



THE UNIVERSITY OF TENNESSEE BOARD OF TRUSTEES

2020 ANNUAL MEETING OF THE BOARD OF TRUSTEES	
Board of Trustees Special Focus Session (COVID-19)	
June 25, 2020	Virtual/Conference Call
11:30 a.m. (EDT)	Knoxville, Tennessee

AGENDA

- I. Call to Order and Roll Call
- II. Opening Remarks by the Chair
- III. Requests to Address the Board

[Note: If not otherwise scheduled to be heard in a standing committee meeting or the June 26, 2020 Annual Meeting of the Board]
- IV. [COVID-19 Update and Planning for Fall 2020 – Discussion](#) Tab 1
 - Overview
 - Presentation
 - Question & Answer Session
- V. Other Business

[Note: Under the Bylaws of the Board, items not appearing on the agenda may be considered only upon an affirmative vote representing a majority of the total voting membership of the Board.]
- VI. Closing Remarks
- VII. Adjournment

Best Practices for Re-opening University of Tennessee Campuses

From the University of Tennessee President's Re-Opening Task Force, May 18th, 2020

INTRODUCTION

University campuses across the United States, including those in the UT System, are discussing how best to continue delivering outstanding educational experiences in the context of the ongoing COVID pandemic. The UT System has a presence in each of Tennessee's 95 counties, with major campuses in Knoxville, Chattanooga, Martin, and Memphis. The COVID-19 pandemic continues to evolve rapidly and is presenting different challenges to different parts of the State.¹ The guidance contained here is intended to illuminate best practices for the varied challenges that COVID-19 presents for a potential re-opening of UT campuses. It is based on current knowledge of the pandemic, knowledge that is incomplete and may change over time. These guidelines are purposefully broad to be applicable to all parts of the UT System. It is recognized that these guidelines and associated practices will almost certainly evolve as the UT System learns from our own experiences and the evolution of the pandemic, and incorporates best practices from other Universities across the country, that will be addressing the same issues.

Any plans for re-opening should recognize that some level of precautions will continue to be necessary for at least 18-24 months, by which time it is hoped that a vaccine or highly effective therapy will have been identified, manufactured, and distributed widely enough to allow a return to normal activities of daily living including normal campus life and classes. However, it is unknown whether there will be a second wave of disease in the fall or winter that cannot be managed without a return to restrictive measures. Accordingly, guidelines must cover the entire academic year and must also prepare for the possibility that another series of lockdowns might occur.

While many aspects of didactic learning can be successfully transitioned to online instruction, the social aspects of education, i.e., learning from others in informal or formal groups, are more difficult virtually. The task force agrees with national experts that we will not return to campus life just as it was before, but also that the on-campus experience offers significant value. In a University setting, several factors combine to make it unlikely that transmission of COVID-19 can be eliminated with typical campus activities. Policies intended to restrict gatherings and avoid close contact are unlikely to be highly effective in a campus setting, particularly when considering a time frame of months or potentially even years. We will be experiencing a ***new normal*** where we must ***manage through the risks***. We will do many things differently, with the primary goal of keeping our students and faculty safe while delivering an outstanding educational experience.

Summary of key concepts.

- 1) Eliminating transmission of the virus on UT campuses is not a realistic option; our efforts should be focused on managing the spread of infection and mitigating the impact of COVID-19 on the quality of the educational experience and on the health of our students, faculty, staff, and communities.
- 2) Education on COVID-19 should be provided to all students, parents, faculty, and staff, highlighting the risks of personal infection and the potential consequences of spread to others.
- 3) On-campus transit options and campus facilities including dormitories, classrooms, dining halls, and other common use areas should be re-imagined in a manner that provides them opportunity to practice good personal hygiene and social distancing.
- 4) Strict measures must be put in place to prevent transmission of the novel coronavirus to faculty, staff, students and members of the community with a particular focus on high-risk individuals. Campus policies and procedures should provide flexibility to all members of the community to make appropriate decisions about their safety.
- 5) Robust plans should be developed to manage COVID-19 infections on campus.
- 6) Courses should be re-structured to provide safer learning environments that include social distancing and flexible online learning options, where feasible.
- 7) Special situations such as travel of students off campus, visitation on campus of travelers from outside the community, and organization of events on-campus represent significant risks for spread of COVID-19.

SLOWING TRANSMISSION OF THE NOVEL CORONAVIRUS

Education. Education about the risks of COVID-19 and the policies put in place to increase the safety of our students, parents, faculty, staff, and communities are the cornerstones of any plan to decrease transmission.

- a) Educational packets should be developed for all students, parents, faculty, and staff and posted online for easy public access. Risks to individuals and the risk of spreading the virus to others should be described.
- b) An agreement should be developed for both students and parents (when applicable) stating that they have carefully read the educational materials and understand the contents. The agreement should include an understanding of the risks to the students and the risks to parents and others in the household should a student return home and inadvertently transmit the virus.
- c) A general overview of COVID-19 including infection prevention and control measures (hand hygiene, respiratory etiquette, physical distancing, cleaning and disinfection), signs and symptoms, testing, transmission, and credible resources should be provided to all faculty, staff and students at multiple times throughout the academic year. The

delivery of this content should be through a variety of platforms including online modules, social media, and signage. Completion of online modules is required of all faculty, staff, and students. Instruction on the ethical issues inherent in convening on campus during a pandemic should be part of fall orientation for all students.

- d) A social contract should be developed for students that provides an opportunity for them to agree that they will practice behaviors and abide by policies designed to decrease the risk of transmission to others.

Managing the campus environment. To the degree possible, transit options and facilities should be re-imagined to provide opportunities for social distancing and good personal hygiene.

- a) On campus transit options should follow CDC guidelines for safe operation.² Campuses should consider development of alternate means of transportation that reduce passenger density.
- b) Re-imagine facilities intended for student use including dormitories, classrooms, cafeterias, libraries, and other places students gather based on recommendations from CDC for businesses³ and shared housing.⁴ A campus-specific checklist could be developed to assist in assessing and altering facilities.
- c) To the degree possible, flow of students through the campus should be regulated to de-densify walkways and create one-way paths by staggering class schedules, adding signage, and creating physical barriers to separate students during transit.
- d) An isolation dormitory or other alternate living space should be designated or created to house infected students in isolation (c.f. “Testing for COVID-19” section below for more details).

Personal hygiene and behaviors. UT should provide options for students, faculty, and staff to adhere to best practices for personal hygiene and safety.

- a) Sinks with running water, soap, and disposable towels (not air dryers) should be widely available.
- b) Hand sanitizer should be widely available in all areas where people may go in the course of normal campus activities. Portable containers of hand sanitizer should be made readily available free of charge.
- c) Options should be available whenever possible to allow students to segregate physically or move to a virtual environment for campus activities including classes.
- d) Face coverings should be made available and at multiple easily accessible locations.
- e) In general, the autonomy of those who wish to adopt behaviors that provide maximal personal safety should be respected and facilitated.

Re-imagining classes. Campuses may evaluate classes and coursework and consider re-imagining them, providing safer options for students to learn and instructors to teach. Examples of re-imagined instruction could include:

- a) A hybrid mode of learning that provides for online learning options when feasible.
- b) Large classes offered entirely by online instruction or re-imagined with alternating schedules for in person instruction that allow fewer students to be present in any particular class. The American College Health Association⁵ defines large classes as those with 30 or more participants, but individual campuses may develop different definitions based on the characteristics of their classrooms and the opportunities to modify them for appropriate social distancing.
- c) Smaller classes moved into larger venues to allow better spacing.
- d) Staggered schedules and standard class times that are spaced further apart to reduce the density of students during ingress, egress, and transit between classes, including consideration of weekend instruction if feasible.
- e) When considering face-to-face group activities within courses, placing students into cohorts to the extent possible so that members of the groups remain static over time and mixing or cross-over between groups is uncommon.
- f) Individual campuses develop a checklist or guidance that provides instructions on providing a safe learning environment which can be used by course directors when planning individual classes.
- g) In addition to the above measures, consider altering requirements for vulnerable students to take specific classes (e.g., requirements for majors), where safe instruction cannot be managed, through deferral or elimination of the requirements.
- h) Consider the risk status of faculty and teaching assistants, together with interests in specific instructional models, when making decisions on how instruction will be delivered; courses with choices of instructors may be assigned to faculty based on these restrictions or aligned with these specific interests as feasible.
- i) Track in-person attendance carefully to facilitate contact tracing in the event of infection, but allow students to retain full autonomy over whether they choose to be physically present or participate in another approved manner.
- j) Encourage innovation in learning methods, recognizing that this is a fluid situation that may require in-progress adjustments and re-thinking of best practices for the long-term.

Handling transitions between on-campus and off-campus. Transitions of students off campus and visitation of others on campus represent opportunities for transmission of the novel coronavirus.

- a) Students should be encouraged to remain on campus for as much of the year as possible.
- b) For those campuses with residential housing, dates for moving into resident halls should be staggered to reduce density during this period.
- c) Policies should be developed to manage student travel off campus including returning home. These policies may include notification of campus authorities for health tracking reasons, screening for infection, testing for infection, quarantine upon return, or other

measures. International travel and travel to areas with a significant burden of COVID-19 in the community may be restricted or result in more stringent measures.

- d) Consideration should be given to compressing semesters by eliminating breaks. Altering start and end dates for other portions of the future academic calendar may need further consideration based on the continued evolution of the pandemic.
- e) Policies should be developed to manage travel to domestic and international hotspots.
- f) Policies should be developed to create a safe environment and monitor visitation by parents, visiting professors, campus tours, and other visitors. These policies should be flexible enough to account for different levels of community or on-campus transmission of COVID-19 and thus different levels of risk.

Managing events. Traditional events that include large numbers of persons in confined spaces (e.g., concerts, spectator sports, pep rallies, graduation ceremonies) represent a significant risk for spread of COVID-19.

- a) Events that are expected to draw large gatherings should be assessed in the context of the evolving pandemic and consideration should be given to moving them online or canceling them. The definition of a large gathering might differ on individual campuses based on the characteristics of available venues to provide a safe environment; CDC provides guidance in this context that should be updated throughout the year.⁶
- b) Events that are expected to draw large gatherings, but that can potentially be safely conducted in large venues, should develop a safety plan which includes mitigating the spread of COVID-19. This safety plan should be reviewed by an un-biased panel of experts for prior approval.
- c) In communities with local transmission, if more strict public health policies are in effect (i.e., no groups of 10 or more), the more stringent policy should be followed.
- d) An athletics and sports medicine action plan should be developed to give specific guidance on athletics and protection of athletes following guidance from the American College Health Association.⁵

Managing the campus when COVID-19 (+) students are identified. Campus administrators should consider taking steps to mitigate the spread of COVID-19 when (+) students are identified.

- a) Report all positive COVID-19 tests to local public health officials and coordinate responses with those officials.
- b) In consultation with local health authorities, consider short-term (2-5 days) closures of buildings, spaces, or other facilities where COVID-19 (+) individuals have been present to allow time for contact tracing and cleaning and disinfection.
- c) Consider closure or other measures for the entire campus for larger outbreaks, particularly if community transmission outside of the campus is widespread. Potential triggers for wider closures:
 - i. Rapid or exponential rise in cases on campus.

- ii. Campus is developing capacity issues for managing COVID-19 (+) individuals (e.g., housing shortages, strained ability to clean and disinfect buildings or spaces).
- iii. Serious outcomes from COVID-19 are experienced on campus.
- iv. Community or state health advisors or governmental officials are increasing the stringency of control measures in the face of rising cases.

MITIGATING THE IMPACT OF COVID-19 ON INDIVIDUALS

Student Health. Student health services will be the first line of defense for managing COVID-19 infections on campus.

- a) Resources for student health services should be increased. Students concerned about COVID-19 should be able to easily access student health services on a same-day appointment basis. Barriers to access should be identified and removed.
- b) Mental health services capacity should be increased. There is concern that anxiety, depression, and suicide rates will be higher among students this year due to COVID-19 and the associated isolation and social distancing measures that are being put into place.
- c) Student health services should develop treatment protocols for COVID-19 with the input of local public health and healthcare officials, including plans for transfer to a higher level of care as needed.
- d) Student health services should manage infected students in an isolation dormitory or similar alternate living facility. Management in this context should include placement and monitoring for worsening of symptoms requiring escalation of care. Campus administration should also make provision for delivery of meals.
- e) Syndromic surveillance of influenza-like-illness and COVID-19 symptoms should be established and carefully monitored. This may fall within the purview of student health services with the assistance of public health resources or may be developed separately by UT epidemiologists and faculty engaged in public health instruction or research, depending on campus-specific resources.
- f) Vaccination against influenza, when not medically contra-indicated, should be considered as a condition of being on campus this year so that influenza outbreaks do not mask COVID-19 spread. Student health services should be prepared for mass vaccination of faculty, staff, students, and contractors who come on campus.
- g) Plans should be made to facilitate large-scale distribution of future COVID-19 vaccines when available.

Faculty and staff training and workplace considerations. The safest work environment possible must be provided for faculty and staff in the course of their duties.

- a) All faculty and staff should complete training on COVID-19 and policies regarding return to work and return to school.
- b) Workplaces should be modified, and policies should be created in line with guidance produced by CDC for Institutions of Higher Learning.⁶
- c) Masks or face coverings should be worn at all times when the possibility for contact with others exists.
- d) Screening for signs of infection or contact with persons potentially ill with COVID-19 should be required daily, prior to entering the workplace.
- e) Remote work should be encouraged for all faculty and staff when feasible.
- f) At-risk individuals should explore alternatives to being on campus such as teaching or working remotely. If unable to work remotely or utilize online methods due to the nature of the instruction, such individuals should consider not teaching this year or creative scheduling or assignments.

Testing for COVID-19. A comprehensive strategy to provide testing within one working day for all students, faculty, and staff with symptoms of COVID-19 should be in place on all campuses.

- a) Criteria for testing and re-testing should be in accordance with guidelines from the Infectious Disease Society of America.⁷
 - i) All symptomatic individuals should be tested.
 - ii) Symptomatic individuals for whom there is a strong suspicion of COVID-19 should be re-tested if the initial test is negative.
 - iii) Asymptomatic individuals who have had close contact exposure to a COVID-19 (+) individual should be tested. This may result in testing of multiple students during cluster investigations if they share classes or living quarters.
 - iv) Campuses should consider surveillance measures as appropriate and available.
- b) At present all testing should be by standard nucleic acid amplification tests (e.g., RT-PCR). As other options, including rapid testing and antigen testing become available, this guidance may change.
- c) All campuses should have a strategy to access testing laboratories with a 24 hour or less turnaround time. This may be through on campus test development or via agreements with commercial laboratories to prioritize testing of symptomatic students.
- d) Innovative strategies to facilitate access to testing may be considered, including distribution of self-test kits with multiple locations for kit drop-off.
- e) Campuses should develop policies that require reporting of tests and of positive results of tests as a condition of being on campus for all faculty, staff, and students.
- f) Campuses should be prepared to perform rapid contact tracing, isolation, and monitoring of individuals with close contact exposure to COVID-19 (+) persons. This should be coordinated with the local health department as only they have statutory authority to mandate quarantine or isolation. Contacts who become symptomatic should be tested.

- g) Faculty, staff, and students should self-isolate if experiencing symptoms of COVID-19 until test results and, when relevant, re-testing results are available. Faculty and staff should remain off campus when isolated.
- h) Students found to be positive should be quarantined in an isolation dormitory or other living arrangement until they can safely return to class following CDC guidelines for return to work for healthcare workers.⁸ Currently these are:
 - i) If symptomatic, at least 3 days have passed since recovery and improvement of respiratory symptoms (e.g., cough) has occurred and at least 10 days have passed since onset of symptoms
 - ii) If asymptomatic, at least 10 days have passed after testing is completed.
 - iii) Do not use “test-based strategies,” as defined by CDC, in the campus setting because positive results by PCR can be seen in some individuals for prolonged periods of time after recovery.
- i) Students should be discouraged from returning home if found to be positive (as an alternative to being housed in an isolation space on campus) as this might facilitate spread to back into households or other communities.

Testing for immunity. At present, antibody tests for immunity are not sufficiently accurate nor widely available enough to be considered a part of campus-based strategies. However, this is expected to change in the coming months, and antibody testing strategies may have significant utility.

- a) Campuses may consider widespread testing for immunity to COVID-19 as part of a comprehensive strategy to control COVID-19. Several gaps in knowledge exist that make this difficult at present:
 - i) The accuracy of currently available tests is unknown, and currently available tests only provide a “positive or negative” answer, not an antibody titer.
 - ii) The relationship between antibody titer and neutralization capacity is not known for SARS-CoV-2.
 - iii) The relationship between antibody titer or neutralization capacity and protection from COVID-19 is not known.
 - iv) The relationship between antibody titer and positive results on commonly available antibody tests is not known.
- b) Once the answers to items in a) above are clearer, campuses could consider implementing antibody testing in a variety of potential scenarios:
 - i) Testing of all students, either at a fixed point in time (e.g., prior to return home for the winter break) or periodically (e.g., quarterly) to monitor sero-conversion (development of an antibody response).
 - ii) Testing of all faculty and staff in contact with students to determine who might be considered immune and at lower risk for developing COVID-19.
 - iii) Testing of COVID-19-exposed students to allow exemption from isolation if considered immune.

- iv) Testing of student athletes as a form of pre-participation screening for certain higher risk activities.
- c) The benefits of antibody testing must be weighed against the costs. It is unlikely that levels of antibody positivity predictive of herd immunity (estimated at > 80% of the population immune) can be achieved in the absence of an efficacious vaccine, but significant but lower levels of antibody positivity or knowledge of the immune status of individuals may allow more nuanced policies to be developed that enhance campus life while maintaining safety.

Health promotion. In the face of this pandemic and the altered living accommodations and intense pressures it is placing on society, a focus on positive health promotion is needed more than ever.

- a) Campuses should develop innovative measures to promote health despite the restrictions imposed by policies to protect faculty, staff, and students from COVID-19. This may include conversion of spaces to facilitate exercise or meditation, increased time or allowances for exercise, and education about healthy eating and improved provision of healthy eating choices.
- b) A significant effort should be made around preservation and monitoring of mental health, as well as identification and treatment of mental health issues.

Further Information and References

- 1) Tennessee Department of Health. COVID-19 Epidemiology and Surveillance Data.
<https://www.tn.gov/content/tn/health/cedep/ncov/data.html>
- 2) Centers for Disease Control. Guidance for Bus Transit Operators.
<https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/bus-transit-operator.html>
- 3) Centers for Disease Control. Guidance for Businesses.
<https://www.cdc.gov/coronavirus/2019-ncov/community/guidance-business-response.html>
- 4) Centers for Disease Control. Guidance for Shared Housing.
<https://www.cdc.gov/coronavirus/2019-ncov/community/shared-congregate-house/guidance-shared-congregate-housing.html>
- 5) American College Health Association. Updates on COVID-19.
https://www.acha.org/ACHA/Resources/Topics/COVID-19_Update.aspx
- 6) Centers for Disease Control. Guidance for Institutions of Higher Learning.
<https://www.cdc.gov/coronavirus/2019-ncov/community/guidance-ihe-response.html>

7) Infectious Disease Society of America. Guidance for diagnostic testing.

<https://www.idsociety.org/practice-guideline/covid-19-guideline-diagnostics/>

8) Centers for Disease Control. Guidance for Return to Work.

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/return-to-work.html>

UT SYSTEMWIDE DIRECTIVES TO MITIGATE IMPACT OF COVID-19

The University of Tennessee is committed to managing the spread of infection and mitigating the impact of COVID-19 on the quality of the educational experience and on the health of its students, faculty, staff, and communities. As part of UT's efforts, the following requirements shall be applicable systemwide at UT during the 2020-21 academic year¹:

1. Social distancing/Masks and other face coverings. All employees, students, and visitors on campuses or at other UT locations must observe appropriate social distancing whenever possible, and must wear a mask or other face covering as directed by the UT System or applicable campus or institute, if proper social distancing cannot be maintained, or as otherwise required by entities with which UT collaborates or affiliates.
2. COVID-19 testing protocol.
 - a. Before arriving on campus or the workplace: All campuses and institutes must agree on a coordinated and consistent plan, based on availability of supplies and personnel, for testing employees and students prior to the start of the fall 2020 semester. This plan must be approved by President Boyd by August 1, 2020. Tests required by the approved plan could be obtained from a private health care provider, a local health department, or testing centers that will be made available on UT campuses.
 - b. While on campus or at other UT facilities: In accordance with guidelines from the Infectious Disease Society of America, testing will be required for all symptomatic individuals and all asymptomatic individuals who have had close contact exposure to others who have tested positive for COVID-19. Also, employees and students may be required to participate in additional testing during the academic year for surveillance purposes.
3. Contact tracing. In the event that an employee or student has a positive COVID-19 test, the individual must report the positive test to the office designated by the UT System or applicable campus or institute and provide reasonable assistance to health professionals in conducting appropriate contact tracing.

¹ These directives are based on recommendations and guidance from several public health sources, including the CDC, Tennessee Pledge, and UT President's Re-Opening Task Force.

4. Immunizations. All employees and students must have a flu immunization when it becomes available. Also, if a medically-approved COVID-19 immunization is developed during the 2020-21 academic year, all employees and students must have that vaccination. An exception may be granted if an employee or student has a reasonable objection for religious or medical reasons, or if a student will only be taking online classes and does not live in campus housing.
5. Education. All employees must complete an online return-to-work training module provided by the UT system or their respective campus or institute. All students must complete an online return-to-campus training provided by their respective campus.
6. Self-wellness checks. All employees and students should complete a daily self-observation, in accordance with procedures developed by the UT System or applicable campus or institute, about their health prior to coming to campus or other UT locations each day.
7. Travel. Only essential UT-related travel will be allowed. The UT System or applicable campus or institute will define “essential” and establish policies and approval processes for all domestic and international travel by its respective employees. All employees must comply with applicable CDC guidance upon returning from travel, including any recommended self-isolation periods.
8. Dining guidelines. All on-campus dining services must be operated in compliance with applicable guidelines from the CDC and the Tennessee Pledge.
9. Housing/building cleaning. All UT buildings, including academic buildings and housing, must be cleaned and disinfected regularly in accordance with applicable guidelines from the CDC.
10. Visitors on campus. All visitors on campuses or at other UT locations must comply with requirements regarding social distancing, masks, and other public health best practices as required by the UT system, a campus or institute, or local government, as applicable.
11. Events. All large events and social gatherings held on campuses or at other UT locations must comply with applicable CDC, state, or local health guidance; provided, however, that athletics events may be conducted in accordance with relevant NCAA and athletic conference guidelines.