts and paved the way for collaboration and coordination for COVID testing and vaccinations.
 - Four individuals from ISU served on Southeastern Idaho's Unified Command team starting in March 2020. These individuals assisted in the response efforts covering eight counties in southeastern Idaho and the Shoshone Bannock Tribes.
 - In April 2020, ISU provided 3D-printed masks and face shields to Southeastern Idaho Public Health. These items were made available free of charge to first responders and healthcare workers.
 - Starting in late April 2020, community testing was made available outside Dyer Hall on the Pocatello campus through partnerships with Southeastern Idaho Public Health and Express Labs.
 - As the need for testing grew, the site moved to the ISU's Holt Arena, where it stayed in operation until May of 2021.
 - The site reopened in August of 2021 at the EAMES complex and remained open until June 2022.
 - In December 2020, ISU provided an ultracold freezer to Southeastern Idaho Public Health in anticipation of the arrival of the Pfizer vaccine. Later, additional freezes were shared with other health districts in Idaho.
 - ISU partnered with Southeastern Idaho Public Health and Portneuf Medical Center to provide a community vaccination site on its Pocatello campus. From February 25 to May 21, 2021, 10,029 vaccines were provided to the surrounding communities. Volunteers from the Medical Reserve Corp and clinical students from ISU were crucial in the success of this initiative.
- The university utilized various channels for **communication and information sharing** throughout COVID, though there is varying opinion on whether it was too much, too little, or just the right amount of information.



- A total of 146 mass COVID-related emails were sent to staff, faculty, and students throughout the two years.
- Various technology platforms were utilized, including social media posts, a dedicated website, video messaging from the president, and virtual town hall meetings.
- Zoom allowed all divisions on campus to share information and was the primary tool for information sharing among the Incident Command Group.
- The **mental health** of staff, faculty, and students was significantly impacted throughout the COVID pandemic. The University recognized the need to provide additional resources to the campus community; however, as witnessed across many industries, mental health providers and resources were limited.
 - Despite having fewer students on campus, the counseling center provided more counseling sessions than in previous years.
 - The counseling center staff was also utilized as a part of the Incident Command team providing the team with strategies to manage their mental health and providing one-on-one and group support as requested.
 - In the Fall of 2020, a questionnaire sent out to the student body found that 53.2% of students thought their mental health was one of the areas most impacted by COVID in their life.
 - In the Fall 2020 and 2021 Student feedback "Leavers" survey, students consistently listed mental health as the 2nd or 3rd top reason for leaving ISU. (Financial concerns were number one.)
 - Fall 2021 - Spring 2022, the Counseling and Testing Center also noted an increase in provider burnout amongst their staff and the staff from the ISU Health Center and an increase in students struggling with trauma and rumination.
 - In 2021, 62% of students seeking counseling said COVID negatively impacted their mental health, and 26% said that was exclusively the reason they sought care. These numbers decreased respectively to 58% and 13% in 2022.

Recommendations

- Effective and high-level coordination were critical in creating an environment of flexibility and enhanced the decision-making capacity to rapidly adjust operations to meet the current demands of the pandemic.
 - Traditional modes of decision-making in a university setting may be counterintuitive, so having alternative systems in place to circumvent the traditional process to release funding, resources, and communications in a timely manner is crucial.
 - The use of a dedicated and inclusive system, similar in structure and nature to the Incident Command System, would continue to benefit ISU in future large-scale emergencies.
 - The University should continue to approach activities utilizing multi-sectional coordination because this allows for complex and multiplying issues to be solved simultaneously.
 - Officials with decision-making authority must be present when critical decision-making is necessary to preserve life safety, incident stabilization, and property protection.

- Focus and strengthen partnerships with local health districts and first responder agencies, specifically with those on the Meridian and Idaho Falls campuses, as these areas of relationships are the weakest.
- Technology and the ability to continue learning and work production without face-to-face interaction was one of the most vital components identified throughout the pandemic. However, the University had to make drastic and significant changes to achieve this in a short period of time.
 - The expansion of wifi capabilities across campus was a significant improvement. However it would be beneficial to evaluate the accessibility of these services campus-wide as there are still buildings on campus where cell phone service is inaccessible. For example, staff, faculty, and students at the EAMES complex may miss out on critical emergency notifications due to a lack of services.
 - The systems used in classrooms for virtual learning were continually identified as being problematic, resulting in frustrated staff and disengaged students due to failing video and audio.
 - The University was not prepared to have so many individuals working from home, so a great deal of money was spent on purchasing equipment.
- Developing long-term strategies proved extremely difficult though the burden of those financial and operational decisions were lessened due to the significant financial support from federal and state agencies during COVID-19.
 - Alternative strategic choices should be considered and continually evaluated throughout extended emergency situations to account for changes in financial performance, market opportunities, and ability to continue to operate according to the original model.
 - When resources (people and things) are limited, it is imperative for universities to have a plan for how to best focus their efforts, specifically as it relates to operational strategy.
- In order to maintain high capacity during a sustained response, the University should increase efforts to cross-train employees, avoid single points of failure, and realize the lasting impacts staff burnout has on operational outcomes.
 - Division of labor and chain of command
- With mental health being cited as having the most significant impact on staff, faculty, and student wellbeing, emphasis should be placed on enhancing these resources.
 - Invest in education programs for staff, faculty, and students to help increase awareness around mental health resources and invest in educational campaigns that destigmatize seeking out support for mental health.
 - Evaluate the capacity of the ISU Counseling and Testing Center and determine if the added focus on the importance of mental health will continue to stretch their resources.
 - Continuing to offer telehealth options allows easier access to ISU staff, faculty, and students seeking care.
 - Statewide, there were not enough mental health professionals available to meet the demands. Programs centered around growing the industry through more educated professionals available would be of great value to the communities they would serve.
- The use of non-pharmaceutical interventions allowed for safer working and class environments and should continue to be seen as a valuable tool in disease mitigation.

- Stockpiles of supplies should be evaluated to ensure adequate supplies are on hand and a list of alternative vendors available to aid in the event that the normal supply chain is disrupted.
- Screening asymptomatic individuals may not be an option, and the university had to hire a special team to conduct the screening. Hiring permanent staff and investing in innovative ways to monitor disease activity may prove beneficial.
- Consider the long-term investment in self-service PCR testing, as this was a cost-effective and worthwhile disease mitigation strategy.
- Compliance with activities like social distancing, reporting, and masking varied throughout the pandemic. The final conduct meeting for non-compliant housing students didn't occur until August 2022.
- Enforcement strategies should be evaluated, and staffing should be significantly increased in those situations where things like masking and social distancing need to be strictly enforced. Enforcement was difficult, if not impossible, and will likely continue to be something of great controversy. Plans should include strategies for ways to enforce regulations and necessary steps for non-compliance.
- Tasks associated with emergency operations are most successfully accomplished utilizing a clear chain of command, often resulting in different supervision than day-to-day operations.
 - Ensuring employees in response understand how to escalate and resolve issues outside of normal channels quickly is essential.
 - Recognition that with pandemic responses, employees are balancing the needs of their day-to-day responsibilities with operational needs of the emergency, which can lead to an over expectation on the workload an employee can handle. Division of labor is essential, emergency hiring may need to be utilized during times of extended response, and adequate compensation for additional roles should be considered.
 - Utilization of outside resources may be an option if the entire community system is not experiencing the same burdens. Connecting with local and state partners or volunteer organizations for assistance is an option when the greatest resource limitation is staffing.
- Another great asset the University had throughout the response was a robust and dedicated team for all of the marketing and communications needs of the pandemic.
 - Addressing public perception quickly and utilizing the University's branding enhanced the effectiveness of safety protocols and operational needs.
 - Using multiple platforms to increase the likelihood that messages would be reviewed was impactful.
 - Using inspirational messaging (i.e., the President's videos and the use of students in marketing materials) assisted in helping to connect the campus community and drive actions based on the personal desire to help.
 - Having a method to clarify misunderstandings and misinformation quickly is essential, as conflicting messages were a constant during the pandemic.



Recovery: *The most impactful activities of recovery are those that aim to build back better rather than those that just allow universities to return to normal operations.*

Findings

- Starting in March of 2022, many **health-related precautions ended**, including the transition back to masks being optional.
- The **final campus-wide mass COVID communication** was released on March 18th. Shortly after that, the Roaring Back Website, while still available on the ISU website, was no longer visible from the main landing page. A change that reduced the self-reports being submitted.
- COVID-19 had a significant impact on staff, faculty, and students both **mentally and physically**.
 - There was no method available to determine the impact that staffing COVID-19 had, though most departments reported being understaffed.
 - The university is still in the process of evaluating the mental well-being of the campus community post-pandemic, though multiple surveys were conducted to try to gauge this throughout the pandemic.
- The **financial burden** of COVID was dramatically reduced by the significant funding opportunities available through grant opportunities and CARES funding (see chart in Appendix A).
- **Politics and changing guidance** from the Center for Disease Control and Prevention (CDC) made it difficult to determine when the extra COVID precautions should end.
 - Decisions for masking, for example, were not always consistent with CDC guidance, especially as individuals just stopped adhering to the recommendations.
 - Guidance from the CDC was inconsistent and frequent areas of gray were left to be interpreted by University officials.

Recommendations

- Develop processes, so recovery efforts begin as soon as initial response activities end.
 - Ensure units and departments accurately record financial aspects (time and money) spent on disaster activities, as it is much easier to gather this information during the response than to collect it at a later time.
 - Develop mechanisms to address staff burnout and compassion fatigue.
 - Invest in backup systems to support the ability to continue learning when traditional teaching methods and/or physical space are unavailable.
- Getting back to the sense of community and level of compassion as witnessed at the first of the pandemic is essential to recovery by continuing to engage the campus community activities that promote unity. Use these opportunities to strengthen the engagement of the local community in disaster preparedness.
 - Develop risk communication policies for added transparency, timeliness, and accountability.
- Promote health and social investments to staff, faculty, and students through enhanced education and ensure mental health resources are readily available.
 - Conduct ongoing assessments to determine the wellness of the campus community.
 - Provide mental health resources in an equitable and inclusive manner
- Invest time and resources to pursue grant opportunities to aid in mitigation and recovery efforts.

Conclusion

April 15, 2022, marked the [end of the statewide Declaration of Emergency for COVID-19](#), though many questions remain as to what to do now. By this time, most COVID-19 precautions for ISU had ended, though the Health Committee and Roaring Back Chairs continued to monitor the situation. As this report concludes, it certainly feels as though the medical crisis is over, unfortunately, COVID-19 is most likely here to stay. Looking back, the actions needed to prevent another virus outbreak seem simple when compared to successfully navigating through the societal impacts of COVID-19. The pandemic, without a doubt, changed society and businesses everywhere. It brought out both the best in people and the worst. What also became clear is this:

If growth and resilience (no matter the disaster) is the goal, then actions today must be both visionary and deliberate to move forward.

This After Action Report, while comprehensive in nature, cannot begin to identify all the actions necessary to navigate the COVID-19 Pandemic. The actions identified throughout this report largely look at operations rather than academics, so there is a benefit in doing a thorough review of how the process for enrollment and learning changed because of COVID-19. Operationally speaking, though, the University can help its community overcome the challenges of this pandemic and prepare for the next. Recommendations throughout this report can be summarized by looking at actions based on the following three pillars: individual, business, and technology.

The Individual: As the University learns to live and thrive within an environment much different than two years ago, a great deal of responsibility has been put back on the individual. Individuals need to make the best personal choices for their health, recognizing what they can do to protect themselves if they are at high risk for severe illness, or will be visiting areas where community transmission levels are high, or when to stay home if experiencing symptoms. Making healthy choices means taking care of both physical and mental needs. Prioritizing a healthy lifestyle through sleep, exercise, and diet. Putting focus on those things that promote mental well-being, like learning how to deal with stress, having a strong support system in place, taking time to quiet the mind, and asking for help when things are overwhelming.

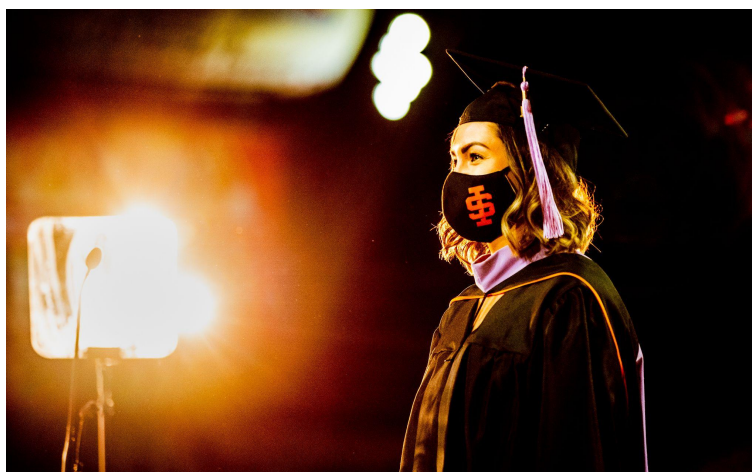
Business Operations: The University can promote a healthy lifestyle, including ways to best protect against COVID-19 and other diseases, through the use of high-quality education and health-related programs. By ensuring accurate information is shared and easy to find, individuals are able to get the information they need for personal accountability from a source they trust. Along with this is making sure programs are in place to help with the mental health of the staff, faculty, and students as the related long-term impacts are yet to be discovered. Promoting business continuity by finding ways to offer learning and work to be accomplished in a flexible manner and allowing for accommodations to occur so that individuals can make the best choices for themselves and those around them. Continuing to build partnerships in the community and

investing in activities that promote preparedness for disasters is also essential to better protect the community it serves. Lastly, a continued and committed focus on technology.

Technology: The expansion of the University's virtual footprint was one of the most significant changes that occurred because of COVID-19. It was necessary to leverage technology in order to rapidly reduce in-person meetings, host web-based learning, and increase teleworking capacities to comply with regulations and safety needs. Technology can also be accredited for improvements in indoor air quality, and providing alternative methods for safety when getting protective equipment was difficult due to challenges related to the supply chain. Technology continues to play a large role in identifying and halting disease spread through the use of testing of symptomatic individuals and the collection of wastewater samples. Advancements in technology changed so much over the course of two years that testing can be done at home, putting the majority of reporting on the individual. This means communities must find a way to identify disease activity without relying on positive tests, as this is no longer an accurate representation.

From the beginning, ISU's leadership leveraged the University's values of trust, compassion, stability, and hope to set the tone for the response. These concepts strengthened the ability to guide the University community through two difficult years with countless unknowns. Another critical response component was an emphasis on integrity and inclusivity during decision-making and information sharing. Educational-focused and timely communication strategies helped to ease tension and uncertainty. All of these elements resulted in an engaged and compassionate community. These are successes that should continue to be celebrated and valued.

Due to the ongoing nature of the response, adjustments were made in real-time, making it difficult to identify all of the significant operational improvements made throughout the pandemic. What became clear, is the physical and mental burden that long-term, ongoing response activities has on an already fatigued team. Investment in planning and resources now could improve efficiencies, thus achieving a more effective response in the future. Uncertainty as to whether COVID-19 will impact the campus community again and reluctance to return to business as usual continues, but there is hope. Collectively, as the lessons learned are applied and a new normal is discovered, the hope of a deeper connection and, ultimately, a more resilient community can be achieved.

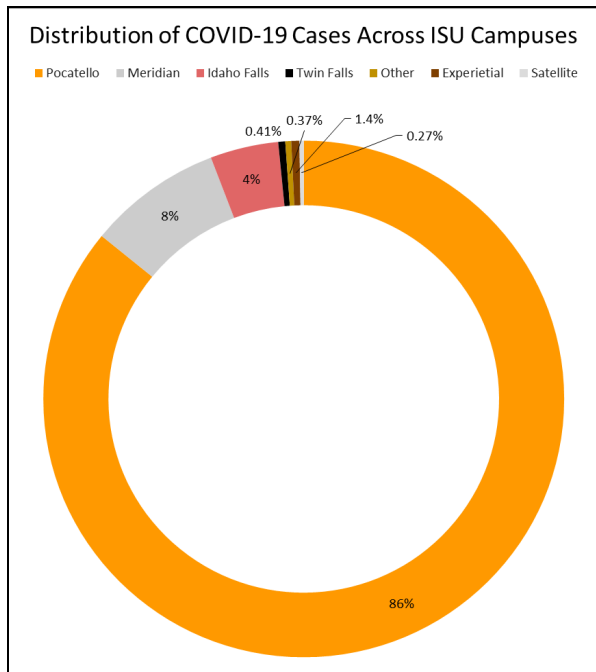


Appendix A: COVID Data & Trends

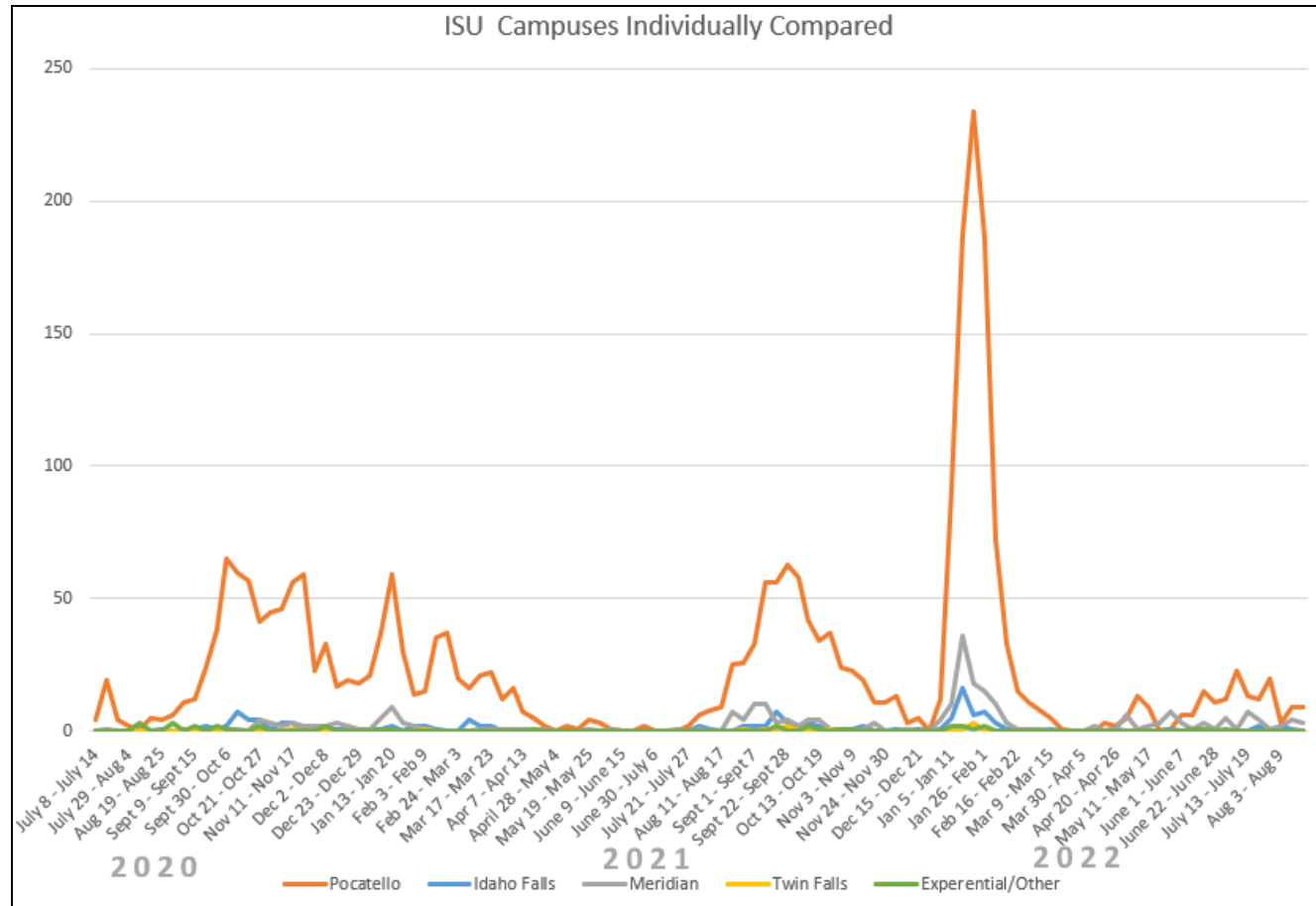
Campus Demographics

Est Student Population	Est Staff & Faculty Population (excluding temp & student employees)
9,800	1,830
On-Campus Housing	Est. Confirmed COVID Cases
Pocatello only	2,900

Distribution of Cases



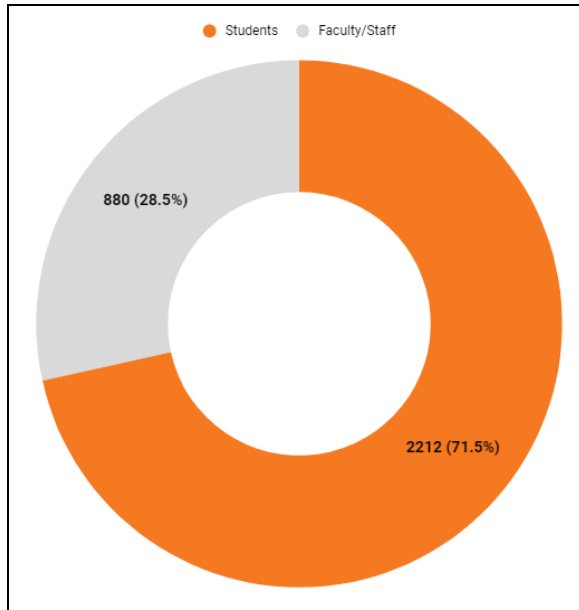
Data analysis and graph created by David Jenkins



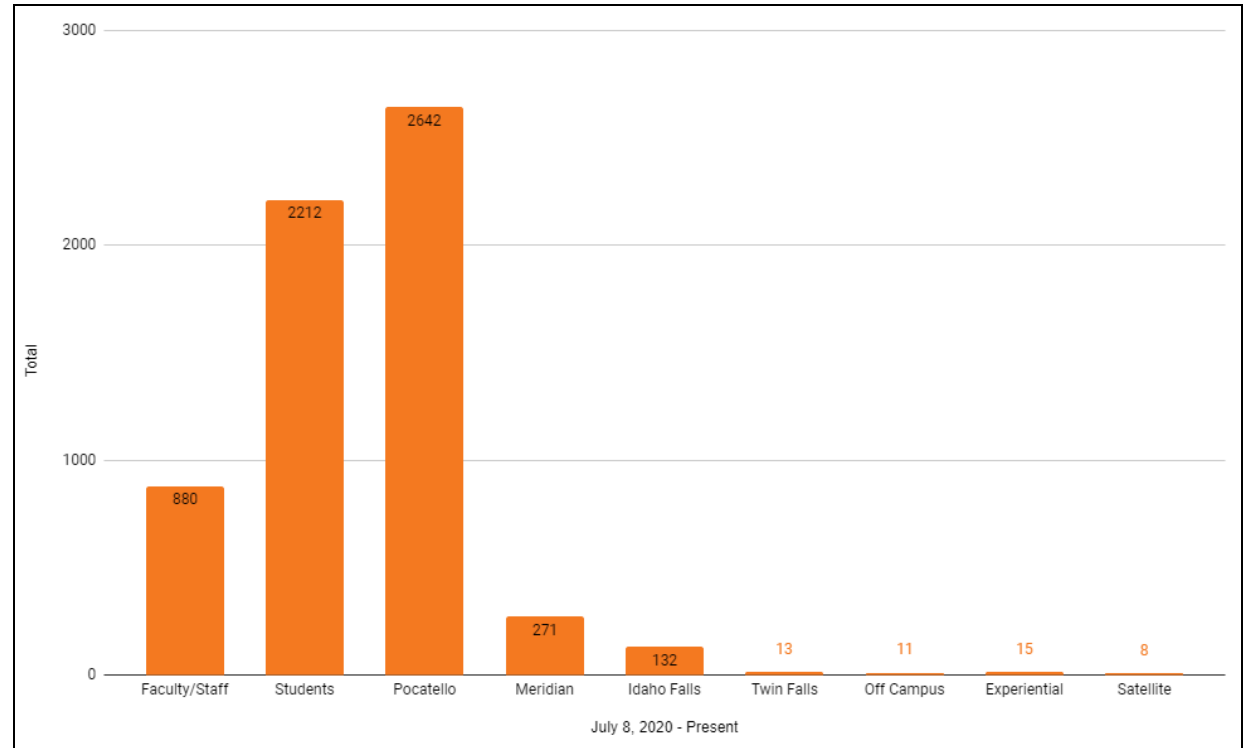
Data analysis and graph created by David Jenkins

Roughly 22% percent of the total ISU population reported having contracted COVID-19 over the course of two years.

Students vs. Faculty/Staff



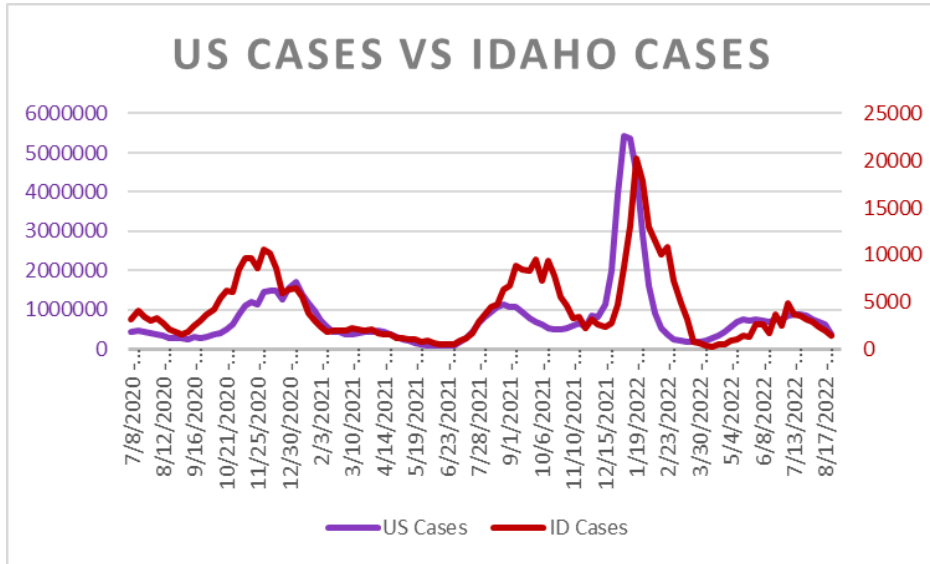
Distribution of Cases



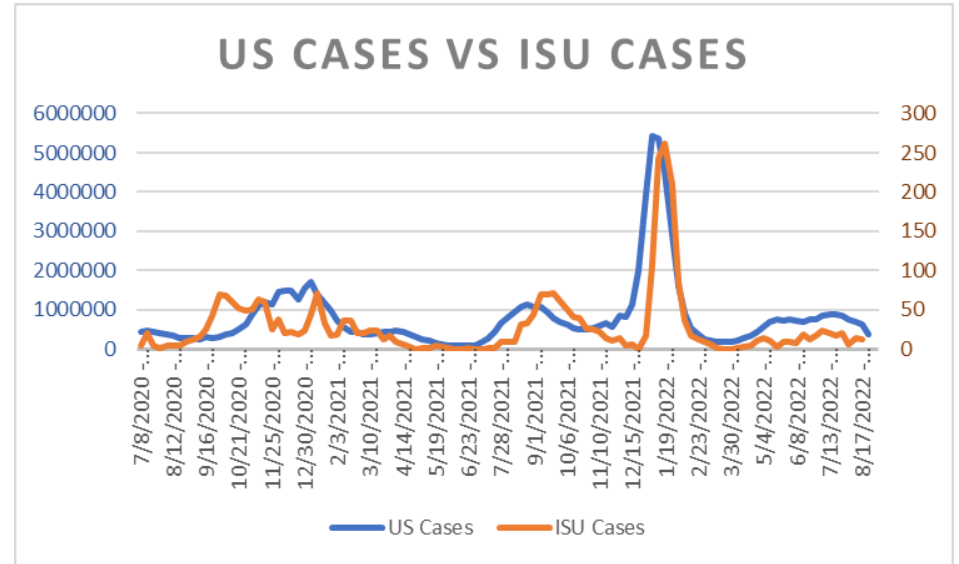
ISU COVID Notable Activities

Total	Activity
19,135	COVID tests administered at EAMES (Aug 2021 to April 2022)
10,029	Vaccines provided at the Sports Medicine facility through a joint partnership with Southeastern Idaho Public Health, Portneuf Medical Center and ISU (Feb 25 - May 21, 2021)
3,134	Cases Investigated
7,121	Individuals screened at ISU screening location Fall 2021 to Summer 2022
2,530	Vaccines administered by Bengal Pharmacy
2,455	COVID tests administered at University Health since March 2020

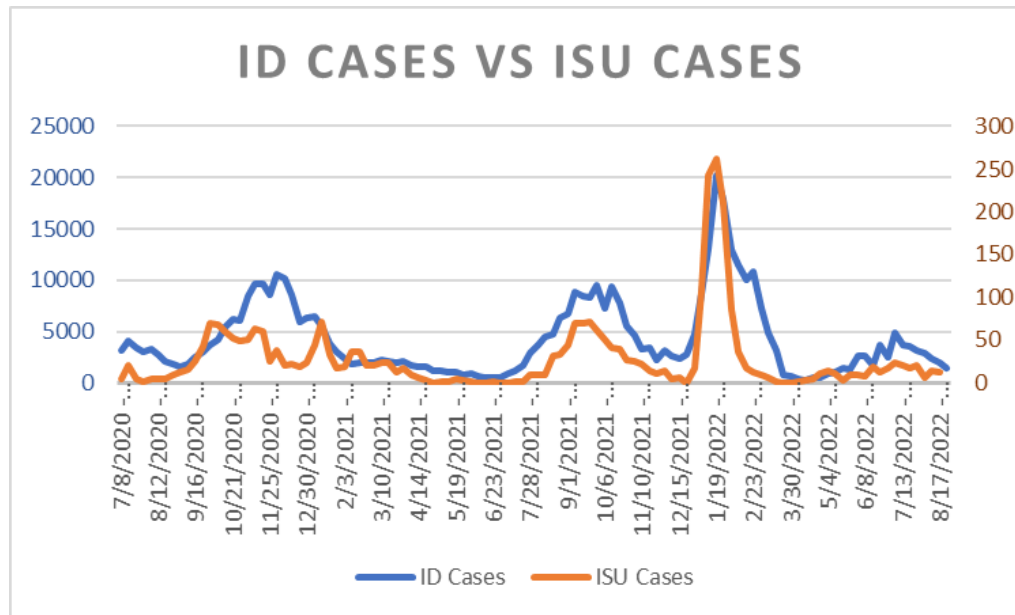
Case Trend Comparisons United States, Idaho, and Idaho State University



Data analysis and graph created by David Jenkins



Data analysis and graph created by David Jenkins

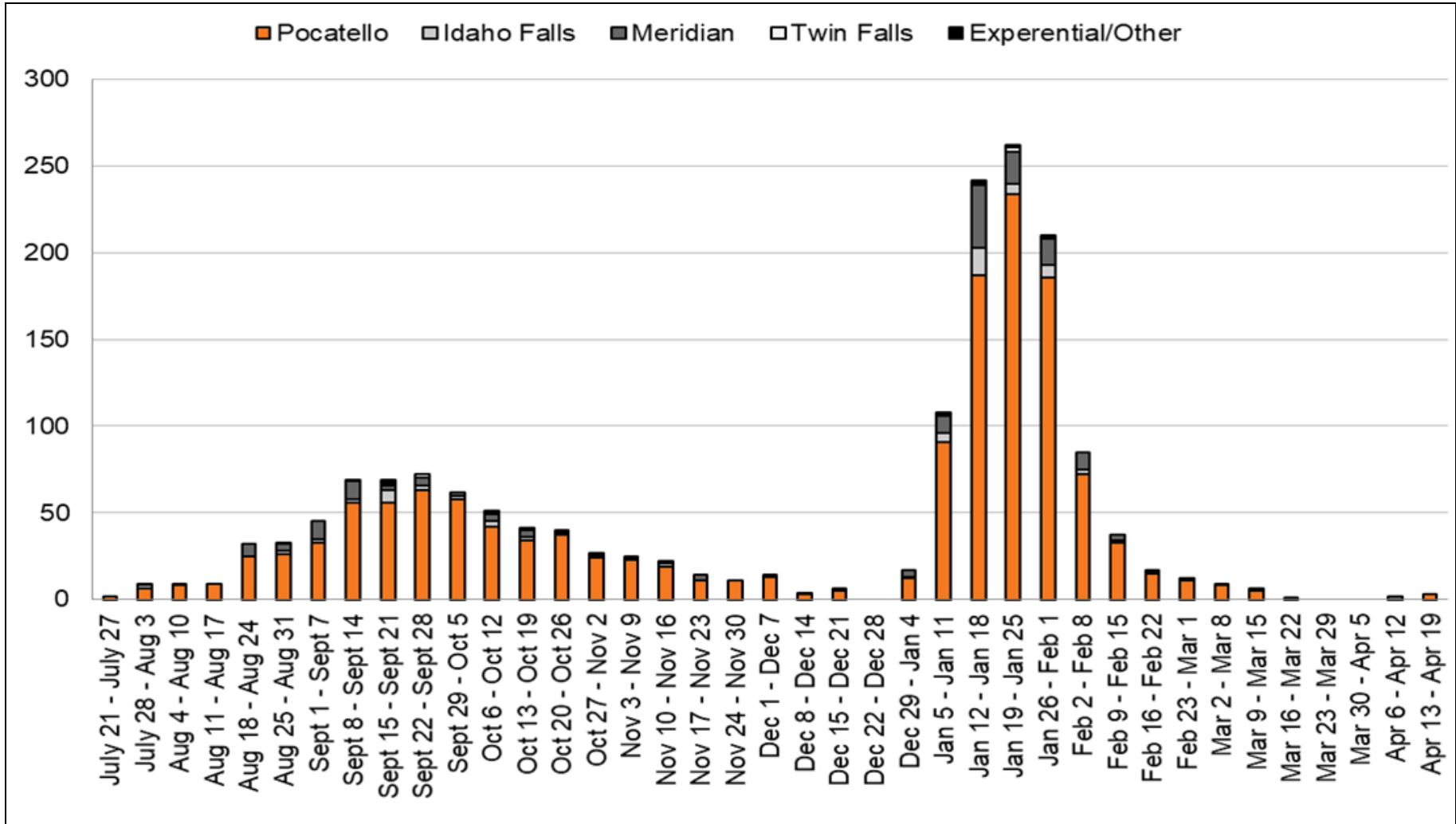


Data analysis and graph created by David Jenkins

Comparison of Delta and Omicron Surges

At the peak of the Omicron surge, there were 3.6x the number of reported COVID cases than was seen during the Delta surge - the second largest COVID surge we have seen.

The Omicron infection curve was much more condensed compared to that of Delta's.



COVID-19 Response and Funds

- University pivoted during the spring semester 2020 and closed housing and dining for most residents. All in-person courses were delivered online and the physical campus was essentially closed.
 - HEERF funding was used to build out and improve the University’s classroom and distance learning technologies.
- The University created a Public Health Office and established a comprehensive list of protocols and procedures to make the University’s main campus as safe as possible.
- Disciplined adherence to COVID-19 protocols and available testing allowed the University to remain open during the 2020-2021 academic year with a mix of online and in-person course delivery.
- University began the Fall 2021 semester with in-person instruction, adhering to a normal academic calendar in terms of breaks and finals.

Federal COVID-19 Related Relief Funds

HEERF I (CARES ACT)

Distributed to eligible students	\$ 3,548,920
Reimbursement of COVID-19 Expenses	1,640,063
Lost Revenue Recovery	1,908,856
	\$ 7,097,839

HEERF II (CRRSAA)

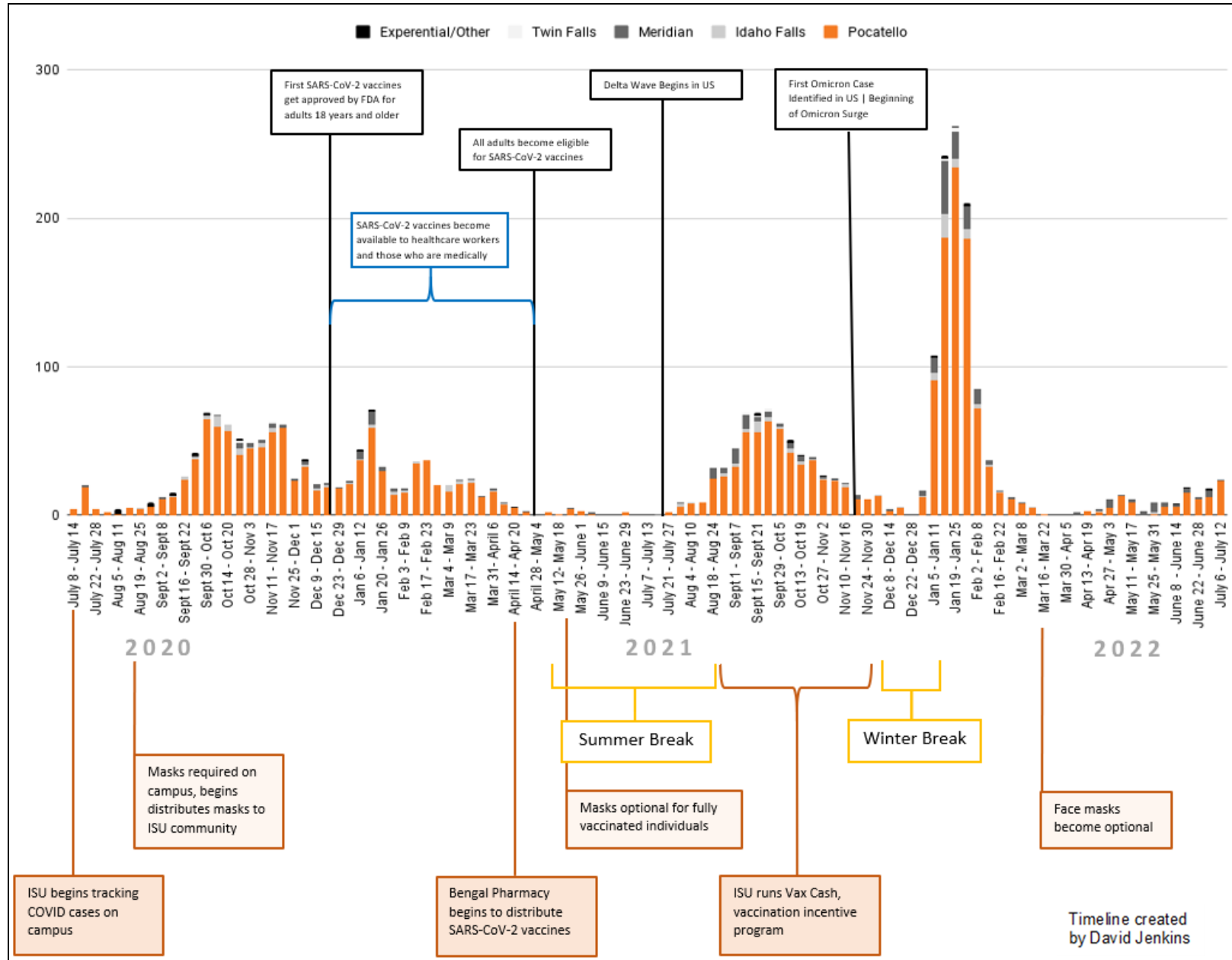
Distributed to eligible students	\$ 3,548,920
Reimbursement of COVID-19 Expenses	1,558,024
Lost Revenue Recovery	7,987,568
	\$ 13,094,512

HEERF III (ARPA)

Distributed to eligible students	\$ 11,582,087
Reimbursement of COVID-19 Expenses	2,607,736
Lost Revenue Recovery	8,638,983
	\$ 22,828,806

Total COVID-19 Related Relief Funding	\$ 43,021,157
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Appendix B: Timeline of Events



Idaho State University Significant Event Timeline

State of Response	Date	Significant Event
Initial Response Activities	March 13, 2020	State declaration
		System-wide Coordination with universities in Idaho
		Idaho State University activated an Incident Command Group
		Determination for need for extended spring break (2 week spring break)
	March 14, 2020	Idaho's first confirmed case - a Student at Meridian Campus Meridian Campus closed for cleaning
		Cancellation of events over 250 capacity, primary audience is high-risk, or if the event will draw audiences from areas with confirmed cases
		Launch of initial ISU webpage dedicated to Coronavirus
	March 15, 2020	Implementation of alternative work & temporary telecommuting
		President Satterlee addresses COVID situation, campus community video message
	March 16, 2020	No in person events greater than 10 people
		In-person spring commencement ceremonies canceled
	March 25, 2020	Statewide stay at home order issued;
		ISU communicates to student and staff/faculty need to stay home for 21 days (President Saterlee's first video message)
March 2020	COVID Project PPE: ISU centralizes PPE for ensure frontline workers had adequate supplies (Departments donated over 12,000 units of PPE and supplies)	
Ongoing Response Activities	March 2020	Distance-based instruction begins
		Social distancing measures implemented

Ongoing Response Activities	Spring 2020	ISU prints 3d printed masks for community frontline workers
	Spring 2020	IT expands wifi capabilities to include outdoor spaces
	April 2020	Idaho State University offers virtual wellness services
		ISU departments make 3D printed face shields, masks, and other PPE for ISU clinics, healthcare workers, and Southeast Idaho emergency responders & health care workers
		Community testing site opens on ISU campus outside of Dyer Hall
		ISU announces Roaring Back: Rebound Plan
	May 2020	First publication of the ISU Roaring Back website
	July 2020	Contact tracing for ISU affiliated confirmed cases
		Launch of Our Bengal Pledge
	August 2020	Community testing site moves to Holt Arena
		Operational Level dashboard launched
		Mass face mask distribution prior to fall semester
	Fall of 2020	Launch of Health Exceptions Process and Self Report Forms
	September 2020	Ambassador Program (Face Covering Ambassador Initiative)
	October 2020	Hiring of full-time contact tracers October 2020
	December 2020	Establishment of the Roaring Back Chairs
		ISU provides ultra cold freezers to Health Departments in Idaho
January 2021	Launch of Screening program	
February 2021	Vaccines @ Sports Med (10,029 vaccines given between Feb 25 and May 21)	
	Development and Activation of the ISU Vaccine Committee	

Steady State	April 2021	Vaccines at Bengal Pharmacy
		Student Anthropological Society and Political Science Club start Covid-19 Bengal Family campaign (care packages for Bengal community and homemade masks for hospitals)
	May 2021	Removal of Mask requirement for fully vaccinated individuals
		Closure of testing site at Holt Arena
	August 2021	Drive up testing opens at EAMES for Community Testing
		Start of Vax for Cash campaign
September 2021	Start of Weekly Covid-19 Updates	
	Mandatory Face Masks on all ISU campuses reinstated	
Transition to Recovery	March 1, 2022	Final ISU Situational Report Released
	March 2, 2022	Face masks become optional on ISU campus, based on community level
	March 18, 2022	Weekly COVID communications end
	April 1, 2022	Community Testing site at EAMES closes
	June 30, 2022	ISU screening site closes
	August 1, 2022	ISU EOC deactivated (Last physical meeting May 12, 2022)
	Sept. 26, 2022	ISU Roaring Back Chairs deactivated

Appendix C: Summary of Survey Results

Area of Focus	Top Strengths	Top Opportunities for Improvement
Decision Making	<ul style="list-style-type: none"> • Team-oriented, collaborative decision making strategy was utilized • Decision points were frequently identified • Transparent communications 	<ul style="list-style-type: none"> • Longer timeline • Decisions made opposite of what data showed/ no data to reference • Timeliness of communication • Clearer decision making through chain of command
Use of Incident Command System & Emergency Operations Center	<ul style="list-style-type: none"> • Coordinated communication • Flexibility • Trust/ dedication 	<ul style="list-style-type: none"> • Communication of decisions • Expansion of committee/ reduce workload • Formally change ICS structure to current structure
Application of Technology	<ul style="list-style-type: none"> • Use of Zoom • Improved wifi/ wifi in parking lots • Working remotely 	<ul style="list-style-type: none"> • Update Owls for better function • Funding/ support for individuals who had to pay for internet, upgraded Zoom, high-speed internet • Schedule for equipment replacement • Find a way to perform both in person and online • Meetings more effectively • Improve remote test proctoring
Community Partnerships	<ul style="list-style-type: none"> • Partnership with Southeastern Idaho Public Health • Providing students with resources • Situational awareness & involvement with other agencies 	<ul style="list-style-type: none"> • Consider including outside agencies as part of the EOC • Continue to build partnerships to be better engaged with other emergencies • Invest in planning to decrease disorganization when working with outside agencies
Campus Experiences & Tools for Success	<ul style="list-style-type: none"> • Prioritizing safety and precautions • Variety & creativity of keeping people connected • Virtual platforms • Flexibility • Support of everyone at the University • Town Halls and videos by President Satterlee 	<ul style="list-style-type: none"> • Greater enforcement of mandates and rules • More notice for cancellation of events • More check-ins with staff/faculty • Be more thankful for frontline/essential workers (evaluate pay, benefits, etc.) • Increase available resources for mental/behavioral/financial burdens due to COVID

<p>Health Response Activities</p>	<ul style="list-style-type: none"> • Communication Campus • Doing the right thing/professional excellence • Having a dedicated Health Team 	<ul style="list-style-type: none"> • More clearly expressed messaging • More streamlined COVID result processes • Mask mandate not always enforced
<p>Policies, Plans and Procedures</p>	<ul style="list-style-type: none"> • Flexibility • Rapid Response • Development of Infectious Disease Policy 	<ul style="list-style-type: none"> • Consistently update Emergency Operations Plans for response • Update and standardize Continuity of Operations Plans (COOP) • Account for plans during extended response plans (Dragging Out) • Situational training and exercises
<p>Protection of Campus Infrastructure</p>	<ul style="list-style-type: none"> • Pandemic response/ cleanliness/ decontamination • Technology ingenuity • Flexibility • Support of faculty and employees • Flexibility of faculty and employees • Dedication and willingness of employees • Zoom equity for outreach campus employees (vs. DL previous to COVID) 	<ul style="list-style-type: none"> • Recognizing supply chain issues • Training & adaptation to online structure • Increased need for IT & technology • Lack of appreciation & increased exposure • HR data accuracy in timely manner • Difficulty with working from home/difficulty returning to work • Consistency while working from home • Lack of preparation for the burnout frontline staff faced
<p>Ability to Maintain Learning</p>	<ul style="list-style-type: none"> • Efficiency & dedication of faculty and staff • Zoom and synchronous online learning • Registrar's Office did a great job rescheduling rooms • Social distancing was possible 	<ul style="list-style-type: none"> • Difficulty with effectiveness of online teaching/ learning • Owl audio quality • Last minute decisions about modality & how it was difficult on staff • Faculty not wanting to come back to face-to-face teaching • The plan suffered when those leading the in-person groups failed to enforce safety measures
<p>Ability to provide Protective Measures</p>	<ul style="list-style-type: none"> • Mask availability (and overall PPE) • Efficiency & ability to order protective items • Signage & ISU branding created "unity" 	<ul style="list-style-type: none"> • Improvement of HVAC in buildings • Have a surplus of rated masks (N95 & KN95) • Improve effectiveness of mask enforcement/ monitoring
<p>Engagement & Communications</p>	<ul style="list-style-type: none"> • Consistent & clear communication • Multiple methods of communication (including Roaring Back website) • Proactive and caring leadership • Testing, screening, vaccinations, & PPE readily available • Dedicated website/ dashboard • Students were a part of safety initiatives 	<ul style="list-style-type: none"> • Possible over communication • Conflicting information sent out/ received • More thanks to frontline workers • Communication of why certain decisions were made • Increased frequency of Town Halls • Better use of social media • More focus on emotional & mental state of students

Appendix D: Information & Communications

-Idaho State University Rebound Plan, April 2020

University Rebound Plan		Current Phase March 25 - April 30	Stage One May 1-15	Stage 2 May 16-29	Stage 3 May 30-June 12	Stage 4 June 13-26
ACADEMICS	Face-to-Face Instruction					Some exceptions allowed
STUDENT SERVICES	Dining Halls	Continue carry-out and delivery options		Continue carry-out and delivery operations; limited seating		Limited seating options
	University Housing	Significantly reduced and modified operations			Housing options provided on an individual basis	
	Face-to-Face Support Services			Most services offered remotely with rotating in-office skeleton crews		
COMMUNITY HEALTH	University Health	Operations continue using established public health guidelines and best practices				
	Other University Clinics			Essential and/or emergency services		
CAMPUS OPERATIONS	Public Safety	Operations continue using established public health guidelines and best practices				
	Campus Computer Labs	Remains open using social distancing and established public health guidelines				
	Early Learning Center			Reopen with business health protocols		
	Reed Gym			Limited patron access		
	Mail Center	Appointment only				Campus delivery resumes
	University Bookstore	Limited in-store access				
	Student Union	Limited access				
	Campus Events and Meetings			Less than 10	10-50 persons with social distancing	
	Facilities Services	Operations continue using established public health guidelines and best practices				
RESEARCH	Research Labs			Requires approval from Office for Research		
TRAVEL	Business-Related Travel			Where allowed; based on travel destination	Where allowed; based on travel destination	
COMMUNITY	Idaho Museum of Natural History					Less than 50 persons with social distancing

Operation halted and/or offered remotely
 Limited on-campus operations
 "New normal" operations implemented

-Our Bengal Pledge, July 30, 2020



Links to Additional Communication Examples
<u>“Our Bengal Pledge” Video</u>
<u>“Roaring Remotely” Video</u>
<u>“Committed to Your Safe Return” Video</u>
<u>Screening Program Video</u>
<u>Training: Responding to COVID-19 (students)</u>
<u>Training: Responding to COVID-19 (employees)</u>

Bengal Pledge

Being a part of the Bengal community means taking essential steps to stay well and protect each other. Every student, faculty, and staff member has a responsibility to practice healthy behaviors and follow Idaho State University’s established safety guidelines to prevent the spread of COVID-19. Together, we can help protect our campuses, families, friends, and communities while focusing on Idaho State’s educational mission.

I
pledge
to

- ### 1. Protect Myself


 - Monitor for symptoms of COVID-19 and report to a medical professional if I experience: fever of 100.4 F (38 C) or higher, dry cough, difficulty breathing, chills, repeated shaking with chills, muscle pain, headache, sore throat, or loss of taste or smell
 - Wash my hands often with soap and water or use hand sanitizer
 - Avoid crowded activities or social gatherings where face coverings are not being worn and physical distancing is not possible
- ### 2. Protect Other Bengals

 - Wear an appropriate face covering and follow guidance as directed by the University
 - Maintain appropriate physical distancing of six feet when on campus
 - Stay home if I feel ill or after potential exposure to someone who is ill or has tested positive for COVID-19
 - Look out for others and encourage their continued commitment to the Bengal Pledge
- ### 3. Protect Our Campus Community

 - Keep my clothing, belongings, personal spaces, and shared common spaces clean
 - Report any symptoms or COVID-19 exposure and participate in testing and contact tracing, as applicable and required
 - Follow medical guidance and isolate for the required amount of time if I test positive for COVID-19 or have exposure to someone who has tested positive
 - Carefully observe instructional signs and follow University directions












#BengalPledge

-Operational Levels, Launch Fall of 2020

		Operational Levels			
		Level Green	Level Yellow	Level Orange	Level Red
		 Idaho State University			
Protocol for Integration of Public Health Alert Levels with Idaho State University Operations					
General Safety Guidelines	Face Coverings	Required	Required	Required	Required
	Group Size*	Health exceptions submission required for groups over 100	Health exceptions submission required for groups over 50	Health exceptions submission required for groups over 10	No groups permitted
	Physical Distancing	Six-foot distancing	Six-foot distancing	Six-foot distancing	Six-foot distancing
Academics	Instruction	Course delivery is HyFlex with a mix of in-person and distance-based instruction. Exceptions for courses unable to maintain 6-foot distancing are approved through the COVID-19 Health Committee.	Courses must prepare to move to a fully distance format. Faculty members have the option of moving courses to distance-based instruction.	Course delivery is primarily distance-based. Courses where online delivery is not feasible, such as skills labs, may remain in-person with a new or previously approved Health Plan.	Course delivery is entirely distance-based. Faculty may access campus if needed to deliver content.
	Clinical/Experiential Learning	Assumption of risk documentation required	Assumption of risk documentation required	Assumption of risk documentation required	Determined by partner institutions
Student Services	Support Services	Face-to-face support services open	Face-to-face support services open	Essential services available remotely, with skeleton crews in place	Services available remotely. Physical offices closed.
	University Housing	Normal operations with health department approved plan for distancing	Normal operations with health department approved plan for distancing	De-density housing. Basic services provided	Residence halls are emptied, and students without other options are allowed to remain on campus
	Dining Halls	Offers carry-out, full-service (not self-service) buffet, limited seating	Offers carry-out, full-service (not self-service) buffet, limited seating	Carry-out and delivery only	Grab-and-go only for students who remain in housing.
Community Health	University Health Center	Open with health precautions	Open with health precautions	Open with health precautions	Limited operations
	Clinics	Operational	Operational	Limited operations for non-essential clinics	Non-essential clinics closed
Campus Operations	Building Access	Open as normal	Open as normal	Limited	Closed
	Computer Labs	Open with spaces configured for physical distancing	Open with spaces configured for physical distancing	Open with spaces configured for physical distancing	Closed
	Early Learning Center	Open with health protocols	Open with health protocols	May remain open with health protocols	Closed
	Reed Gym	Open with health protocols	Open with health protocols	May remain open with health protocols	Closed
	Campus Mail Center	Open with health protocols	Open with health protocols	Open with health protocols	Limited service hours and suspension of mail delivery
	Public Safety	Services provided to all campus locations	Services provided to all campus locations	Services provided to all campus locations	Essential services provided
Research	Research Labs	Ongoing, with required distancing and hygiene measures	Ongoing, with required distancing and hygiene measures	Ongoing, with required distancing and hygiene measures	Conduct only essential activities as needed
Travel	Business-Related Travel	Non-essential travel is prohibited. Essential travel requires VP approval. Essential day trips and travel between campuses approved by the supervisor. Travel between campuses must be approved by VP if an overnight stay or vehicle sharing is needed.	Non-essential travel is prohibited. Essential travel requires VP approval. Essential day trips and travel between campuses approved by the supervisor. Travel between campuses must be approved by VP if an overnight stay or vehicle sharing is needed.	Non-essential travel is prohibited. Essential travel, even between ISU campuses, requires VP approval. Candidate travel for on-campus interviews is prohibited.	Non-essential travel is prohibited. Essential travel, even between ISU campuses, requires VP approval. Candidate travel for on-campus interviews is prohibited.
Campus Events and Activities	External Events and Meetings	Events are permitted with review and approval of a health exception submission, group size <100	Events are permitted with review and approval of a health exception submission, group size <50	Only critical, mission-congruent community events, group size <10	All in-person events cancelled
	Athletics	All practices allowed, with training groups of 50 or fewer for football. Strength and conditioning facilities open with physical distancing and hygiene measures implemented. Training services by appointment only.	Practices allowed in small cohorts. Strength and conditioning facilities open with cohorts of 15 or less, with physical distancing and hygiene measures implemented. Training services by appointment only.	All practices and games cancelled. Strength and conditioning facilities open with cohorts of 15 or less, with physical distancing and hygiene measures implemented. Training services by appointment only.	All practices and games cancelled. Strength and conditioning facilities closed. Training services by appointment only.
	Idaho Museum of Natural History	Open to the community with health protocols	Open to the community with health protocols	May remain open with health protocols	Closed
University Employees	Faculty	Operating under "new normal" guidelines	Operating under "new normal" guidelines	Teach via distance-based instruction and develop a workload that includes remote work as much as possible.	Teach via distance-based instruction. Work from home as much as possible. Health exceptions for in-person groups are revoked.
	Staff	Operating under "new normal" guidelines	Operating under "new normal" guidelines	Supervisors assign remote job assignments where feasible, with rotating skeletal crews on campus where necessary.	All staff given remote work where possible. Essential security, maintenance and operations staff may be assigned on-campus shifts as needed.

*Academic courses are exempt from group size limits due to pre-approved health protocols in place.

-Operational Levels, Update August 2021

 Idaho State University		<h1 style="text-align: center;">Operational Levels</h1>									<small>UPDATED: August 11, 2021</small>
	 Face Coverings and Distancing	 Teaching and Learning	 Campus Events	 Housing and Dining	 Community Health	 Research	 Business and Operations	 Travel	 Employees	 Screening Program	
Level Orange <small>LOW RISK</small> <hr style="width: 20%; margin: 5px auto;"/> <i>New Normal</i>	Face coverings are required for individuals who are not fully vaccinated. No physical distancing requirement is in place.	In-person instruction is provided with no physical distancing requirements.	On-campus events and in-person activities of any size are allowed, permitting that enhanced precautions, in place at the time, are followed. There are no restrictions on food service.	Housing and on-campus dining offer in-person operations and services. All enhanced precautions in place at the time must be followed.	University clinics and health services are fully operational. Face coverings are required in all health clinics.	All research activities operate normally.	All services and business functions operate using their standard delivery format.	All travel is conducted using CDC guidelines for vaccinated and unvaccinated individuals.	Normal on-campus presence and work schedules are in place for faculty and staff, unless working under an approved remote work agreement or other accommodation.	Screening available to campus as needed.	
Level White <small>INCREASED RISK</small> <hr style="width: 20%; margin: 5px auto;"/> <i>In-Person Operations Enhanced Guidelines</i>	Face coverings are required indoors for all individuals (regardless of vaccination status) unless alone in a private office or workspace. No physical distancing requirement is in place.	In-person instruction is provided with no physical distancing requirements.	On-campus events and in-person activities of any size are allowed, permitting that enhanced precautions, in place at the time, are followed. Food service should include served options, takeaway, or boxed meals (no self-serve buffets).	Housing and on-campus dining offer in-person operations and services. Face coverings are required in common areas.	University clinics and health services are fully operational. Face coverings are required in all health clinics.	All research activities operate normally. Labs jointly operated by external partners should follow the most stringent guidelines for face coverings and distancing.	All services and business functions operate using their standard delivery format. When appropriate, departments should consider remote-based options for meetings.	All travel is conducted using CDC guidelines for vaccinated and unvaccinated individuals.	Normal on-campus presence and work schedules are in place for faculty and staff, unless working under an approved remote work agreement or other accommodation.	Screening available to campus as needed. Certain groups may be selected and required to participate in the screening program.	
Level Gray <small>MODERATE RISK</small> <hr style="width: 20%; margin: 5px auto;"/> <i>Limited Opening</i>	Face coverings and six-foot physical distancing are required.	Course delivery is primarily HyFlex or distance-based instruction. Courses that must be in person and are unable to maintain six-foot distancing must be approved by the University Health Committee.	In-person events are permitted using the health exception process. Group sizes and food service are limited.	Housing may be limited to allow for physical distancing. Dining options will include carry-out and full service (not self-service) buffet. Dining halls may have limited seating.	Health clinic services may be limited to follow enhanced health and safety precautions.	Research activities continue normally permitting that physical distancing and other enhanced health guidelines can be maintained.	All services and business functions operate using a combination of virtual, remote, and face-to-face formats. Whenever possible, all meetings should be virtually hosted.	Essential and non-essential travel may be limited and require approval of a vice president. Candidate travel for on-campus interviews may be limited.	Where feasible, supervisors should assign remote work and implement rotating on-campus skeleton crews.	Screening available to campus as needed. Certain groups may be selected and required to participate in the screening program.	
Level Black <small>HIGH RISK</small> <hr style="width: 20%; margin: 5px auto;"/> <i>Remote Operations</i>	Face coverings and six-foot physical distancing are required.	Courses are primarily delivered using distance-based options, with in-person exceptions approved by the University Health Committee. If needed, faculty may access campus to deliver course content.	In-person events of all sizes are cancelled or moved to a virtual format.	Residence halls are vacated. Students without other housing options are allowed to remain on campus. Dining options are grab-and-go and delivery for on-campus residents.	Health clinics may be closed and/or operated using remote options.	Essential research activities are conducted, as needed, through the health exception process and approved by the University Health Committee.	All services and business functions are moved to distance-based and remote formats.	Non-essential travel is prohibited. Essential travel requires approval of a vice president. Candidate travel for on-campus interviews is prohibited.	Only essential personnel are present at all campus locations, as approved by vice president.	Screening may be required for employees and students with an on-campus presence.	

-Operational Levels, Update March 2022 (Final)

UPDATED: March 4, 2022

isu.edu/roaringback

With current high levels of vaccination and population immunity from both vaccination and infections, the risk of medically significant disease, hospitalization, and death from COVID-19 is greatly reduced. Idaho State University will use the Centers for Disease Control and Prevention's updated COVID-19 Community Levels to determine on-campus operations and guidelines. All members of the campus community are expected to follow the guidance of their campus or outreach center location. The University will adjust campus-specific operational levels based on changes made by the CDC. **Each campus locations may operate under a different level depending on their county's situation and metrics.**

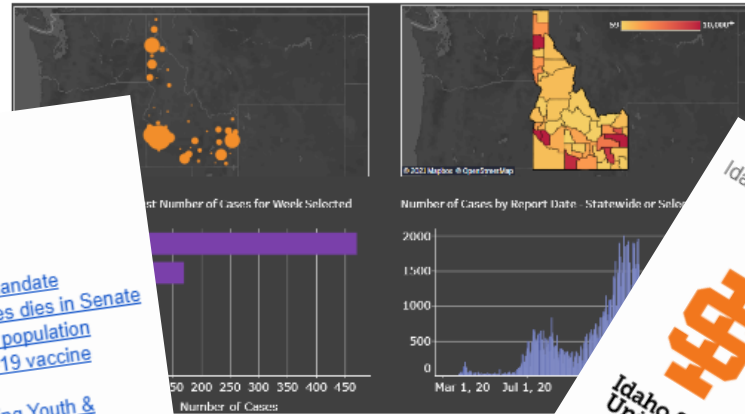
Operational Levels

	 Face Coverings	 Teaching and Learning	 Campus Events	 Housing and Dining	 Community Health	 Research	 Business and Operations	 Travel	 Employees	 Screening Program
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Low	Face coverings are optional.	In-person instruction is provided with no physical distancing requirements. Hyflex and distance-based options are made available.	On-campus events and in-person activities of any size are allowed, permitting that enhanced precautions, in place at the time, are followed. There are no restrictions on food service.	Housing and on-campus dining offer in-person operations and services. All enhanced precautions in place at the time must be followed.	University clinics and health services are fully operational. Face coverings may be required in health clinics.	All research activities operate normally.	All services and business functions operate using their standard delivery format.	Check your destination's COVID-19 situation before traveling. State, tribal, local, and territorial governments may have travel restrictions in place.	Normal on-campus presence and work schedules are in place for faculty and staff, unless working under an approved remote work agreement or other accommodation.	Screening available to campus as needed.
Medium	Face coverings are optional.	In-person instruction is provided with no physical distancing requirements. Hyflex and distance-based options are made available.	On-campus events and in-person activities of any size are allowed, permitting that enhanced precautions, in place at the time, are followed. There are no restrictions on food service.	Housing and on-campus dining offer in-person operations and services. All enhanced precautions in place at the time must be followed.	University clinics and health services are fully operational. Face coverings may be required in health clinics.	All research activities operate normally. Labs jointly operated by external partners should follow the most stringent guidelines for face coverings and distancing.	All services and business functions operate using their standard delivery format. When appropriate, departments should consider remote-based options for meetings.	Check your destination's COVID-19 situation before traveling. State, tribal, local, and territorial governments may have travel restrictions in place.	Normal on-campus presence and work schedules are in place for faculty and staff, unless working under an approved remote work agreement or other accommodation.	Screening available to campus as needed. Certain groups may be selected and required to participate in the screening program.
High	Face coverings are required indoors.	In-person instruction is provided with no physical distancing requirements. Hyflex and distance-based options are made available.	In-person events are permitted using the health exception process. Group sizes and food service may be limited.	Housing may be limited to allow for physical distancing. Dining options may include carry-out and full-service (not self-service) buffet. Dining halls may have limited seating.	Health clinic services may be limited to follow enhanced health and safety precautions.	All research activities operate normally. Labs jointly operated by external partners should follow the most stringent guidelines for face coverings and distancing.	All services and business functions operate using their standard delivery format. When appropriate, departments should consider remote-based options for meetings.	Check your destination's COVID-19 situation before traveling. State, tribal, local, and territorial governments may have travel restrictions in place.	Normal on-campus presence and work schedules are in place for faculty and staff, unless working under an approved remote work agreement or other accommodation.	Screening available to campus as needed. Certain groups may be selected and required to participate in the screening program.

-Example Situational Report

ISU Situational Report Tuesday, April 27, 2021
Current Trends and Hot Spots:



Coronavirus Situational Report
Date: April 27, 2021 Time: 0900

Top Weekly Updates:

- 04/26/21 [City of Pocatello lifts mask mandate](#)
- 04/26/21 [Bill to prohibit mask mandates dies in Senate](#)
- 04/26/21 [States ranked by percent of population who've received at least one COVID-19 vaccine \(Idaho ranked 47th\)](#)
- 04/24 [Updated Guidance for Operating Youth & Summer Camps during COVID-19](#)
- 04/23 [CDC & FDA determine Johnson & Johnson vaccine can be resumed](#)

Data Update

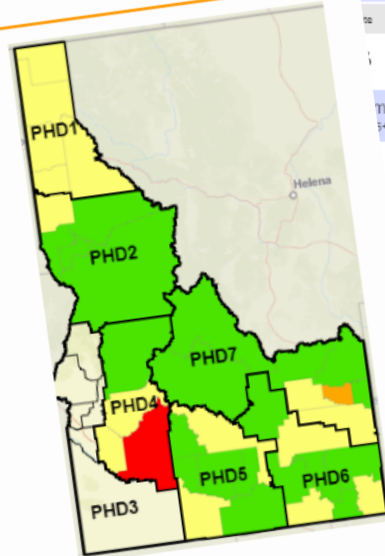
Total in the US:

Total Cases: 31.8M
Total Deaths: 569K
Total Vaccines Administered: 230.7M
Total Doses Distributed: 290.6M

State of Idaho:

Total Cases: 186,365
Total Deaths: 2,032
Total Vaccines Administered: 1,020,224
Individuals with at least one dose: 591,954
Individuals fully vaccinated: 460,117

[\(Map of Transmission Risk Levels\)](#)



Idaho	
% Doses Administered	74.1%
Completed by Age Group	42.2%
Completed by Age Group	72.2%

Useful Links:

- ISU's COVID-19 Dashboard: [COVID-19 Dashboard | Idaho State University \(isu.edu\)](#)
- ISU Event Calendar: [https://www.isu.edu/calendar/](#)
- Find your local public health district: [Idaho Public Health Districts \(COVID-19\) \(idaho.gov\)](#)
- State of Idaho's COVID-19 Dashboard, Vaccines, and other Resources: [Welcome to Novel Coronavirus](#)
- The Center for Disease Control & Prevention resources, recommendations and guidance for Coronavirus: [Coronavirus Disease 2019 \(COVID-19\) | CDC](#)
- CDC's resources for Higher Education: [Colleges and Universities | COVID-19 | CDC](#)
- World Health Organization: [WHO | World Health Organization](#)



-Counseling Services

Acknowledge your feelings and emotions. Allow yourself time to reflect on what you are feeling and how you may be reacting to or coping with these feelings.



Pay attention to positive news instead of only focusing on negative and fear-producing reports.

Please reach out to our office at (208) 282-2130 or other campus resources if you (or another student you know) are experiencing any of the following:

- Increased anxiety, worry, fear, and feelings of being overwhelmed
- Depressive symptoms that persist and/or intensify
- Inability to focus or concentrate accompanied by decreased academic performance
- Sudden anger and disruptive behaviors or noticeable changes in personality
- Isolating or withdrawing from others, fear of going into public situations
- Unhealthy coping (e.g. increased alcohol or drug use, engaging in risky/impulsive behaviors)
- Sleep difficulties
- Excessive crying

**COVID-19
stressing
you out?
You're not
alone.**

Practice these coping tips
and visit
isu.edu/coronavirus-stress

Maintain your day-to-day normal activities and social outlets. Resist withdrawing and isolating yourself from the support and caring that others can provide.



Seek accurate information from "The Center for Disease Control and Prevention" and limit exposure to social media and news reports that provide no new information.



Follow the protection and prevention tips given by medical professionals such as the Health Center here on campus, national medical authorities and your own medical doctor.



**Idaho State
University**

Counseling and
Testing Service

-COVID Guidance



In public spaces wear a
Face covering



Cover
coughs and sneezes



At all times,
maintain 6 feet of

**Physical
distancing**



Stay home if you or someone
in your household are
experiencing COVID-19

Symptoms



Wash
your hands

Disinfect
surfaces and high-touch
objects regularly



Idaho State
University

COVID-19 Hotline: (208) 282-2705
covid@health.isu.edu
isu.edu/roaringback

Face Coverings

Face coverings are required in all shared or public spaces such as common work areas, hallways, meeting rooms, classrooms, research labs, when meeting with someone in a private office, and outdoors when in the presence of other individuals.

FERPA/HIPAA

Due to federal privacy regulations, a student or employee's personal health information must be kept confidential and generally may not be disclosed without specific written consent or in certain legally-defined situations. Therefore, if a student or employee discloses their medical information to you, do not share that information with colleagues or other students unless the Health Committee provides instructions to do so.

What do I do if ...

A GUIDE FOR WHAT TO DO
IN SITUATIONS RELATED TO
COVID-19



Idaho State
University

Appendix E: Appreciation and Acknowledgement

Incident Command Group and Emergency Operations Center

Participating Divisions/Departments/Programs

- Academic Affairs
- Athletics
- Bengal Depot
- Bengal Pharmacy
- Campus Operations
- Counseling and Testing
- Custodial Services
- Division of Health Sciences
- Educational Technology Services
- Environmental Health & Safety
- Emergency Management
- Events
- Facilities Services
- Faculty & College Leadership
- Finance
- Health Center
- Housing
- Human Resources
- Instructional Technology Resource Center
- Information Technology Services
- Kasiska Division of Health Sciences
- Marketing and Communications
- Office of Disability Services
- Office of Equity & Inclusion
- Office of General Counsel
- Office of Registrar
- Office of Research
- President's Office
- Public Safety
- Student Affairs and Enrollment Management
- Student Union Event Services
- University Advancement
- University Programs, Meridian
- University Programs, Idaho Falls

Dedicated Committee Members

- Covid Health Team
- Employee Operations Committee
- Student and Campus Services
- Vaccination Committee
- Roaring Back Chairs
- Instructional Committee
- Community Partners in Response

A very special thanks....

To the many students, staff, and faculty who volunteered their time to help the COVID-19 operations and lived out the Bengal Spirit. Our testing, screening, and vaccination efforts would not have been possible without this commitment and willingness to assist not only on the ISU campus but the whole community. The expertise of the many individuals associated with the ISU Health and Pharmacy programs proved to be valuable assets throughout the communities they serve. Health districts, pharmacies, hospitals, and clinics alike benefited from the many ISU programs dedicated to educating health professionals. The students of ISU showed dedication, professionalism, and an undeniable proof of the value behind the education we provide through their many volunteer and internship roles throughout the pandemic.



*This After Action Report was prepared by
Idaho State University's Department of Public Safety's Emergency Management.
For questions, comments, or feedback, please contact:*

Emergency Management

Department of Public Safety

625 East Humbolt Street | Pocatello, Idaho 83209-8140

(208) 282-2515 | emergencymanagement@isu.edu