COVID19 Transmission Summary

The novel coronavirus (SARS-CoV-2) is primarily spread from person-to-person by droplet transmission when an uninfected individual comes into close contact of an infected and contagious person. "Droplet transmission" means that microscopic droplets of contagious saliva and mucous are dispersed to the air as an infectious person coughs, sneezes, or breaths under exertion (such as while exercising or singing). These droplets may be inhaled by uninfected people who have direct-contact with the contagious person. "Direct-contact" means to directly touch, to be intimate with, to be sneezed on or coughed on, or be closer than 6 feet for a significant amount of time (> 15 minutes) with an infectious individual. Transmission of COVID19 from person-to-person is highly unlikely for a person who enters a room that was previously occupied by a contagious individual or by momentarily passing them in the hallway.

Once infected, an individual might not exhibit symptoms for 2 - 14 days after contracting the virus but can still be contagious 48 hours before symptoms develop; therefore, it is important for college leadership to campaign and promote the use of good respiratory etiquette, frequent hand hygiene, and inform all of the college community (students, employees, and visitors) about the symptoms and risk factors associated with COVID19.

To reduce the transmission risk of the COVID19 infectious agent (SARS-CoV-2), the following infection control measures should be implemented as a multi-faceted risk mitigation measure. What this means is that by implementing as many infection control measures as are possible, we can compound the effect to reduce the opportunity for transmission from person-to-person while we conduct on-campus operations during the COVID19 pandemic.

Droplet transmission can be controlled by:

- Staying home when you are not feeling well.
- Coughing/sneezing into a mask, handkerchief, or other barrier and in the opposite direction of other people. Then immediately wash your hands with soap and water. If water is not available, use alcohol based hand sanitizer.
- Always wash your hands after using the restroom and before eating.
- Avoid large gatherings or gathering in cramped or poorly ventilated spaces.
- Get vaccinated. This significantly reduces your risk of contracting COVID19 upon exposure. Even if you do get infected (a breakthrough case), your risk of experiencing life threatening illness is drastically reduced. **Note**: Vaccines have been demonstrated to be safe with evidence that the few, possible side-effects[1] are significantly less severe than the potentially

[1] For example, cases of heart inflammation (myocarditis) reported post-COVID vaccination are usually mild and get better quickly [Yale, June 24, 2021].

lethal consequences of contracting COVID19. Likewise, any risk to adverse reaction to vaccination (such as severe allergic reactions) is much lower than the current risk of contracting COVID19.

- In areas of high-community transmission rates,
  - Wear a well-fitted mask that fully covers both the nose and mouth and wraps under the chin when around others who are not part of your home household. Do not wear a valved-mask that only filters air moving in but not out. Do not wear a face shield without also wearing, at least a cloth-face covering or shrouded shield.
  - Maintain at least 6 feet of physical distance from others while, working, studying, or socializing with people who are not part of your home household (3 feet in areas of low-level transmission rates or high-level vaccination prevalence).
  - Wearing a cloth-face covering in situations where close contact with large amounts of people from the general public cannot be avoided (such as in the healthcare facility waiting room, grocery store, or public transportation) and around individuals at increased risk of server response to infection.

  In your social life, a vaccinated person may safely gather without masking but in the collegiate environment of Seattle Colleges, you must maintain all current infection control standards, as declared in this infection control program. Additionally, follow any and all State/Federal statutes, such as a mask mandate, where applicable.

These are the policies and procedures for safe on-campus operations. The district will continue to respond rapidly to changing policies and guidelines from the local, state, and federal governments and regulatory bodies but changes for on-campus operations will not change until they are revised as the district infection control policy stated here.

Introduction

This Infection Control Program serves as a group of policies and procedures identified as guidelines used to mitigate transmission risk and prevent COVID19 infections within the college community. It is designed in response to the current state of emergency for WA State related to the COVID19 pandemic. It includes a workplace hazard assessment for the transmission risk of COVID19 and a phased return-to-campus plan, which complies with the Washington State proclamations and mandates, as well as an detailed action plans on what to do if someone is sick on campus and procedures to address non-compliance.

Infection control starts with people and each college employee and student must learn how to protect themselves from possible infection; thus, preventing the inadvertent act of spreading infection to those who cannot be vaccinated. Key concepts include:

- **Minimize the chance of exposure**. The most common way to catch the virus that causes COVID19 is from close contact with other people. Keeping gatherings small and practicing social distancing can help reduce the chances of exposure to the virus.
- **Promote the use of everyday preventive actions**. Some common practices can lower the risk of infection. Clean your hands, cover coughs and sneezes, and wear a well-fitted mask.
- **Protect high-risk populations**. Certain groups of people have a higher risk of developing serious illness from COVID19. To keep our families and communities safe and healthy, it is important to take steps to protect older adults, people with underlying health conditions, people facing homelessness, incarcerated or detained people, people who cannot get vaccinated, and people who work in healthcare or other critical infrastructure jobs.