**R2B Phase 1**

**Area-Specific Reopening Plans and Exception Requests**

Currently the risk of COVID-19 transmission cannot be completely eliminated, only mitigated. LCCC is establishing and implementing protocols and practices to remain in line with all regulations and guidance. For each Phase of the R2B plan, LCCC guidance and protocols will be posted on the COVID webpage <http://www.lccc.wy.edu/covid>

Areas wishing to resume on-campus operations or perform an activity on a temporary basis, will consult with their cabinet member to ensure the request aligns with divisional needs and resources. When directed by their cabinet member, the area will follow the R2B process and supply all requested documentation detailing plans for how external guidance and LCCC requirements will be met. For activities that need to follow more specific or resource-intensive standards, the plan will be reviewed by a subject matter expert (i.e. Risk Manager, Physical Plant, HR, Disability Services etc.). President's Cabinet will review, prioritize and approve area plans and requests as appropriate.

LCCC contracted tenants and contracted events will consult with the Facilities and Events Office and the Procurement and Contracting Office. Contracted events and activities must provide a copy of an approved County Health plan.

All areas should allow for a minimum two-week review period after submission of a fully completed reopening plan or exception request. A listing of approved plans with a directory of contact information for the area will be available at <http://www.lccc.wy.edu/covid>. Copies of the approved plans will be available in MyLCCC.

Any changes to external guidance or identification of an increased risk will take precedence, and may result in additional protocols and actions, including complete campus closure. All areas should maintain business continuity plans and have a plan for a return to remote operations, if necessary.

|  |
| --- |
| Requesting Area:  |
| Cabinet Member:*(Tenants select Tenant)* | Choose an item. |
| Requestor: | Name: |  |
|  | Phone: |  |
|  | Email: |  |
| Title of Academic Program, Functional Area and Function, or Tenant: |  |
| Contact for directory listing of on-campus service:*(This information will be posted on* *LCCC’s COVID-19 webpage)* | Name: |  |
| Phone: |  |
| Email: |  |
| Webpage: |  |
|  |

|  |
| --- |
| Criteria for activity or event exception consideration: If the planned activity or event falls outside of LCCC standard guidance for the current R2B phase or operational practices in effect – an exception justification and mitigation plan must be provided. |
| Contracted events and activities must provide a copy of an approved County Health plan. |
| Reason for activity or event: |  |
| **Need for Exception** |  | **Justification and mitigation plan** |
| Area does not have an approved on-campus operations plan |[ ]   |
| Exceeds gathering size of 25 |[ ]   |
| Occurs outside LCCC operational hours of 7:30 a.m. – 4:00 p.m.  |[ ]   |
| Necessitates travel |[ ]   |
| Other |[ ]   |
|  |

|  |
| --- |
| Criteria for LCCC area on-campus operations consideration:Areas must provide an explanation for the need to bring this function on campus during Phase 1. |
| Prioritization of Areas for Reopening:The following are a priority ranking of areas that will be required/authorized to reopen at LCCC. 1. Areas most critical to the continued and sustained operations of LCCC2. Areas that are most critical to serving and supporting students3. Academic programming most essential to community needs4. Academic programming that is least able to function virtually |
| This request falls under ranking number: | Choose an item. |
| 1) Describe the impact remote operations are having on functional area or academic program effectiveness.  |  |
| 2) Describe the impact remote operations are having on meeting your stakeholder needs. |  |
|  |

|  |
| --- |
| Facilities Impact. Completed by all requestors – for both plans and exception requests:This information is used for guiding Physical Plant resources for cleaning and sanitization and estimates of traffic in common areas. |
| Buildings and rooms to be accessed: |  |  |  |  |  |
| Dates and Times to be accessed:*(If these times will fall outside 7:30 a.m. – 4:00 p.m.* *the exception section must be completed)* |  |  |  |  |  |
| Average daily personnel occupancy: |  |  |  |  |  |
| Average daily participant/public count: |  |  |  |  |  |
| Maximum Gathering Size:*(If number exceeds 25, the exception section must be completed)* |  |  |  |  |  |
|  |

|  |
| --- |
| Explanation of how the area plans to meet LCCC guidance and protocols. Completed by all requestors – for both plans and exception requests: |
| Education and training: |  |
| Facilities preparation: |  |
| Social distancing and shared objects/equipment: |  |
| Cloth face coverings/mask usage: |  |
| Plan for common area usage (including entryways, corridors, restrooms, water fountains, and breakrooms): |  |
| Personal hygiene (including hand washing and respiratory etiquette): |  |
| COVID-19 screening, monitoring, and response plan: |  |
| Designated screening log keeper: | Name: |  |
|  | Email: |  |
|  |  |

|  |
| --- |
| Additional review requested by Cabinet Member or President’s Cabinet (if applicable):  |
|[ ]  Risk Manager |[ ]  Physical Plant |
|[ ]  Human Resources |[ ]  Contracting and Procurement |
|[ ]  Disability Services |[ ]  Other |
|  |