

**From:** [Mueller, Bruce](#)  
**Subject:** Update from the COP Dean's Office for Faculty & Staff  
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[top\\_questions\\_from\\_faculty.9.14.docx \(1\).pdf](#)

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**Office of the Dean**

428 Church Street, Ann Arbor, MI 48109-1065

**Bruce A. Mueller, PharmD, FCCP FASN, FNKF**

Interim Dean and Professor of Clinical Pharmacy

734-764-7144 • Fax: 734-763-2022

Email: [muellerb@med.umich.edu](mailto:muellerb@med.umich.edu)

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September 15, 2020

Dear Faculty & Staff,

Yesterday's faculty meeting should have gotten everybody caught up with the latest at the College. Today's email is shorter than usual.

I received a comprehensive email from M administration that essentially is a FAQ on the University COVID response plan. I have attached it to this email for your reading pleasure. It is interesting to contrast the UM response to the striking GEO views of the very same subject!

## **COLLEGE INFORMATION**

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❖ **NEW! Walk with Us - Networking Program ("Zoom free"):** As mentioned in our meeting yesterday, this program was created to help build our COP community and promote wellness. We are looking for faculty and staff who are interested in providing 15-20 minutes of their time once or twice a week to take a short walk on campus with 1-2 students for informal discussion and just getting to know one another. Yes you can bring your dog...and yes, more than one of you can walk together. Keep social distance and remember your masks!

Anyone interested should email Aimee Falk ([faimee@umich.edu](mailto:faimee@umich.edu)). You will be added to the Google Sheet and asked to add your availability to your respective tab. Be sure to include the time and location for where to meet. Students will self-schedule based on the availability provided.

## FACULTY

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- ❖ **Grading:** BSPS and PharmD grades will utilize the University grading policy. For the fall and winter semesters, all College courses will use a modified version of traditional grading in which the regular A-C grading system is maintained but students who earn D or E grades will receive a "No Record Covid (NRC). This differs from the "masking" of grades that occurred in the Winter 2020 semester. This Fall 2020 semester, students will receive the ABC grade that you assign, with no ability to mask. Faculty doing grading will simply assign the grade that you would always assign.  
<https://www.provost.umich.edu/covid-19/20200820grading.html>
  
- ❖ **Winter Semester Planning:** I am thinking about my course in the Winter semester and converting it to an online offering. I am trying to challenge myself to come up with different assessments or different activities to break the ZOOM lecture monotony. I am hoping that those of you who are planning Winter semester courses will do something similar. If you have a great idea on how to do this, please share!
  
- ❖ **Commendations:** Do you know any faculty, staff, or students who have gone above and beyond lately? If so consider submitting a commendation note to let them know they are appreciated. You can use this link  
[https://apps.phar.umich.edu/prof\\_comm/index](https://apps.phar.umich.edu/prof_comm/index) to submit your commendation.
  
- ❖ **Flu Clinic:** On Saturday September 19th, the College of Pharmacy will be holding our annual flu clinic. This means that for those of you working in the building, there will be extra people around the lobby and the 1st floor of North University. The conference rooms set aside for researchers lunches will be closed in these areas.
  
- ❖ **Close Contact Form:** Also if you are needing to do some work in the lab that requires close contact (<6 feet distance), make sure to submit a close contact form. If you are in need of a form, contact Vicki at [vellingr@med.umich.edu](mailto:vellingr@med.umich.edu) to get a copy.

## YOUR WELL-BEING

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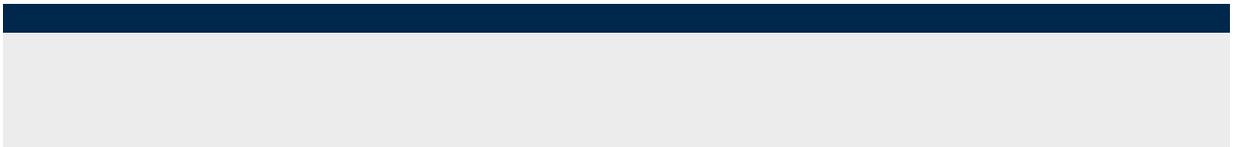
Here are a couple of great articles about how to recognize the signs of burnout and steps to take for prevention:

[Burnout Prevention and Treatment](#) by Melinda Smith, M Melinda Smith, M.A., Jeanne Segal, Ph.D., and Lawrence Robinson

[5 Proven \(and Not Obvious\) Ways to Avoid Burning Out](#) by John E. Discala, Founder and CEO, Johnny Jet

The [Faculty and Staff Counseling and Consultation Office](#) (FASCCO) provides support and assistance to University staff and faculty in resolving personal or work-related concerns. Through a range of sensitive and innovative services, [FASCCO](#) seeks to enhance the emotional health, well-being and job performance of members of the university community. By providing confidential and professional counseling, coaching, training, and consultation services to staff, faculty, retirees, benefit-eligible adult dependents and departments, [FASCCO](#) helps individuals develop and foster strengths and resiliency to enhance their personal and professional lives.

Sincerely,  
Bruce A. Mueller  
Interim Dean and Professor of Clinical Pharmacy



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9/14/20

## Detailed responses to faculty questions

*Following is a list of top questions from faculty, gleaned during recent SACUA Town Hall events and well as other discussions. Detailed information requested is provided below.*

**Q. How were faculty and SACUA involved in developing our plans for the semester? What engagement and consultation has occurred and what voice did faculty have in decisions around in-person, hybrid and remote instruction?**

A. Faculty have been involved throughout every aspect of the fall planning process that began in April, including nine faculty/staff committees that were convened to make recommendations for fall; numerous SACUA meetings with the provost's office and with the President to provide consultation; local faculty input into school and college implementation plans; and tapping faculty experts in public health, medicine, ethics and other areas for guidance before, during and after fall decision-making. Such faculty guidance continues, with a faculty and staff committee to design and implement public health and safety measures and policies, analyze data, and serve as a resource to our schools, colleges and units.

The University of Michigan stood up several committees and groups to respond to the COVID-19 pandemic and plan for the fall semester. These groups include U-M faculty who are leaders in their field and foremost staff experts in public health, innovative teaching, engaged learning, physical space use, and much more. These include:

[The President's Advisory Committee on Public Health](#) was charged with researching, analyzing and making recommendations in a number of areas relevant to public health for the fall semester. The group provided advice on housing, dining, classrooms, virus testing, disease monitoring and containment, and communications. The committee materials are posted online. This information was used by faculty and staff in student life and in our academic working groups to help inform their planning.

[The President's Advisory Committee on Ethics and Privacy](#) advised the president and other campus leaders on the ethical and privacy dimensions of policies, practices and activities that might arise with a return campus during the pandemic. The committee report is posted online.

Instructors and departments made choices on class formats to meet student needs while limiting the size of in person meetings, an approach that resulted in approximately 78 percent of undergraduate student credit hours being taught remotely, and the limited hybrid and in-person classes are small and ones that instructors and their departments identified as deriving a substantial pedagogical benefit from that format – similar to what peers also are offering in person.

Academic units accommodated instructor requests (faculty and GSIs) for remote teaching for

those who self-identified (no documentation required) as placing them at increased risk, resided with or cared for someone at increased risk, or who anticipated difficulty securing childcare during scheduled teaching times. Instructors were also asked to self-identify their preference for in-person or remote teaching to further accommodate requests. The process of accommodation at the unit level has resulted in few if any faculty or GSIs teaching in person who did not wish to do so.

Faculty were consulted on the most effective ways to ensure de-densifying within their classroom spaces to ensure efforts met with public health guidelines and pedagogic needs.

SACUA has been consulted throughout the process, including town halls, numerous meetings with the provost and president and SACUA leadership, engagement on policies such as remote/hybrid teaching and furlough, input on the membership of fall planning committees and input on syllabus statement language, among other areas.

Faculty (and other university community's) input also has resulted in changes to the Ambassador Program to promote health and safety on campus and in the community, with the elimination of armed sworn law enforcement officers as part of the program, <https://president.umich.edu/news-communications/letters-to-the-community/weekly-u-m-a-nn-arbor-covid-19-update/> as well as changes to ResponsiBlue health screening tool, <https://its.umich.edu/computing/web-mobile/responsiblue/communications/8-22-20>.

Faculty input also played a role in our emphasis on enhancing our capacity to perform surveillance testing for asymptomatic infection.

#### Additional Details:

Faculty involvement in fall planning occurred in three main categories from spring through summer:

- Planning in the areas of public health and ethics/privacy.
- Planning for our mostly remote/hybrid instruction.
- Plans for the actual implementation of instruction in each school and college.

#### Planning in the areas of public health and ethics/privacy (April - June)

- [President's Advisory Committee on Public Health.](#)
- [President's Advisory Committee on Ethics and Privacy.](#)
- Review and recommendations by COVID-19 Leadership Group.

#### Planning for remote/hybrid instruction (May-June)

The Office of the Provost convened [seven faculty and staff committees](#) May 1, charged with developing recommendations for how the university would operate in the fall. The work of the committees informed the decision to proceed with a mostly remote, hybrid fall semester.

The seven coordinated committees tackled different aspects of academic and campus planning, from instructional planning to the use of academic spaces and libraries.

The provost noted the institution was “guided by two principles: the safety and health of our community, and our long-standing commitments to academic excellence, equity, and inclusion. For the first, we rely on the counsel of public health and medical experts, and state of Michigan requirements. For the second, the knowledge and insights of our faculty are critical to the learning experiences of our students.” Record article:

<https://record.umich.edu/articles/committees-to-prepare-for-fall-semester-amid-covid-19/this-work-was-input-to-the-decision-to-have-a-hybrid-fall>

- April 6: Provost attended SACUA meeting.
- Early May: asked SACUA to suggest faculty to serve on fall planning committees; their nominations were added to the committees.
- All provost fall planning committees included faculty.
- Spring: several fall planning committee chairs met with SACUA.
- 5/30-6/2: Engaged with SACUA regarding SPG 201.73, Short-Term Layoff (Furlough)/ Short-Term Effort Reduction.
- June 24: provided feedback to SACUA on their survey.
- June 25-30: Engaged with SACUA regarding guidance on return to on-campus teaching; incorporated feedback from SACUA into final document.

#### Plans for implementation in each school & college (after decision was announced in late June)

- July 14+: engaged with SACUA regarding syllabus statement language; incorporated feedback from SACUA into the final document
- School and colleges engaged faculty in myriad ways as they planned for the fall semester
- Faculty from public health and Dr. Malani attended faculty meetings in several schools (e.g., Engineering, SEAS, Social Work, Ross).
- Reentry plans for all units reviewed by a team that included faculty to ensure compliance with guidelines.
- Reentry team had daily office hours for several weeks to answer questions from units, including from faculty.

#### General Engagement:

- Provost meetings with SACUA leadership: 4/3, 4/24, 6/10, 6/26.
- President met with SACUA chair: 1/13, 2/10, 3/18, 4/14, 5/18, 6/3, 9/14; with Senate Assembly: 4/20; with SACUA: 1/28, 3/30, and is scheduled to meet again on 9/28.
- July 8: Faculty Senate town hall.
- August 13: Second SACUA town hall.

#### Fall:

To support the health of the university community during the COVID-19 pandemic, President Schlissel established the COVID-19 Campus Health Response Committee in mid-July.

This committee is responsible for the timely triage of information, coordinating key U-M offices, and providing expert advice and recommendations to university leaders. [Its members](#) are designing and implementing public health and safety measures and policies, analyzing data, and serving as a resource to our schools, colleges and units. The size and scope of the institution often

makes one-size-fits-all solutions impractical, and this committee will help resolve questions from different campus areas.

**Q. Explain the university's approach to testing and monitoring.**

A. The U-M COVID-19 testing plan is designed based on detailed input from dozens of experts including several faculty members from the School of Public Health and Michigan Medicine. It continues to evolve since its initial formulation based on increased testing availability and capacity, and accumulating experience gained by other universities. It is broad-based and has multiple components, including:

- Baseline testing of nearly 6,000 students before they moved into Michigan Housing, as well as testing of as many as 1500 residents of affiliated fraternity or sorority facilities.
- The U-M COVID-19 Community Sampling and Tracking program, a free, opt-in, voluntary surveillance testing program that will test up to 3,000 individuals per week. The program is open to students living on or off campus as well as faculty and staff, including those from Michigan Medicine, who work in-person on the Ann Arbor campus.
- We continue to provide approximately 900 tests per week to student-athletes.
- Symptomatic testing of students through University Health Service (UHS/Power Center) and of faculty and staff through Occupational Health Services.
- Exposure testing for close contacts identified through case investigation, contact tracing or workplace exposure investigations.
- Antibody testing for Michigan Medicine faculty and staff involved in patient care.
- Daily symptom tracking through the ResponsiBLUE health screening tool.

More specific details are below. Information on positive cases and total numbers of tests on campus (excluding our outpatient clinics and hospital) are available on the [U-M COVID-19 dashboard](#).

Baseline testing

Nearly 5,800 students underwent [pre-arrival](#) baseline testing within a week or so before they moved into Michigan Housing. Of those, 21 tests came back positive (0.36 percent). University Health Service nurses contacted each of the 21 students to encourage an evaluation with their local health care provider, and we helped make plans for their delayed arrival to campus.

Students who arrived for move-in having not submitted a COVID test were tested here and asked to practice enhanced social distancing in their campus housing rooms until they got their test results.

Overall, we've now tested more than 6,000 students who live in campus housing under this program with 22 total positives.

Similar baseline testing was offered to 1,500 individuals in fraternity and sorority congregate living facilities. The students expressed interest, and we offered this testing in partnership with the same company that performed our pre-arrival testing for U-M Housing. We offered five hundred tests per week for three weeks under this testing effort, and 36 percent of FSL residents participated.

### Voluntary (opt-in) U-M surveillance testing

The U-M COVID-19 Community Sampling and Tracking Program launched Sept. 3, with registration open to students, faculty and staff on the Ann Arbor campus. Initially the test will use material from a self-administered nasal swab, but we are investigating using a saliva test as numerous faculty have suggested.

This surveillance program, designed by experts from our School of Public Health, will help the university monitor levels of COVID-19 in the campus community among people who are asymptomatic. We will use this information to better target interventions throughout the semester and as an early warning system for possible outbreaks. The program can pivot to more heavily weight certain populations if outbreaks occur.

The program uses an opt-in random selection approach with the ability to specifically target groups of interest. We took this approach so as to avoid ethical and privacy concerns involved in requiring an asymptomatic person to undergo a medical test. In order to avoid potential selection bias that comes from this sampling method, weighted randomization methods developed by public health faculty will be used to select persons amongst program volunteers to provide a sample each week.

This program is open to U-M students as well as to staff and faculty working on campus. It is targeted at those that are regularly on or come to campus since our goal is to understand COVID-19 prevalence on campus and in our student community. In addition, we don't want to increase campus density by asking faculty and staff to come to campus just to be tested.

Testing has begun and will ramp up to approximately 3,000 individuals weekly by the end of September. The program will run throughout the fall semester.

<https://record.umich.edu/articles/university-to-test-3000-weekly-for-covid-19-on-campus/>.

U-M is targeting a goal to test at least 5 percent (the middle of the recommended weekly testing rate (1-10 percent) for U.S. populations according to the [Rockefeller Foundation](#)) of its student and on-campus population per week, with the ability to test a higher percentage when needed in response to concerns.

By taking a statistically-driven approach, the available test capacity will provide a more representative estimate of the impacts of COVID-19 on the entire community, including those groups often neglected by convenience-based surveillance systems

Each week, a sample of approximately 3,000 participants will be selected to create a representative sample of the campus community. Selected participants will be invited to select an appointment time to be tested at Palmer Commons through an observed, self-collected nasal swab.

The tests will be processed by Michigan Medicine and results will be available to participants through the MyUofMHealth online portal. Individuals with a positive test result will be contacted by UHS for follow-up.

### Ongoing surveillance of student athletes

We continue to provide approximately 900 tests per week to student-athletes. The frequency of testing may increase if our athletes return to competition later this fall.

### Symptom-based testing

For Students: Testing is available through the University Health Service for any student who has symptoms that might indicate COVID-19 infection. Additional space for this purpose is open in the lobby of the Power Center. Testing is arranged by UHS. Students log online info describing their symptoms and can receive same day appointments.

Faculty/Staff: Symptomatic testing of faculty and staff is reported through Occupational Health Services.

### Daily symptom tracking through the ResponsiBLUE health screening tool

Each day, all members of the campus community who enter campus buildings are required to check themselves for COVID-19 symptoms by answering a brief set of questions using ResponsiBLUE, a daily symptom checker, to meet state regulatory requirements for health screening. The tool offers advice and resources on where to seek care if you're not well. The campus community is encouraged to use the tool daily even if not on campus. This kind of tool was recommended by faculty experts during the summer planning. Aggregate data from the tool will be monitored by the Campus Health Response Committee and used to proactively inform our public health mitigation strategies. Information:

<https://its.umich.edu/computing/web-mobile/responsiblue>

### Future testing capacity

We are working to increase testing capacity further by switching to saliva based testing, and by using pooled samples. We will provide more information on how this capacity will be deployed in the weeks ahead.

### Wastewater studies

Public Health researchers are studying wastewater samples and taking measurements of air and surface samples to determine the presence of COVID-19 risk in the campus environment, and whether that has any relationship on infection rates within the university community.

### Additional testing and follow up questions:

#### **Q. What models, if any, is the University using to estimate possible infection rates?**

A. University of Michigan-specific models are currently being developed to evaluate infection rates, as well as to examine different scenarios around testing and interventions. Initially these models are being used to assess broad trends rather than generating specific, quantitative forecasts of case counts—once there is more data available for calibration, the models may be used to project forecasts as well.

Two models of campus transmission are currently being developed by faculty at SPH: 1) a compartmental, population-based model and 2) an individual-level model that explicitly simulates contact networks via classes, housing, and friendships, based on class size and residence hall

occupancy data at UM. Both models include residential students, off-campus students, faculty and staff, and community populations, and both models simulate asymptomatic, pre-symptomatic, mild, and severe infections, as well as care-seeking/testing, isolation, and hospitalization. The models are parameterized based on U-M data when available, then local, regional, or Michigan data, and US and international data otherwise, and will be calibrated to campus case patterns as they evolve.

More than one faculty group at Michigan is developing models of COVID-19 and ideally, there will be multiple models to inform our approach on campus as every model involves different assumptions and approaches. We are committed to using a multiplicity of models as they become available.

**Q. What is the sensitivity, specificity, false positive rate of virus testing on campus?**

A. We're using Michigan Medicine to do commercial RT-PCR assay from Thermo Fisher using mid-nasal self-administered swabs. The sensitivity is 250 copies per ml. This is VERY sensitive. Specificity is nearly 100 percent, with very few false positives. There is an uncertain false negative rate due to lack of knowledge about disease.

**Q. Why aren't we doing massive COVID-19 testing? Some other research universities are.**

A. We are ramping up to do surveillance at a rate of about 5 percent of on-campus population per week, which is in the middle of the recommended weekly testing rate (1-10 percent) for U.S. populations according to the [Rockefeller Foundation](#). And we are working on shifting to a saliva test in the weeks ahead that will significantly enhance our testing capacity.

Some universities made early announcements targeting massive testing but were unable to deliver due to various constraints. U-M has responded with a sense of urgency but has also been diligent in assessing access and availability, accuracy, scalability, etc. of various testing options. The university continues to explore options for scaling its testing approach. Also, it is important to realize that testing only works to help diminish disease transmission when it is part of an integrated system of interventions including masks, low density, hand-washing, case investigation, contact tracing and quarantine.

**CASE INVESTIGATION and CONTACT TRACING**

Case investigation and contact tracing is conducted under the auspices of the Washtenaw County Health Department, in collaboration with the university Department of Environment, Health, and Safety, and experts from the School of Public Health supported by approximately 75 graduate and professional students. Members of the Contact Tracing Corps have received specialized training to reach out, monitor and offer support to people in the Ann Arbor campus community who had close contact with students testing positive for the coronavirus that causes COVID-19.

The cases are being monitored and are available publicly on our dashboard:

<https://campusblueprint.umich.edu/dashboard>

**ISOLATION AND QUARANTINE**

**Q. What happens to a student who tests positive for SARS-CoV-2? If they live on campus vs. off campus? If they are symptomatic vs. asymptomatic?**

A. Isolation and quarantine help protect the public by preventing exposure to people who have or may have a contagious disease.

- Isolation separates sick people with a contagious disease from people who are not sick.
- Quarantine separates and restricts the movement of people who were exposed to a contagious disease to see if they become sick.

[Students, staff, and faculty will be expected to follow the isolation and quarantine guidelines set forth by the CDC.](#)

On and off-campus quarantine and isolation spaces will be identified for use by any U-M student who needs quarantine/isolation. U-M has set aside 600 spaces.

Students may be required to quarantine or isolate (as determined by part of a formal case investigation by the health department or designee) if they:

- Test positive (Isolation).
- Are determined through case investigation to have sustained [close personal contact](#) of sufficient duration with someone who has tested positive (Quarantine).

An assessment by the Washtenaw County Health Department, in collaboration with the University Health Service and Department of Environment, Health and Safety, will determine whether a student's apartment/home is adequate for isolation/quarantine, based on specific criteria (i.e. bedroom and bathroom configuration, common areas, etc.)

In most cases, students will not be able to quarantine or isolate in their on-campus residence hall. Some exceptions may be made for apartment-style housing assignments.

If a student is able to travel home, they will be encouraged to isolate/quarantine at their permanent residence, if possible. If students choose to return home, it will be important to coordinate their return in a way that ensures the student's safety and health as well as that of the U-M community and their home communities.

If a student needs to isolate/quarantine in a designated location on campus, a staff member from Student Life will facilitate a student's move to on-campus quarantine or isolation housing, including providing information about items to bring with them, arranging transportation as necessary, and coordinating meal/food delivery as requested through Michigan Dining. We do not rely on resident advisors to facilitate or transport students from their dorm room to quarantine.

While in isolation/quarantine, various individuals from the University will be in contact with the student to provide on-going support for student life concerns (academic, financial, facilities and housing, mental health and well-being, e.g.), clinical information and check-in, and public health information as necessary.

**Q. How have schools and colleges prepared their teaching spaces with hand sanitizer, student flow markings, attention to ventilation and other safety measures?**

A. The [full reentry planning process](#) was comprehensive and covered every aspect of units' academic, administrative, and physical operations. All academic units were required to provide their plans and these were thoroughly reviewed by multiple people including experts on facilities, health and safety, public health, and legal issues.

The [EHS standard operating procedures for academic facilities](#) covered *by space type* detailed information on access controls, signage (including directional signage and arrows), physical distancing requirements, hygiene and disinfection, and so on.

- The most common issues or questions that we had to clarify during the reentry process:
  - Physical distancing and PPE requirements for unique class formats (e.g. art / architecture / SMTD classes, science or engineering lab classes).
  - Clarification of physical distancing requirements in mix-use or shared spaces (drop-in study spaces, commons spaces, computer labs, teaching vs. research labs, etc).
  - How to track or audit health screening.
  - Clarification of acceptable class duration times.
  - Clarification of building density or screening requirements and how to interpret different State of Michigan Executive Orders (for research vs. other types of spaces).
  - Clarification about building access by U-M community to buildings and unit requests to be more restricted (e.g. smaller schools) or more open (e.g. museums, galleries).
  - Encouraging units to balance density and safety in building but also provide some spaces for students to study and/or quickly eat; take a remote class; or have touchdown space on campus.
  - Our reentry process required units to:
    - Communicate support resources to students and faculty/staff (SSD, OIE, CAPS, FASCCO, etc).
    - Have a process on how to handle disputes of teaching assignments (remote vs. in-person).
    - Continue to require remote work unless the activity is mission critical (email from provost to APG on Jul 30 - Email Subject "Temporary use of office space during COVID-19").

***Communications of process & support throughout the process***

- All of the planning documents and processes were on the [Provost's Office reentry site](#). This site was created as a parallel to the APG emails announcing the reentry process so that units had a repository of the information that wasn't email-based. The reentry email to APG and BAG was sent Tue, July 14.

- The entire reentry team made itself available to schools, colleges, and departments for daily office hours July 15 through July 31. We fielded questions from all corners of campus as they developed their internal plans.
- The reentry team had facilities and academic leadership from LSA, CoE, UMOR, and Provost's Office. From a public health and safety standpoint, EHS and SPH were involved. Additionally, OGC, HR, OIE, and others were available for support for matters that were complicated or very unique.

### ***Brief overview of the process***

- Detailed facilities planning *started* at the departmental and building level, because it's at this level that we have the local experts who know their facilities the best.
  - For larger units, this likely rested at the facilities/operations manager and/or department lead administrator level.
  - For smaller units, this likely was the dean's office and facilities/operations teams on behalf of all their academic/administrative departments.
- Departments were to review and audit all of their operations and spaces and submit to their dean's offices for unit consolidation and review and ultimate submittal to the reentry team.
- Units submitted their plans to the reentry team, and a lead person from the reentry team worked with the unit to review and modify plans for final review and acceptance by a reentry lead.

### **Signage and floor markings**

- Centrally-developed signage and markings were created and required. Though, this does not mean all spaces require floor markings.
- Detailed signage images, ordering process, appropriate uses, etc, were communicated and are hosted at the EHS [COVID-19 Building Signage Guidelines](#) page.
  - The signage site and package was a partnership between Facilities and Operations/Environment, Health and Safety and the Office of the Vice President for Communications.
  - The sign-creation process is iterative and ever-evolving and responsive, as new needs arise or rules change.
  - There was a clear need and goal to:
    - 1) to create clear guidance to units on what to post where and
    - 2) to make it clear and understandable for students/faculty/staff regardless of what building they are in.
- The above package was available *and required* as the campus standard.
  - Key staff formally presented the sign package to the Facilities Users Network (100s of facilities/operations people across campus -- not just academic units).
- Appropriate language about signage and markings and links to EHS were provided in our reentry process documents (SOPs). Guidance like the below was given by all space types in the academic SOPs, including offices, labs, practice rooms, etc.

### ***Example language directly taken from SOPs***

- *Classrooms, Teaching Labs, Design Studios, Dance Studios, etc*

- "For rooms with multiple doors, designate dedicated one-way entry and exit points to minimize traffic crossover during passing periods and post directional signage as appropriate."
- "When possible, we recommend posting a floor plan with room capacity and a specific furniture layout that depicts appropriate physical distancing for the room. Ensure that room layouts align with ADA physical accessibility requirements."
- *Computer labs*
  - Similar entry/exit note like classroom blurb above.
  - "Other visual cues (floor decals, tape) can be used to indicate usable spaces and help maintain the required 6 foot physical distancing between occupants."
- *Hallways / corridors*
  - "If a corridor or stairwell use is constantly congested, directional signage may be needed."
  - "For longer periods in proximity within corridors (queueing between classes) individuals should be encouraged to maintain physical distancing of 6 feet. Other visual cues (floor decals, tape) can be used to indicate usable spaces and help maintain the required 6 foot physical distancing between occupants."
  - "If necessary, stairwells will be designated as up/down, and corridors as one-directional with EHS and Fire Marshall approval."
- *Building Entrances*
  - "All campus building entrances must have:
    - Dedicated entry point(s)
    - COVID-19 health and safety signage (for face coverings, etc.) posted accordingly...
    - An ingress/egress protocol to reduce congestion at the dedicated entry point(s) (e.g., staggered shifts/start times, rotation of on-site days, assigned in/out doors)"

## Ventilation

- See the HVAC summary from the Provost re-entry (<https://ehs.umich.edu/wp-content/uploads/2020/07/COVID-19-Guidelines-for-Academic-Facilities.pdf>) describes the guidance we received from public health experts.
  - "HVAC and Air Filtration Modifications There is a general perception that increasing HVAC ventilation air changes and adding or upgrading air filtration may reduce the risk of COVID-19 transmission. Our U-M School of Public Health faculty experts have indicated that these types of HVAC modifications result in small reductions in risk. The greatest reduction in risk comes from 1) reduced density, 2) physical distancing, 3) face covering use, and 4) hygiene, which is why these are emphasized repeatedly. For information on U-M Facilities and Operations approach to HVAC during the COVID-19 pandemic, please visit COVID-19 HVAC Guidelines for University of Michigan Facilities, available on the EHS COVID-19 web site."
- Facilities staff never left for the summer and used those months to perform maintenance and review of HVAC and other systems in campus buildings. Consistent with our layered approach to safety, we included engineering support, our building controls group, EHS and maintenance to review CDC recommendations and other best practices for our HVAC systems.

- The HVAC Task Force developed guidance and recommendations in June, spelled out in the [COVID-19 HVAC Guidelines for U-M Facilities](#), which is referenced in the Guidelines for Academic Facilities.
- Among those actions are the following:
  - Updating fan schedules to ensure a robust approach building ventilation
  - Increasing total airflow in occupied spaces, and maximizing outside air rates
  - Ensuring sufficient ventilation and air changes occurs daily, even in facilities with little or no activity
  - Completing campus-wide disabling of demand-control ventilation systems, such as HVAC occupancy sensors, to ensure airflow continues even in unoccupied locations when fans are running.
  - Confirming U-M's air filtration standards, which meet or exceed CDC recommendations for COVID.
  - Inspecting filter housings to ensure proper fit and installation
- Raising the response priority level of HVAC-related service calls involving air handlers on campus. These are now immediately dispatched to technicians 24/7, regardless of area served.
- Prior to the research ramp-up we confirmed very robust ventilation in our laboratory research spaces. Again, we utilized a layered approach including decrease density, distancing, face coverings, personal hygiene and more.

**Q. Can you describe the use of police in the Ambassadors Program?**

A. The Ambassadors Program was designed to provide a more informal level of response and education to minimize the need for formal law enforcement engagement with our students.

While we have received feedback from some in our community expressing concerns about the Michigan Ambassador program partnership initially including sworn law enforcement officers from UMPD and AAPD as members of the canvassing teams, there have been no reported complaints regarding specific instances where any students holding marginalized identities have been targeted.

In response to feedback from our community, the ambassador canvassing teams no longer include armed sworn law enforcement officers. Teams are composed of students, staff/faculty and community volunteers and include Division of Public Safety and Security staff members who do not carry firearms.

As always, police may be called to activities that present a safety risk or are in violation of the law, but the idea is for Michigan Ambassadors to first proactively provide outreach in the community to communicate and remind students about public health best practices. The program is designed by Student Life specifically to reduce the need for law enforcement interventions by providing guidance from peers and volunteers from our community and provide residents with an opportunity to immediately address any concerns reported at their address. Students were deeply engaged in the design of this program.

The COVID Concerns Reporting Line has been very well received by students and the greater Ann Arbor community who are pleased to have a way to report concerns short of involving law enforcement. So far, most of the calls made to our [COVID-19 Concerns Reporting Line](#) (734-647-3000) have been noise complaints regarding gatherings where people were complying with public health recommendations. They were outside and under the 25-person limit as prescribed by the Washtenaw County Health Department.

Gatherings that were inappropriate resulted in formal warnings, referrals or citations. Students involved may be referred to the Office of Student Conflict Resolution or other group accountability processes.

The Opt-in ability for students to provide a phone number linked to a given address allows the Ambassadors to text/call rather than visit an address where there is a concern reported.

Ambassadors have been deployed to promote positive social distancing in the dining hall lines and also visit the canopy areas and other gathering spaces such as the Diag, the Law Quad, Palmer Field, Elbel Field etc. where groups of students have begun congregating outdoors in larger numbers than usual.

Most importantly it is perceived by Drs. Ernst, Malani and others that the presence of the ambassadors providing extensive public health messaging and persistent positive reminders about face coverings may be making a significant difference on our campus.

Educational efforts have continued to evolve and Ambassadors working off campus are now proving a handout referencing safe small gatherings and a guest list template with space for up to 25 names along with the designations of who lives in the household. The template instructs students to save these for 21 days to assist in contact tracing efforts.

The State of Michigan and other campuses across the state country have been contacting U-M to ask about the structure and operation of the Ambassador program to augment the efforts on their campuses.

A detailed FAQ documenting the changes made in the program was distributed to students and staff expressing concerns about the program and this information was also included on the Maize and Blueprint website. Student Life leadership is engaged in on-going conversations with members of the UM community regarding concerns about the program. Additional modifications and communication related to the program will be made as needed.

#### **Q. Can you describe the child care subsidy for students?**

A. The Child Care Subsidy is a need-based program administered by the Office of Financial Aid and is available to both U.S. domestic students (FAFSA filers) and international students seeking assistance. It provides financial support for student parents who are placing their children (ages 12 and under) in Michigan licensed care during periods of at least half-time enrollment.

Doctoral students may also be considered during periods of non-enrollment when academic pursuits still amount to the equivalent of at least half-time enrollment.

Rackham's doctoral experience survey suggests that 7-8% of doctoral students are parents, which makes ~ 400 students of this cohort potentially eligible. (This does not include undergraduates, masters, and professional students, who are also eligible for the subsidy; the percent who are parents in these groups would differ.)

Slightly less than 200 students claim the subsidy campus wide each Fall/Winter term. These data suggest the additional cost that expansion of the subsidy might require.

The average amount provided per student per term for the subsidy is about \$3,000.

### Licensure Requirement

The intent of the licensure requirement is to ensure that children are in safe facilities. If they are licensed child care providers, they are monitored, background checks are required of employees, and therefore it is less likely that a person with a significantly troubling background will be in the facility.

The University recently expanded eligibility for the child care subsidy to licensed care providers *outside* the State of Michigan, due to COVID-19 impacts. In recognition that students will pursue their education in the fall semester through in-person, hybrid, and/or remote formats, the University has temporarily changed eligibility criteria for the Child Care Subsidy beginning fall term 2020. During this temporary period, child care expenses from any licensed child care provider will be eligible for reimbursement under the subsidy, regardless of the state, country, or agency of licensure. Other eligibility criteria for the Child Care Subsidy continue to be in effect.

Many students who are experiencing financial hardships due to a COVID-19 related disruption may apply for assistance through the funding provided to the University through the CARES Act. Eligible expenses can include the cost of daycare (licensure is not required).

Students with unexpected costs related to COVID-19 may request [CARES Act Emergency Funding](#) through the Student Self-Service Page of [Wolverine Access](#). Eligible costs include the cost of child care, and supporting documentation is encouraged but not required. Rackham students who apply for CARES Act Emergency Funding, but are not eligible under the Department of Education guidelines, will be considered for limited support through supplemental funding provided by the Rackham Graduate School.

### Dependent Care Flexible Spending Account for Child Care Needs

The University of Michigan offers faculty and staff the opportunity to pay for eligible health care and/or dependent daycare expenses with pre-tax dollars using a Flexible Spending Account (FSA) administered by PayFlex. (An FSA allows a set amount taken from pay before taxes, which lowers income tax. The money is put into an account that is then used to reimburse for eligible expenses.) This is not a subsidy, but rather a pre-tax opportunity to cover child care expenses for employees.

A Dependent Care FSA is used to pay for eligible dependent day care or elder care expenses. As a general rule, eligible dependent care expenses are those associated with the care provided to your eligible dependents while you (and your spouse if you are married) were either at work or looking for work, or so your spouse could attend school full-time.

Resource here for details:

<https://hr.umich.edu/benefits-wellness/financial/flexible-spending-accounts/dependent-care-flexible-spending-accounts>

Eligible dependents include:

- Children age 12 and under whom can be claimed as exemptions for federal tax purposes
- A spouse who is physically or mentally unable to care for himself or herself
- A dependent who is physically or mentally unable to care for himself or herself, and for whom you can claim an exemption.

Eligible Dependent Care FSA expenses include, but are not limited to, care provided by the following:

- Home-based licensed day care.
- Licensed day care center (elder care or child care).
- Nursery school.
- Private baby-sitter in your home or theirs.
- Private preschool program.
- Providers of care for disabled dependents.
- Public or private before-school and/or after-school programs for custodial care.
- Public or private summer day camps.
- Your child, age 19 or older, or any other individual you do not claim as a dependent on your income tax return.

Here is the information about the student child care subsidy, administered by OFA.

Here is information about our childcare resources for employees.

Additional information about additional measures related to COVID from Work-Life is available here.

**Q. How are decisions being made? Who is the President relying on for expert advice?**

A. The university president and other leaders sought expertise and advice from dozens of faculty and staff who are leaders in their fields including experts in public health, medicine, innovative teaching, engaged learning, physical space use, environmental health and much more.

During the lead up to fall semester and to support the health of the university community during the COVID-19 pandemic, the president established the [COVID-19 Campus Health Response Committee](#).

This committee is responsible for the timely assessment of information, coordination of key U-M offices, and the provision of expert advice and recommendations to university leaders. Its members design and implement public health and safety measures and policies, analyze data, and serve as a resource to our schools, colleges and units. Our size and scope often makes one-size-fits-all solutions impractical, and this committee will help resolve questions from different campus areas.

Leading the committee is Rob Ernst, whom the president has appointed to take on an expanded role as director of COVID-19 campus health response. As the associate vice president for student life and executive director of the University Health Service on our Ann Arbor campus, Dr. Ernst is at the forefront of U-M's response to COVID-19. The committee also includes experts from Public Health, the Medical School, Occupational and Environmental Health, Public Safety, Communications, Student Life and the Provost's office.

The committee's work will cover all three U-M campuses and their activities, excluding the clinical activities of Michigan Medicine.

Leading up to this academic year, an immense amount of work has taken place drawing from many of our schools and colleges, including School of Public Health, U-M Medical School, the College of Engineering, School of Education as well as the College of Literature, Science and the Arts. Student Life engaged hundreds of our students in wide-ranging aspects of planning.

U-M's plan to conduct an in-person semester relies on research-based public health strategies developed and tested in the setting of other infectious diseases (influenza, for example) including social distancing, minimizing out-of-area travel, wearing face coverings, washing hands frequently, symptom screening, clinical testing, contact tracing and quarantine that add up to a highly effective way to limit spread of this illness, allowing students to pursue their Michigan education, albeit in a modified fashion.

U-M has public health and medical expertise and capacity not commonly found at other institutions. This includes a highly ranked academic medical center, Medical School, and School of Public Health, whose renowned faculty members are advising the State of Michigan leaders on their COVID-19 pandemic response and the phased approach to re-opening the state's activities.

Information on COVID committees:

<https://president.umich.edu/committees/u-m-covid-19-committees/>

U-M also has invested significant time reaching out to leaders of other academic institutions to understand strengths and weaknesses of approaches taken at other schools. Healthcare leaders in Michigan also have served as useful inputs.

**Q. What metrics are we following to assess safety of continuing in person instruction and residential life? Who is analyzing these metrics? How will we decide whether to pull back?**

A. The university will continue to carefully monitor a number of data points as we move forward in the fall semester. The experience so far of states and other organizations responding to the pandemic have shown that the complexities of epidemic spread require a holistic assessment, and so there is no one number that would prompt a change. Among the factors considered are:

- Spread of COVID-19 locally and regionally;
- Capacity of area hospitals;
- Campus isolation capacity;
- Capacity for case investigation and contact tracing.

The CHRC is working on a more rigorous listing of metrics and types of changes that will provoke reconsideration of our plans and we will share those shortly (akin to the indicators framework developed at the state level, [mistartmap.info](http://mistartmap.info)). University health officials will consider the current state in all of these areas when making any future decisions. We are being guided by the same faculty public health and medical experts advising the State of Michigan leaders on their COVID-19 pandemic response.

**Q. What advice or models did the administration rely on to design its “public health informed” hybrid semester?**

A. Guidance and input was provided by expert faculty through the President’s Advisory Group on Public Health, the President’s Advisory Group on Ethics and Privacy and the seven provost’s committees and subcommittees described in an earlier Q & A

The summer planning process took into account data sources and trends from developing national and state-level estimates relied on faculty expertise, newly emerging information about the virus and its transmission, and basic public health principles applied to the campus environment. Plans have been modified continuously based on newly available information and the experiences of other universities.

Faculty in SPH are currently working to develop mathematical models of COVID-19 on our campus and other UM faculty groups are also developing models that may be useful in our planning and management of the pandemic. See earlier Q & A for information on those models.

**Q. What would we do to prevent ill students from bringing COVID-19 back home with them if we had to send students home?**

A. If students return home, it will be important to coordinate their return in a way that ensures the student’s safety and health as well as that of the U-M community and their home communities. This will include consultation with public health and medical experts, evaluation of the student’s situation at home, and potentially include quarantine/isolation and testing before returning home (following the reverse procedure for pre-arrival).

**Q. Can you provide information on student move-in procedures and enforcement?**

A. Students residents of Michigan Housing who tested positive (21 out of about 6,000 tests) were individually contacted by Quest and UHS for follow up. Anyone who didn't submit a test (housing maintains a list) was contacted for testing.

Housing’s move from a 3-day to 7-day move-in successfully reduced the congestion and density of families in and around campus.

If any student tested positive through a pre-arrival COVID test, they received outreach from UHS and a new arrival date/process was communicated (21 students with positive tests).

- While Housing was able to directly affect traffic controls, through time slots and unloading permits, the plan depended in a large degree on cooperation from students and families, in observing public health guidelines.
- Reports confirmed that the face covering policy was widely followed, but other policies, such as social distancing and limiting family members in the halls, were not uniformly observed.
- Without MLEAD student volunteers (eliminated to lower density in the buildings), and over a prolonged move-in period, staff's ability to monitor compliance was constrained.
- A segment of resident student staff (RAs and others) expressed the need for additional PPE, and Housing was able to deliver additional masks and 400 face shields within 24 hours. Housing is in the process of distributing an ample supply of disposable face masks for residents and ResStaff members who need additional face coverings.
- As predicted, as students have yet to find their routines, the largest dining halls saw the longest lines.
- With 6,224 students moved-in by August 30, Housing is now clarifying and reinforcing public health guidelines through communications and a robust conduct process.