

# Guiding Principles for Reopening University of Arizona's Operations

Updated: June 23, 2020

**Purpose:** Our objective is to articulate guiding principles and key public health domains for reopening University of Arizona campuses safely. **This document is a work in progress and will be updated as new information becomes available.** At present, several interdisciplinary working groups are developing, revising, and vetting protocols to resume in-person activities on University of Arizona's main campus in Tucson, on our Phoenix, Sierra Vista, and Yuma campuses, and at our Cooperative Extension and Distance sites. We welcome input from the University of Arizona community, and will proactively solicit that input throughout the planning and re-entry process, including via an online feedback portal (located [here](#)). Updates will reflect new knowledge of the epidemiology of COVID-19, developments in biotechnology, changes in healthcare and public health capacity, and evolving social and economic considerations associated with re-entry.

**Mission:** University of Arizona is an institution of higher education dedicated to research, discovery, and innovation. Our plans to reopen in-person campus activities will integrate our core values: integrity, compassion, exploration, adaptation, inclusion, and determination.

**Premise:** Stay-at-home orders implemented in March appear to have prevented an initial COVID-19 surge sizable enough to exceed hospital capacity in most parts of Arizona, but active transmission persists and has increased since the expiration of stay-at-home orders on 5/15/20.<sup>1,2</sup> While there are tremendous social and economic benefits associated with opening campuses for research, in-person classes and events in August 2020, doing so without proper safeguards could put our campus population and surrounding communities at unnecessary risk.<sup>3,4</sup> Given the likely absence of a vaccine before the end of the calendar year, the university will need to follow an intentional plan, coordinated with state and local public health officials, to contain the spread of COVID-19 in and beyond the University of Arizona community. This is critically important because a large resurgence in cases could quickly overwhelm local healthcare and public health capacity.<sup>5</sup> Thus, measured, flexible, and creative approaches are needed to minimize risk and maximize opportunities for participation in campus life and in-person activities for lower-risk individuals who choose to do so.

According to the CDC and White House gating criteria specified in [Opening Up American Again guidelines](#), several criteria must be considered before considering a phased reentry including epidemiologic metrics, healthcare capacity, public health capabilities. The University of Arizona is tracking these metrics closely and developing alert systems to align risk levels with appropriate mitigation measures related to university activities. Local health jurisdictions will also set criteria for phased reopening. For example, the Pima County Health Department has published a [Report Card](#) on the county's readiness for phased resumption of business, which this committee will follow closely. **University of Arizona will coordinate all plans for reopening campuses with the relevant local and state health officials.**

**Guiding Principles:** The following principles have guided our prioritization of approaches for safely reopening campus to University of Arizona students, staff, and faculty:

1. Rapid identification and containment of COVID-19 cases in the University of Arizona communities;
2. On-campus and off-campus isolation options and wrap-around wellness services for students, staff, and faculty with confirmed COVID-19 infection;
3. Protection of individuals in our University of Arizona community, and their family members, who are vulnerable to severe COVID-19 disease, or to harassment or discrimination;
4. Commitment to equitable outcomes for students, staff, and faculty regardless of race, color, religion, sex, national origin, age, disability, veteran status, sexual orientation, gender identity, or their need to refrain from in-person activities due to concerns about COVID-19;
5. Commitment to transparent and participatory decision making with regard to reopening University of Arizona campuses with clear and consistent communication protocols; and
6. Vigilance in regular review and updating of approaches according to a rapidly emerging evidence base with active monitoring by key advisors from across University of Arizona colleges and support units.

**Summary of relevant public health domains:** Here we define seven domains, each of which includes multiple approaches to be fleshed out by implementation teams. To the extent possible, we will offer broad suggestions that will maximize voluntary compliance from our University of Arizona community, with the caveat that non-University of Arizona public health authorities may enforce compliance as they deem appropriate.

1. **Test:** Offer prompt and readily accessible **viral (PCR) testing** to all symptomatic individuals, as well as strategic sampling of asymptomatic individuals, and offer prompt and readily accessible **antibody testing** to members of the University of Arizona community.
2. **Trace:** Actively **trace contacts** of all individuals who test positive for COVID-19 and offer information and testing to close contacts.
3. **Treat:** Provide **healthcare support, affordable housing** and **wrap-around wellness services** for individuals with COVID-19.
4. **Offer flexible participation:** Offer **remote and hybrid learning, working, and teaching** options for students, staff, and faculty to protect individuals vulnerable to COVID-19 and reduce crowding.
5. **Minimize contact and reduce crowding:** Reduce instances of close physical contact among students, faculty, staff, and visitors during on campus activities.
6. **Minimize transmission:** Reduce the probability of transmission of SARS-CoV-2 during in-person campus activities.
7. **Communicate:** Maintain an active COVID-19 Reopening Campus **communication plan**.

**Background:** Incidence of SARS-CoV-2 infection, and its associated disease state (COVID-19), have been increasing around the globe since the first detailed report emerged from China in early January.<sup>6</sup> The subsequent pandemic precipitated an unprecedented international public health response to control disease spread and preserve healthcare capacity.<sup>7</sup> In the United States, the first individual with COVID-19 was identified in late January,<sup>8</sup> but suboptimal testing capacity led to the rapid and exponential

spread of the virus by March.<sup>9</sup> By April, all 50 governors had declared public health emergencies and implemented various forms of mitigation, including cancellation of mass gatherings, physical distancing, stay-at-home orders, travel restrictions, and closing of schools, universities, and non-essential businesses.<sup>10</sup> The result has been a slowing of the rate of new cases, but at a tremendous economic and social cost. Seroprevalence studies to date have been limited, but early results indicate that, even in COVID-19 hotspots, levels of immunity are low (e.g., 15% in an outbreak region of Germany, around 21% in the US epicenter of New York City, and <5% in a convenience sample of two communities in California).<sup>11-13,14</sup> Low population-level immunity raises concerns that loosening restrictions will lead to subsequent waves of new COVID-19.<sup>15</sup> ***Current plans for relaunching in-person activities must assume that a nominal proportion of the University of Arizona community will be immune to infection*** and therefore must include strategies for identifying and individuals with new infections, caring for those who do become infected, and minimizing risk of transmission, particularly for those with comorbidities that put them at high risk for severe outcomes.<sup>16</sup> Widespread antibody testing at UArizona will provide information on the extent of previous COVID-19 exposure,<sup>17</sup> and provide a tool for measuring changes in this metric over time.

The COVID-19 pandemic has also precipitated racialized and discriminatory social responses, operating within specific social, historical, and political contexts and disproportionately affecting marginalized groups. Likewise, the pandemic and associated policy responses have had disproportionate negative effects on migrants, people and communities of color and people of lower socioeconomic status.<sup>18</sup> Factors such as crowded housing which prohibits self-isolation, comorbidities, precarious employment, and lack of access to healthcare, hospitals, and testing have increased health risks for members of these groups. Conscientious efforts must be made to ensure that policies implemented to guide populations and behaviors and to allocate resources do not increase societal divisions or exacerbate individual and structural inequalities and injustices but instead promote social inclusion, justice, and solidarity.

**#1. Test: Offer prompt and readily accessible viral (PCR) testing to all symptomatic individuals, individuals who test positive on antibody testing, and strategic samples of asymptomatic individuals, and offer antibody testing to members of the University of Arizona community.** Containing outbreaks requires that we aggressively track viral transmission in our community. For students living on campus, it is important that the symptom list for testing is extensive as COVID-19 is likely to be milder in the student population, which is generally comprised of young healthy adults. The University of Arizona can help the public health community quickly identify new case by:

- Actively tracking of symptomatic illness in all residential facilities on campus and support for off-campus resident students, staff and faculty to participate in check-ins for health status. Those with symptoms will be encouraged to undergo PCR testing.
- Promoting self-monitoring of fevers through validated thermometry application and through daily self-checks.
- Considering repeat PCR testing of asymptomatic high-contact individuals at regular intervals (e.g., athletes, students and staff with jobs that require face-to-face interaction or direct contact).
- Lowering the barrier to testing by designating on-campus PCR testing locations through Campus Health and other local contract labs.

- Collecting and processing of samples for the University of Arizona community on campus or through local contract labs
- Encouraging voluntary baseline and repeat antibody testing to monitor the aggregate immune status of the University of Arizona community.

Importantly, our commitment to provide voluntary serological testing for past COVID-19 infection provides unique opportunities to inform our University of Arizona re-entry plans and processes following re-entry. Repeat voluntary testing at regular intervals will likely also provide useful data on the percent of individuals who may have developed at least short-term immunity to re-infection. Results should be carefully communicated to individuals regarding their levels of protection and possible infectiousness following a positive result.

**#2. Trace: Actively communicate with contacts of all individuals who test positive for COVID-19 and offer close contacts testing.** By the time each campus or University of Arizona site reopens for in-person activity, the county should have robust contact tracing. University of Arizona can likely enhance this capacity by:

- Providing manual contact tracing as needed to supplement the relevant county health department's efforts, supported by the University of Arizona Zuckerman College of Public Health SAFER program, which has already established a relationship with multiple counties for COVID-19 response activities. Individuals identified through contact tracing should be offered prompt PCR testing.
  - Contact tracers dedicated to the University of Arizona community will coordinate case investigations and contact tracing with local health departments
  - Standard definitions for contacts will be used and coordinated with the Arizona Department of Health Services<sup>19,20</sup>
- Offering a privacy-preserving mobile application to automatically track contacts and encourage uptake by a large proportion of the University of Arizona community. Contacts identified by the mobile app could be automatically notified of the exposure and have a test ordered for them.<sup>21,22</sup> The success of this type of application would be dependent on broad uptake and would require supplemental manual contact tracing, even with broad uptake.
  - Mobile applications could be used to push general educational messages as well as specific guidance to those who are exposed to an individual with COVID-19.
  - The University of Arizona community could be surveyed about their acceptance of this type of technology, and their ideas about reasonable implementation. Use of a contact tracing app would be *completely voluntary*.

**#3. Treat:** Provide **healthcare support, affordable housing and wrap-around wellness services** for individuals with COVID-19. Campus Health should continue to serve as the primary University of Arizona healthcare provider for our students, and as an essential component of our overall plans for the treatment and care of infected individuals. The university has established an on-campus building to house individuals who need space to recover and isolate in single rooms during the pandemic, to provide excellent care for those who are unwell, but not in need of hospital care. We note that a key containment approach in China and South Korea was the ability to place individuals in safe housing for the duration of their isolation or quarantine. At University of Arizona, this could mean offering

individuals housing appropriate for their disease status and/or utilizing local hotels or a University of Arizona dorm for this purpose. The University of Arizona community could be surveyed about their receptivity to quarantine or isolation in these situations. Given the current potential for a reduced census of on-campus students, it is suggested that there be a dormitory reserved for University of Arizona community members who test positive for COVID-19 during their duration of infectiousness. This will maximize the efficiency of delivery of services. Possible support services include;<sup>23</sup>

- Daily check-in with text, phone, or video contact.
- Instructions on how to keep space disinfected.
- Hotline for counselling and information.
- Mental health wrap-around services including wellness support groups and individual crisis counselling.
- Thermometers and systematic symptoms monitoring.
- Health education materials.
- Hand sanitizer and EPA-approved cleaners.
- Food, laundry, pharmacy services.
- Trash removal.

It is important that the individuals who provide services to the individuals in isolation be provided with PPE to minimize their exposure. It would be optimal that these individuals have had prior infection with SARS-CoV-2, established through serological or RNA testing, to minimize their risk.

**#4. Offer flexible participation:** Our campus plan likely needs to offer options for **remote, online and hybrid learning modes** for students and faculty, as well as **remote work options** for students, staff and faculty. Examples of possible approaches include:

- Designing in-person classes as “hybrid” courses with options for remote teaching and attendance.
  - Hybrid options could include remote faculty with in-person preceptors.
  - Instructors and students with vulnerability to severe infection outcomes should be advised to work and learn remotely
  - Neither students nor faculty should be penalized for online attendance or instruction – this includes modified TCE to ensure that vulnerable faculty do not face indirect pressure to attend in person when it could jeopardize their health.
  - All syllabi should continue to include flexibility to accommodate absences for illnesses.
  - Continued support from OIA for faculty to “hybridize” their classes.
  - Consider polycarbonate barriers (as seen in grocery stores) to protect faculty as they present in classrooms
  - Online programs should proceed as planned
- Continuing with flexible sick-time practices for staff whose jobs require them to work onsite and/or attend to work activities or duties in-person
- Developing flexible work arrangements or reassign duties to support remote work for staff and faculty who are concerned about themselves or their family members’ health and safety.
- Extending traditional work day hours for staff who remain onsite and adopt shift-like schedules to reduce the number of individuals within offices and buildings at one time.

- Increasing capacity for filming lectures (e.g., through Panopto).

**#5. Minimize contact and reduce crowding:** Flows of **foot traffic on campus should be carefully reviewed** to reduce the density of people moving through tight spaces at certain times of the day. Keeping the infection curve flat requires everyone to reduce the number of in-person contacts – defined as face-to-face contact, within 6 feet of another person. Approaches might include:

- Enabling distancing of at least 6 feet between students within classrooms
  - Would require rotating in-person attendance for some classes
- Disinfecting spaces between classes or providing students with supplies to wipe down their own chairs/ desks when coming into classrooms.
- Restricting movement through and around buildings on campus, e.g.,
  - Engineer one-way entrances and exits and walkways to maximize physical distancing
  - Redesign large congregation areas – like the student union – to promote physical distancing to the degree possible (grocery store models may be useful here).
  - Offer an extended daily schedule for in-person activities so that fewer students are on campus at the same time
- Re-conceptualizing student placements in campus housing to maximize physical distancing
- Establishing restrictions on visitors to campus (e.g., maximum # allowed in spaces like the museums or planetarium to maintain physical distancing)
- Restricting gatherings or meetings of more than X people based on current COVID-19 alert levels<sup>24</sup>
  - Includes sporting events, community events, and other events on campus
  - Size of gatherings, including sporting events, will depend on sufficient space to enable physical distancing

**#6. Minimize transmission:** We assume that individuals will sometimes “mix,” or be within 6 feet of each other, during the course of their day but that we can minimize the probability of transmission even with this form of mixing. Some suggested approaches are:

- Mandating cloth face coverings while on campus.<sup>25</sup> As face coverings are recommended for “source control” by CDC, these masks would help contain respiratory droplets released by asymptomatic or presymptomatic individuals who are capable of transmitting the virus that causes COVID-19.
  - Face coverings should be worn indoors when not alone in an enclosed office unless approved by UA Risk Management Face coverings should be worn outside when physical distancing cannot be maintained
  - Surgical masks can be worn in place of a cloth face covering
  - N95 masks, which offer additional protection may be worn as long as they do not have an exhalation valve
- Consider recommending the use of face shields or other eye protection while on campus.<sup>25</sup> Face shields could be cheaply manufactured for every member of our University of Arizona community. There are several advantages of shields, although they may not contain respiratory droplets as efficiently as well-structured face masks, including visibility of faces, coverage of nose and eyes, and ability to disinfect after use.<sup>26</sup>

- Enhance frequency of hand disinfection by including alcohol-based hand sanitizer stations at all entry and exit points of buildings and classrooms, and throughout residence halls, laboratories, and administrative buildings.
- Enhance disinfection of fomites with EPA-registered disinfectants.
  - Continue modified custodial schedules to ensure enhanced cleaning of common spaces.
  - Provide students with resources to self-clean their classroom spaces with disinfecting wipes.
  - Make disinfecting wipes available in labs, administrative spaces, and residence halls.

**#7: Communicate:** The reopening of campus will require a robust Communication Plan to address the concerns of students, staff and faculty, to promote positive changes to mitigate the COVID-19 threat and to educate the University of Arizona community on the process when we do have a positive case on campus. Student-centric modes of communication (e.g., on relevant social media platforms, with graphic design elements that are eye catching) will be important to consider if we hope to secure excellent public health outcomes.

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