Guidance for UC locations concerning COVID-19

This guidance document has been prepared by the UC Office of the President to provide standardized systemwide guidance concerning COVID-19 and to assist UC locations in issuing local procedures, should they wish to do so. The guidance applies to all UC locations, including campuses, UC health systems, Agriculture & Natural Resources and the Lawrence Berkeley National Laboratory.

This guidance document provides information and recommendations to assist academic leaders, managers and supervisors in addressing concerns related to COVID-19. The virus causing this illness is different from common coronaviruses that circulate among humans and cause mild illness, similar to the common cold. The recommendations below will help prevent its spread.

UC will act in accordance with all applicable public health directives and UC’s guidance, policies and regulations cannot conflict with public health orders.

For the latest information on travel warnings and UC-related updates, go to ucal.us/coronavirus

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1 COVID-19 (an acronym for coronavirus disease 2019) is an infectious disease caused by the severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2). That virus was assigned the temporary designation of 2019 novel coronavirus (2019-nCoV). Because of the large number of publications and guidance documents produced, the virus may still be referred to by its temporary designation in some references.

2 SARS-CoV-2
Questions/answers related to all members of the UC campus community

- What should leaders, managers and supervisors communicate to UC individuals concerning COVID-19?
- What should leaders, managers and supervisors communicate to UC individuals regarding travel to countries where a CDC Warning - Level 3 Travel Notice has been issued due to COVID-19?
- What should leaders, managers and supervisors communicate to UC individuals regarding travel to countries where there is an ongoing outbreak of COVID-19 respiratory illness but a Warning - Level 3 has NOT been issued due to COVID-19?
- What should leaders, managers and supervisors communicate to UC individuals already in a foreign country where a CDC Warning - Level 3 Travel Notice has just been issued due to COVID-19?
- What should leaders, managers and supervisors communicate to UC individuals returning from a country where there is an ongoing outbreak of COVID-19 respiratory illness?
- Should individuals who have, in the past 14 days, been to mainland China and DO NOT show signs of respiratory illness be permitted to return to normal on-site activities?
- What actions should a UC location take if individuals who have entered the U.S. after being in an affected geographic area within 14 days of symptom onset DO HAVE symptoms of respiratory illness?
- Should UC locations implement restrictions on individuals returning from locations outside of mainland China where there is an ongoing outbreak of COVID-19 respiratory illness?
- If a child is sick, may a UC-affiliated child care center refuse services to the child?
- Are there steps that leaders, managers and supervisors can take to prepare for an outbreak of COVID-19?
- Should UC Health locations, emergency services or EH&S departments distribute masks (i.e., N95 respirators) to any member of the UC community upon request?

Questions/answers related to employees

- What steps should be taken if an employee becomes ill with fever, cough or other concerning symptoms?
- Does the Family and Medical Leave Act (FMLA) or California Family Rights Act (CFRA) entitle an employee to take leave to avoid contracting COVID-19?
- Should UC require an employee who is out sick (not due to COVID-19) to provide a health care provider’s note?
- May UC prohibit an employee from coming to work if the employee is known to have had close contact with someone who has been confirmed to have COVID-19, or who has contracted COVID-19?
- Do the same leave policies apply to represented and non-represented employees?
- What signs and symptoms may indicate that an employee has become ill with COVID-19?
- What additional steps should be taken if an employee is suspected to be ill with COVID-19 at work?
May UC require an employee who was possibly exposed to COVID-19 and directed to remain quarantined or practice social distancing, or an employee who contracted COVID-19, to provide certification from a health care provider before returning to work?

Must UC grant leave to an employee who is sick with COVID-19?

Must UC allow employees who are parents or caregivers time off from work to care for sick family members?

Does the foregoing advice, with regard to leave, also apply to academic employees?

Questions/answers related to students

May UC quarantine or isolate students who were possibly exposed to, or who have contracted, COVID-19?

What steps should be taken before UC initiates quarantine or isolates students who have contracted SARS-CoV-2 or exhibit symptoms of COVID-19?

May UC prohibit students who have possibly been exposed to, or who have contracted, COVID-19 from attending classes?

Questions/answers related to privacy and duty to report

Is there a duty to report COVID-19 cases to state or local health authorities?

What are the responsibilities of local and/or state health departments once they have been notified of a case of COVID-19?

May student health care providers disclose personal information related to a student suspected to have, or known to have, COVID-19, without consent, as necessary to control the disease?
Questions/answers related to all members of the UC campus community

What should leaders, managers and supervisors communicate to UC individuals concerning COVID-19?

The Centers for Disease Control and Prevention (CDC) recommends that everyone should be informed of the precautionary measures they can take to stay healthy, as follows:

- Cover your nose and mouth with a tissue when you cough or sneeze. Throw away the tissue after you use it.
- Wash your hands often with soap and water, especially after you blow your nose, cough or sneeze. If soap and water are not available, alcohol-based hand cleaners with at least 60% alcohol are also effective.
- Avoid touching your eyes, nose or mouth. Germs spread that way.
- Try to avoid close contact with anybody who has a fever and symptoms of an upper-respiratory tract infection. COVID-19 is thought to spread mainly person-to-person through coughing or sneezing by infected people.
- If you get sick, the CDC recommends that you stay home from work or school, and limit contact with others to keep from infecting them.
- Employees may experience stress and anxiety as a result of the uncertainties surrounding COVID-19. Employees are encouraged to contact Employee Assistance (student employees are encouraged to contact their student counseling centers).
- Leaders should take the opportunity to remind employees that we must not stigmatize anyone in our community based on national origin. Someone who has a cough or a fever does not necessarily have coronavirus.

For additional information concerning COVID-19, visit the [CDC website](https://www.cdc.gov).

Current UC information and resources are available on the [UCnet website](https://www.ucnet.edu).

What should leaders, managers and supervisors communicate to UC individuals regarding travel to countries where a CDC Warning - Level 3 Travel Notice has been issued due to COVID-19?

On Jan. 30, 2020, the UC Office of the President issued a [directive to the UC community](https://www.ucop.edu) (including faculty, staff and students) to temporarily avoid all non-essential travel to China while federal travel health warnings are in effect. The directive was expanded on Feb. 26, 2020 to temporarily avoid all non-essential, university-related travel to countries that are designated with a CDC Warning - Level 3 Travel Notice. For the latest list of countries with
CDC travel warnings issued due to the spread of COVID-19, go to https://www.cdc.gov/coronavirus/2019-ncov/travelers/

Each UC location has developed a local review and approval process to determine if traveling abroad for a university-related purpose to a country designated at a CDC Warning - Level 3 Travel Notice is absolutely essential, or if it can be postponed.

It is of utmost importance that all faculty, staff and students traveling abroad for university-related purposes register their international travel with the UC International Travel Registry before their expected departure and ensure that they update this information as changes occur before and during travel. Registration is an important step in reducing the risks of traveling abroad while keeping the UC community safe, especially in environments with heightened health risks, such as COVID-19.

What should leaders, managers and supervisors communicate to UC individuals regarding travel to countries where there is an ongoing outbreak of COVID-19 respiratory illness but a Warning - Level 3 has NOT been issued due to COVID-19?

Students who have plans to travel abroad should be advised to check the Department of State travel advisory website for guidance, especially if traveling to countries in Asia.

UC locations should not, for example, prohibit students or faculty from traveling to study abroad locations where limited COVID-19 has been reported. Faculty, staff and students who have plans to travel abroad should be advised to check the CDC’s travel advisory website for guidance. The CDC advises and issues notices on the status of travel to many foreign locations and the United States.

UC locations should advise students to exercise prudence and delay international travel — especially if they are ill. The World Health Organization has a pandemic page that posts guidance for individuals, communities and others regarding treatment, quarantine, etc.

The Office of the President, Risk Services (OPRS) has arranged for employees and students traveling on official UC business to be covered for a wide variety of accidents and incidents, including illness, while away from their UC location or primary workplace. This coverage is provided at no cost to the traveler. Coverage is accessed through automatic ticket/travel agency booking (e.g., Connexxus) or by registration.

Once registered for this coverage, the traveler receives an email including:

- A trip brief with useful information about their destination
- Current alerts for that particular destination (including COVID-19 alerts)
Email alerts before and during the trip, and health alerts up to 30 days after (including COVID-19 status of travel destination)

Contact your local Risk Management Office for questions about UC’s Travel Insurance Program.

State Department Travel restrictions, as well as CDC Travel Warning levels, remain in a dynamic state based on the most current information. These restrictions may change and could expand to additional countries in the coming weeks. Leaders and supervisors are encouraged to review the most current notices and restrictions released by these agencies. Locations may also need to consult with their local public health official for specific guidance for their region.

Those traveling on official UC business should be encouraged to access this information.

What should leaders, managers and supervisors communicate to UC individuals already in a foreign country where a CDC Warning - Level 3 Travel Notice has just been issued due to COVID-19?

UC community members who are currently traveling on UC-related business in a country designated with a CDC Warning - Level 3 Travel Notice should plan to immediately leave the area, unless their UC location deems their travel to be essential.

What should leaders, managers and supervisors communicate to UC individuals returning from a country where there is an ongoing outbreak of COVID-19 respiratory illness?

Anyone who has been in a country where there was an ongoing outbreak of COVID-19 within the past 14 days AND who feels sick with fever, cough or difficulty breathing should seek medical attention, either through their primary care physician, the emergency department or as instructed by public health authorities. They should call ahead whenever possible.

Review the CDC’s list of countries where there is an ongoing outbreak of COVID-19. These countries are listed at Watch Level 1 or higher.
Should individuals who have, in the past 14 days, **been to mainland China** and who do **NOT have signs of respiratory illness** be permitted to return to normal on-site activities?

No. Currently, the California Department of Public Health (CDPH) is advising colleges and universities that travelers who have arrived in the U.S. from mainland China since Feb. 3, 2020 should be excluded from (on-site) school for 14 days, beginning the day after they left China. The CDC has produced guidance for returning travelers.

**Restrictions from on-site activities:**
Travelers who returned from mainland China on or after Feb 3, 2020, should remain off-site for 14 days after arrival. This is consistent with current federal policy requiring 14-day quarantine, or self-monitoring with public health supervision, for all such travelers. CDC and CDPH guidance that states specifically that this policy is not retroactive to travel prior to Feb 3, 2020.

**What actions should a UC location take if individuals who entered the U.S. after being in an affected geographic area within 14 days of symptom onset **DO HAVE symptoms** of respiratory illness?**

In the unusual event that a faculty member, staff member or student is identified who has symptoms of respiratory illness, such as fever and cough, AND who has traveled from an affected geographic area within 14 days of symptom onset, please take the following steps:

- Ensure the individual seeks medical attention right away, as directed by a public health authority or with a physician or emergency department, as appropriate for the condition. Call ahead whenever possible.
- Separate the individual from others while arrangements are being made for transport to appropriate medical care.
- Contact your local health department immediately.

**Should UC locations implement restrictions on individuals returning from locations outside of mainland China where there is an ongoing outbreak of COVID-19 respiratory illness?**

No.

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3 This excludes the Special Administrative Regions of Hong Kong and Macau
At this time, the CDC has not advised businesses, such as UC, to implement restrictions or social distancing strategies on healthy individuals who did NOT have contact with a laboratory-confirmed case of COVID-19 and who are returning to the U.S. from countries outside of mainland China. UC locations should not prohibit healthy students, staff or faculty from returning on-site after traveling from locations where limited COVID-19 has been reported.

Faculty, staff and students who have plans to return from abroad should be advised to check the CDC’s website for up-to-date guidance.

The CDC has published an FAQ entitled COVID-19: What is Stigma and What Causes It. This is a helpful resource for supervisors and faculty to stop stigma and provide social support.

If a child is sick, may a UC-affiliated child care center refuse services to the child?

Yes. Some UC locations operate centers to care for faculty and/or students’ children. California Child Care Center general licensing requirements require that these centers inspect all arriving children for signs of sickness, and that centers must not accept into their care any children exhibiting obvious symptoms of illness, including, but not limited to, fever or vomiting.

The CDC and CDPH recommend that students, teachers and staff who appear to have an illness at arrival, or who become ill during the school day, be promptly isolated from other students and teachers until they can be picked up. Parents and guardians should be reminded to monitor school-aged children for signs of illness and advised that children who are sick should stay home. Likewise, teachers and staff should be reminded to stay home when sick. Ill students should not attend alternative child care or congregate in any setting. Child care facilities that close their operations should also cancel child care-related gatherings and encourage parents to avoid congregating with their children in social environments (or settings).

Are there steps that leaders, managers and supervisors can take to prepare for an outbreak of COVID-19?

Leaders and supervisors should familiarize themselves with their individual department’s business continuity and contingency plans. Consider telecommuting options for employees

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4 22 C.C.R. §§ 101226.1(a), 10156.1(b) (“Daily Inspection for Illness”)
5 Id.
who voluntarily agree to quarantine. As part of any planning effort, managers and supervisors should make information available to employees concerning the steps employees can take to protect themselves and help prevent the spread of COVID-19 in the workplace. This information can be found on the [CDC’s website](https://www.cdc.gov). Leaders, managers and supervisors should also keep themselves informed of the latest public health information released by the CDC, CDPH and local health officials, and plan in advance for the possibility of increased employee absences. It would also be prudent to determine in advance whether it would be feasible for employees to work at home when they are not sick themselves but need to stay away from the workplace to care for sick family members.

**Should UC Health locations, emergency services or environment, health and safety departments distribute masks (N95 respirators, etc.) to members of the UC community upon request?**

No, N95 respirators should not generally be distributed upon request. The nation is experiencing a shortage in the availability of these respirators, and this shortage may continue or even worsen for several months as authorities work to control the spread of COVID-19 and to develop new supply lines. UC locations must conserve their supplies of N95s for health care personnel. With respect to the use of standard versus surgical respirators in health care settings, per the CDC, surgical N95s are recommended only for use by health care personnel who need protection from both airborne and fluid hazards (e.g., splashes, sprays). These respirators are not used or needed outside of health care settings. In times of shortage, such as we are now beginning to experience, only health care personnel who are working in a sterile field or who may be exposed to high-velocity splashes, sprays or splatters of blood or body fluids should wear these respirators, such as in operative or procedural settings. Most health care personnel caring for confirmed or suspected COVID-19 patients should not need to use surgical N95 respirators and can use standard N95 respirators.

UC’s approach to the distribution of N95s during this outbreak of COVID-19 differs from UC’s response to wildfire smoke events that affected many UC locations and created poor air quality conditions in the past several years. In response to those events, Cal/OSHA promulgated [regulations](https://www.osha.gov) to protect employees from wildfire smoke, including guidance and air-quality index triggers for the distribution of N95 respirators. During some of these events, UC locations had adequate supplies of N95s to provide these respirators to other (non-employee) UC community members, including students, for voluntary use and additional protection from wildfire smoke. With the current stresses that COVID-19 is placing on UC and the entire nation, N95 inventories face significant challenges unlikely to resolve in the
short term, as noted above. For this reason, the prioritization of N95 distribution at this time differs from approaches to distribution during wildfire smoke events. This approach is necessary to support responsible planning for COVID-19 and to protect front-line health care staff.

Questions/answers related to employees

What steps should be taken if an employee becomes ill with fever, cough or other concerning symptoms?

Managers and supervisors should recommend that employees who are sick remain off-duty (i.e., on sick leave) until symptoms resolve and seek medical assistance as appropriate. Occupational health clinics may be able to provide a fitness-for-duty evaluation in cases where there is uncertainty. In that case, the supervisor should call their local occupational health clinic before sending the employee.

Anyone sick and believed to be at risk for COVID-19 infection should be advised to seek medical assistance and follow the CDC recommendations:

- Stay home except to get medical care.
- Separate yourself from other people in your home and avoid sharing personal household items.
- If you have a medical appointment, call the health care provider and tell them that you are concerned about the possibility of COVID-19 infection before going to the doctor’s office.
- Wear a facemask when you are around other people.
- Cover your coughs and sneezes with a tissue.
- Clean your hands often with soap and water for at least 20 seconds, or use an alcohol-based hand sanitizer that contains at least 60% alcohol.
- Seek prompt medical attention if your illness is worsening.
- If you are placed under active monitoring, or facilitated self-monitoring, follow the instructions provided by your local health department or occupational health professional, as appropriate.
- Consult with your health care provider before discontinuing home isolation.

If an employee declines to take leave, managers and supervisors should consult occupational health and the local human resources or academic personnel office for assistance in determining whether there is objective evidence of illness. If there is objective evidence of illness, and an employee still refuses to take leave, a manager or supervisor may, over the objection of the employee, require that the employee leave the workplace. In such circumstances, the absence should be recorded as “approved.”
Managers and supervisors should seek assistance from their human resources or academic personnel offices before taking any action to ensure that all appropriate options have been considered. Action should not be taken based solely on a manager’s or supervisor’s subjective assessment of an employee’s medical condition.

Employees who are sick with a contagious acute respiratory illness should be advised to remain at home for at least 24 hours after they are free of fever (≥ 100° F / 37.8° C) and signs of fever — without the use of fever-reducing medications — to minimize the spread of the pathogen. Employees should seek immediate medical care if symptoms become more severe (e.g., high fever, difficulty breathing, etc.).

**Does the Family and Medical Leave Act (FMLA) or California Family Rights Act (CFRA) entitle an employee to take leave to avoid contracting COVID-19?**

No. The FMLA and CFRA entitle employees to job-protected leave when they have a serious health condition or when they need leave to care for covered family members who have a serious health condition. Leave for the purpose of avoiding exposure to COVID-19 is not protected under the FMLA or CFRA.

**Should UC require an employee who is out sick (not due to COVID-19) to provide a health care provider’s note?**

No. Supervisors should actively encourage sick employees to stay home, but should not require employees who are sick to validate their illness with a health care provider’s note. Health care provider offices and medical facilities may be extremely busy and not able to provide such documentation in a timely way.

**May UC prohibit an employee from coming to work if the employee is known to have had close contact with someone who has been confirmed to have COVID-19, or who has contracted COVID-19?**

Yes. UC is obligated to provide a safe workplace and may take necessary and reasonable steps to minimize health risks for its employees, such as requiring that employees not come to work if they have COVID-19.

If an employee has had very close contact with a person who has COVID-19 (such as living in the same household), the employee should be told to watch carefully for symptoms including fever, cough or shortness of breath. Employees should stay home if COVID-19 symptoms develop and should go home immediately if COVID-19 symptoms occur at work.
If any employment actions are taken as a result of COVID-19, such as requiring that employees not come to work, such actions must be consistent with federal and state laws prohibiting discrimination in the workplace.

Refer to the CDC’s Interim Guidance for Risk Assessment and Public Health Management of Persons with Potential 2019 Novel Coronavirus (2019-nCoV) Exposure in Travel-Associated or Community Settings and follow the orders of your local public health authority.

**Do the same leave policies apply to represented and non-represented employees?**

No. Leaves for represented employees are generally governed by the applicable collective bargaining agreements, whereas leaves for policy-covered employees are governed by applicable Personnel Policies for Staff Members (PPSM) or by the Academic Personnel Manual (APM). Managers and supervisors should, therefore, consult and comply with the collective bargaining agreement provisions regarding leaves and/or UC policies that may apply to their employees.

**What signs and symptoms may indicate that an employee has become ill with COVID-19?**

The CDC reports that COVID-19 symptoms include fever, cough and shortness of breath.

At present, the CDC also includes epidemiologic risk factors, such as a history of travel from affected geographic areas within 14 days of symptom onset, or close contact with a laboratory-confirmed COVID-19 patient within 14 days of symptom onset, as criteria for health care professionals to identify individuals as patients under investigation (PUI). Refer to the most current CDC guidance as PUI criteria will likely change as further information becomes available.

**What additional steps should be taken if an employee is suspected to be ill with COVID-19 at work?**

In addition to understanding the signs and symptoms of COVID-19 (refer to previous question), a UC location’s response to employees who appear to have an acute respiratory illness, including COVID-19, may depend on the resources available at that particular location.

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6 Affected Geographic Areas with Widespread or Sustained Community Transmission are published on the CDC website: [https://www.cdc.gov/coronavirus/2019-ncov/hcp/clinical-criteria.html](https://www.cdc.gov/coronavirus/2019-ncov/hcp/clinical-criteria.html)
At locations where occupational health services or authorized medical offices are available, managers and supervisors should recommend that employees who appear to be ill seek medical assistance. If occupational health services are not available, managers and supervisors should encourage employees to take leave and seek medical assistance from their primary care physician.

If an employee declines to take leave, managers and supervisors should consult their local human resources or academic personnel offices for assistance in determining whether there is objective evidence\textsuperscript{7} of a suspected case of COVID-19. If possible, managers and supervisors should ask on-site employee health services to assist in making this determination. If there is objective evidence that an employee has acute respiratory illness and the employee still refuses to take leave, a manager or supervisor may, over the objection of the employee, require that the employee leave the workplace. In such circumstances, the absence should be recorded as "approved."

Managers and supervisors should seek assistance from their local human resources or academic personnel offices before taking any action to ensure that all appropriate options have been considered. Action should not be taken based solely on a manager’s or supervisor’s subjective assessment of an employee’s medical condition.

May UC require an employee who contracted COVID-19, or who was possibly exposed to COVID-19 and directed to remain quarantined or practice social distancing, to provide certification from a health care provider before returning to work?

Yes. An employer may require a certification from a health care provider clearing an employee to return to work if they have contracted or been exposed to COVID-19. However, managers and supervisors should be consistent in this practice and treat employees uniformly.

Must UC grant leave to an employee who is sick with COVID-19?

Employees who are ill with COVID-19 should be advised to remain at home until cleared by their local public health department to minimize the spread of the virus.

If an employee was traveling on university business when they were instructed to self-isolate, or if they contracted the virus from a patient they were treating, time off would

\textsuperscript{7} i.e. The employee had signs of respiratory illness such as coughing or fever and a history of travel from affected geographic areas within 14 days of symptom onset.
generally be covered as administrative leave or workers’ compensation. This is because the illness arose out of, and in the course of, their employment.

Employees who contracted the virus on vacation, or who were directed to self-isolate following a vacation or other personal travel, should be encouraged to avail themselves of options available under UC’s sick leave policy and other applicable leave policies and collective bargaining agreement provisions.

An employee who is sick may be entitled to leave under the Family and Medical Leave Act (FMLA) and California Family Rights Act (CFRA) under certain circumstances. The FMLA and CFRA entitle eligible employees to take up to 12 workweeks of unpaid, job-protected leave in a calendar year if they have a serious health condition. Some instances of COVID-19 may qualify as a “serious health condition.”

UC employees may be permitted and/or required to use paid leave accruals in certain circumstances, depending on the applicable policy or collective bargaining agreement. Employees should be encouraged to avail themselves of options available under the applicable policy or collective bargaining agreement provisions.

Must UC allow employees who are parents or caregivers time off from work to care for sick family members with COVID-19?

Employees who are healthy but whose family members are home sick with COVID-19 should notify their supervisor and refer to CDC Guidance for Implementing Home Care of People Not Requiring Hospitalization for COVID-19 for guidance on conducting a risk assessment of their potential exposure.

If certain members of an employee’s family are sick, the employee may be entitled to leave under the the Family and Medical Leave Act (FMLA) and California Family Rights Act (CFRA). The FMLA and CFRA entitle eligible employees to take up to 12 workweeks of unpaid, job-protected leave each calendar year to care for certain family members with a serious health condition. At UC, this group includes the employee’s spouse or domestic partner, parents and children. COVID-19 may qualify as a “serious health condition.” UC employees may be permitted and/or required to substitute paid leave in certain circumstances, depending on the applicable policy or collective bargaining agreement.

Even if it is not covered by the FMLA and/or CFRA, an employee may be entitled to take leave to care for a family member who is ill under applicable policy and collective bargaining agreement provisions.

Additionally, under UC sick leave policies and certain collective bargaining agreements, employees with accrued sick leave may use it to care for ill family members. If an employee
has no accrued time off, the employee may be granted unpaid time off to care for an ill family member. Applicable policies and collective bargaining agreement provisions should be consulted. Employees should be encouraged to avail themselves of options available under the applicable policy or collective bargaining agreement provisions.

**Does the foregoing advice, with regard to leave, also apply to academic employees?**

The basic principles set forth above regarding steps that UC may take to ensure a safe workplace apply to UC’s academic employees. Academic leaders, managers and supervisors should refer to the Academic Personnel Manual to determine applicable leave policies for the various categories of academic employees.

**Questions/answers related to students**

**May UC quarantine or isolate students who were possibly exposed to, or who have contracted, COVID-19?**

Yes. UC enacted a Policy on Safeguards, Security and Emergency Management in January 2006 that contemplates the need for chancellors to take extraordinary measures in the event of "a natural or man-made disaster, a civil disorder which poses a threat of serious injury to persons or damage to property," or other “seriously disruptive events.”8 Pursuant to this policy, UC may take appropriate steps to protect the health and safety of its students in the face of a known serious health crisis like a serious outbreak or pandemic.

**What steps should be taken before UC initiates quarantine or isolates students who have contracted SARS-CoV-2 or exhibit symptoms of COVID-19?**

The CDC recommends that individuals with confirmed SARS-CoV-2 positive remain in isolation, either at home or in a health care facility (as determined by clinical status), until they are determined by state or local public health authorities, in coordination with the CDC, to no longer be infectious. The location of this isolation will be determined by public health authorities, and isolation may be compelled by public health order, if necessary.

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UC locations may support the isolation of confirmed COVID-19 cases as approved by public health authorities. Mandatory quarantine orders are issued by public health authorities. UC locations may be asked to help implement quarantine or isolation orders, or may request self-monitoring and implement social-distancing measures, including requesting students to restrict their movements and public activities, including attending class.

The California Department of Public Health (CDPH) is authorized to establish and maintain places of isolation and quarantine, and has the final authority to implement statutes and regulations pertaining to the control of communicable diseases.9 Because the CDPH has ultimate authority in this area, all UC locations should coordinate with local public health agencies to ensure that their actions are consistent with the most current CDPH orders, rules and regulations pertaining to the control of COVID-19.

May UC prohibit students who have possibly been exposed to, or who have contracted, COVID-19 from attending classes?

Yes. If a student meets the CDC criteria of a High and Medium Exposure Risk Categories or has tested positive for SARS-CoV-2, UC may prohibit the student from attending classes at UC locations. UC must take appropriate steps to protect the health and safety of its students in the face of a known serious health crisis. UC’s Policy on Safeguards, Security and Emergency Management, enacted in January 2006, contemplates the need for chancellors to take extraordinary measures in the event of “a natural or man-made disaster, a civil disorder which poses a threat of serious injury to persons or damage to property,” or other “seriously disruptive events.”10

The CDC recommends that persons who have contracted COVID-19 remain in isolation, either at home or in a health care facility, until released by local public health authorities. The location of the isolation will be determined by public health authorities and isolation may be compelled by public health order.

The response to a public health emergency, such as a pandemic, will be directed by federal, state and local health agencies. It is the responsibility of UC to act in accordance with all applicable public health directives. UC’s guidance, policies and regulations cannot conflict with public health orders regarding the control of the COVID-19 outbreak.

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9 Health & Saf. Code §§ 120135, 120145, 120200; 120215
10 Policy on Safeguards, Security and Emergency Management
Questions/answers related to privacy and duty to report

Is there a duty to report COVID-19 cases to state or local health authorities?

Yes. Generally, health care providers — including doctors, nurses and physician assistants, among others — at UC student health centers, health care clinics and medical centers who know of, or are in attendance on, a case or suspected case of COVID-19 are required to report it to the local health department immediately, by telephone, in accordance with internal administrative procedures. Where no health care provider is in attendance, any individual who knows of, or suspects that, someone has COVID-19 is permitted to report it to the local health department.\(^\text{11}\) Local health departments, in turn, notify the CDPH.

Contact information for the local health officers may be found at the [CDPH website](https://www.cdph.ca.gov).\(^\text{11}\)

What are the responsibilities of local and/or state health departments once they have been notified of a case of COVID-19?

Health officers are legally required to take whatever steps are deemed necessary for the investigation and control of the reported disease. This includes the power to isolate and quarantine individuals per their site-specific isolation/quarantine protocol; inspect and disinfect property; require the examination of a person to verify the diagnosis; investigate to determine the source of the infection; determine the contacts subject to quarantine; issue appropriate instructions; and take appropriate steps to prevent or control the spread of the disease.\(^\text{12}\) Health officers may, for purposes of their investigation, disclose the information contained in an individual case report, including personal information, as may be necessary to prevent the spread of the disease or occurrence of additional cases.\(^\text{13}\) If the disease requires isolation, the health officer must ensure that instructions are given to the patient, and members of their household, that define the area within which the patient is to be isolated and state what measures should be taken to prevent the spread of the disease, including the isolation technique to be followed.\(^\text{14}\)

UC medical centers and locations should plan to work closely with local health officers who may be authorized to take appropriate action on behalf of UC or able to provide UC with

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\(^{11}\) 17 C.C.R. §§ 2500(b), 2500(c), 2500(a)(14), 2500(h)(i).


\(^{13}\) 17 C.C.R. § 2502 (f) (2).

\(^{14}\) 17 C.C.R. §§ 2516, 2518.
approval and/or authority to take appropriate remedial action. Any such authority given or action taken by the local health officer should be documented.

May student health care providers disclose personal information related to a student suspected to have, or known to have, COVID-19, without consent, as necessary to control the disease?

Yes. Student health center personnel may alert residence halls and instructors about students who have been found to be carriers of COVID-19 if the student is not compliant with instructions to leave UC locations, to stop attending class and/or to go home or to an appropriate health facility for treatment.

The Family Educational Rights and Privacy Act15 (FERPA) permits disclosure of student treatment records for purposes other than treatment to "appropriate persons [to protect others] in connection with an emergency if knowledge of the information is necessary to protect the health or safety of the student or other individuals." The Health Insurance Portability and Accountability Act16 (HIPAA) provides that such disclosure of protected health information without patient consent is permitted if there is a good faith belief that the disclosure is "necessary to prevent or lessen a serious and imminent threat to the health or safety of a person or the public; and ...[the disclosure] is to a person or persons reasonably able to prevent or lessen the threat."17 California case law holds that health care providers have a duty to take reasonable steps, including breaching patient confidentiality, to warn and protect others at risk from a patient with a communicable disease.18 California regulations regarding communicable diseases obligate a health care provider in attendance on a case of suspected communicable disease to breach confidentiality to give detailed instructions to household members of a sick person regarding precautionary measures to be taken for preventing the spread of the disease or condition.19

Even when circumstances warranting disclosure exist, the disclosure should be as limited as possible; only necessary information should be shared and disclosures should be made only to those people with a need to know.

A local health department may also provide a UC location with advance written approval to disclose such information in such circumstances. Further, as previously indicated, a health

16 http://www.hhs.gov/ocr/privacy/
17 45 C.F.R. 164.512(j)(i). This provision should be relied upon only in extraordinary circumstances.
19 17 C.C.R. § 2514.
official may release personal information, as necessary, to prevent the spread of disease or the occurrence of additional cases.