

UC San Diego

CAMPUS RAPID INTERVENTION FRAMEWORK
2020-09-23

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Purpose:

Ensure that UC San Diego can respond rapidly to emerging COVID-19 trends. Specify a structure and process for active oversight and evaluation of trends in health, behavior, and facilities usage data, formulation of calibrated recommendations for immediate modifications in campus activities, and swift forwarding of recommendations to the Chancellor and EPG in response to COVID events currently impacting the campus community.

Overview:

COVID Monitoring Team (CMT):

Monitors data on population health, student and employee behavior, usage of campus facilities, community context. Identifies any concerning trends that may warrant campus action beyond the intervention to secure the health of individuals or small clusters. As necessary, sets in motion the campus process for formulating, approving, and implementing such campus actions.

COVID Response Team (CRT):

Assesses the significance and context of concerning trends the CMT has identified in the data. Calibrates the level of campus intervention that may be needed to mitigate the trends. Communicates recommendations to the EPG regarding potential campus interventions.

Executive Policy Group (EPG):

Evaluates the CRT recommendations in light of the significance, context, and calibration of the data trends identified by the CMT. Determines the appropriate level of campus intervention to mitigate those trends. Arranges for implementation and communication, as appropriate.

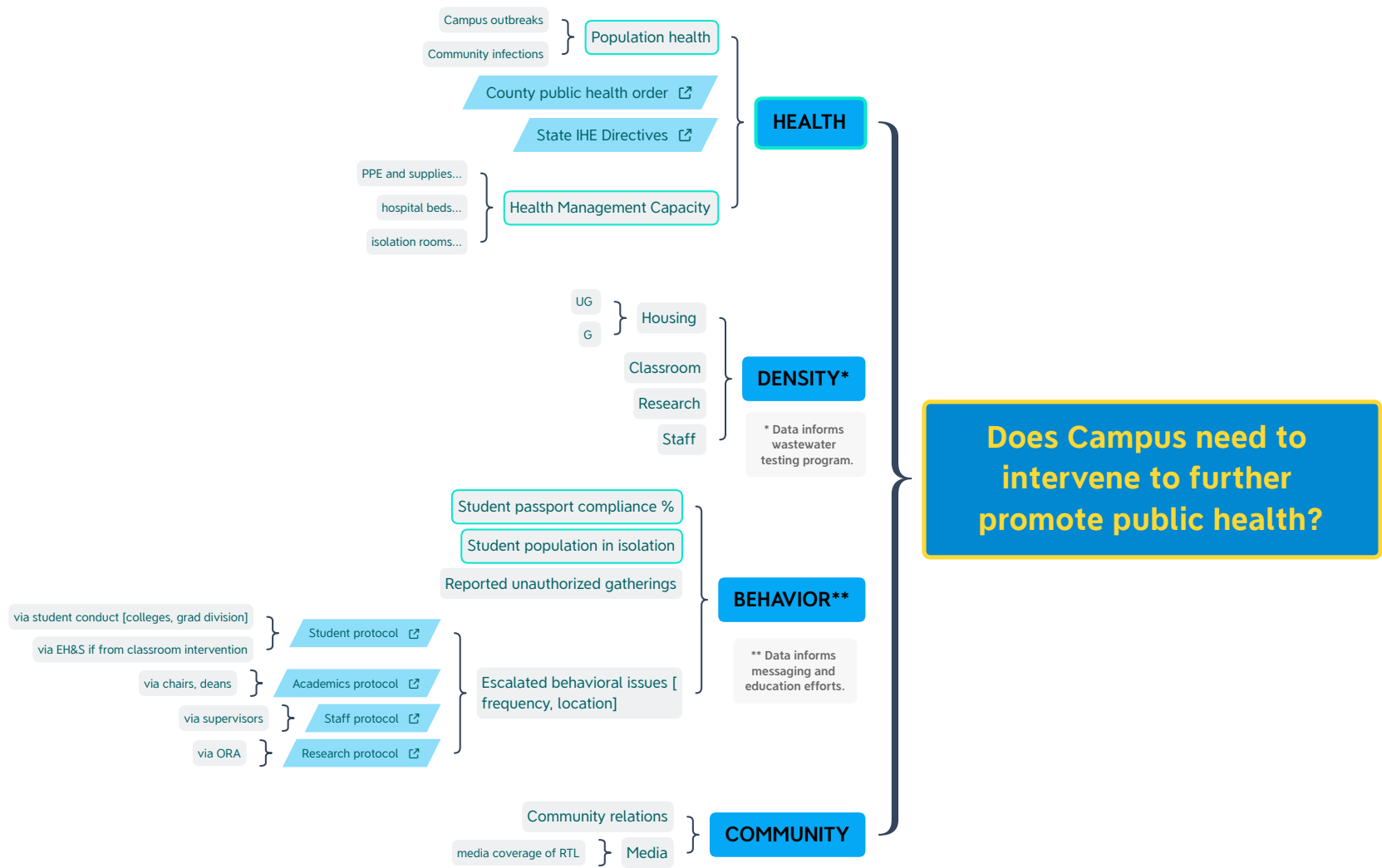
Complementary Structure: Return-to-Learn Steering Committee (RTL):

The RTL Steering Committee is responsible for the development and implementation of campus policies and processes that constitute the longitudinal response to COVID-19. The CMT and CRT will refer any ideas about the possible need for development or modification of such policies and processes to the RTL Steering Committee. Having the RTL co-leads be members of the CRT will facilitate information flow.

Further details are on the following pages:

- Conceptual map of data to be gathered to inform decisions
- Conceptual framework for moving from data to decisions
- Additional information on CMT, CRT, EPG
- Health indicators to be monitored
- Examples of possible campus interventions
- Fall quarter timeline

This framework will be reviewed regularly by Cabinet and adapted as necessary.



From Data To Decisions

SIGNIFICANCE

What trends do the data reveal? Are there acute, sustained, or sizable changes?

Data Dashboards: Health, Density, Behavior

Can we control the factors driving the trend?

How do campus trends compare to and/or interact with community trends?

CONTEXT

If this is a recurrence, what prior action was taken? with what impact?

Is the trend self-reinforcing [negative spiral]?

Does the current week of the Quarter have specific risks or stressors?

Fall 2020 timeline

How close are we to our maximal capacity in staff, supplies, and facilities?

EPG playbook

CALIBRATION

Given the significance and context, choose from the available spectrum of interventions, which include:

influencing behavior

messaging -- tailored or widespread

training -- tailored or widespread

adjust health processes

modify testing / tracing processes or frequency

modify hygiene protocols

add capacity in staff, supplies, or facilities

modify activity level

change scale or modality of an activity in a particular unit / location

curtail on-campus students to residences;

curtail off-campus student access to campus

curtail in-person activities in an entire sector [all education, all research, etc.]

curtail access to campus by the public

Will the action reduce stress on capacity or require investment to increase capacity?

How might the action indirectly impact the campus and broader community?

IMPLEMENTATION

Monitoring

Campus Intervention Framework

CMT (COVID Monitoring Team) tracks data daily, briefs CRT (Covid Response Team) weekly

Consultation and Recommendations

CMT alerts CRT if trends are concerning

CRT pulls in specialized expertise as needed

Intervention Examples

CRT develops recommendation for campus intervention; briefs Chancellor and EPG

Decision

Chancellor with EPG

Communication

University Communications templates

COVID Monitoring Team (CMT)

Immediate Purpose:

Monitor data on population health, student and employee behavior, usage of campus facilities, community context. Identify any concerning trends that may warrant campus action beyond the intervention to secure the health of individuals or small clusters. As necessary, set in motion the campus process for formulating, approving, and implementing such campus actions.

Membership: *[all are also members of CRT; bold = members of EPG]*

- Epidemiology: Dr. Natasha Martin
- Infectious Disease: Dr. Robert Schooley
- OSI: Executive Director Robert Neuhard
- Public Health: Dean, Dr. Cheryl Anderson
- **Student Affairs: VCSA Alysson Satterlund (Chair)**
- Student Health: Executive Director, Dr. Angela Scioscia

Schedule:

COVID Monitoring Team will meet daily during the fall quarter in order to provide prompt response to any clusters, outbreaks, or behavioral concerns. The CMT will call in other subject matter experts as required to understand unique situations.

Activities:

- Meet daily to review data on population health, student and employee behavior, usage of campus facilities, community context.
- CMT Chair briefs the Chancellor, EVC, CECO, and RTL Steering Co-Leads after each meeting.
- CMT briefs Cabinet [M], Campus Operations Group [W] and the CRT [F] each week.
- Identify any concerning trends that may warrant campus action beyond the intervention to secure the health of individuals or small clusters.
- If such concerning trends arise, activate the COVID Response Team so that recommendations for campus interventions can be formulated and passed on to the EPG.

Data to be monitored includes the following and will evolve as required. These items are presently documented separately by their various sources, but ITS is working with partners to create a unified dashboard for easier monitoring, comparisons, and communication.

- Health indicators as in attached slide.
- Density of usage of campus facilities, including classroom usage [from Registrar], research [from ORA Return-to-Research plans], and other purposes [from Return-to-Campus plans].
- Significant behavioral issues, such as incidence of unauthorized gatherings, recurrent failure to comply with safety protocols, etc. Gathered from Student Conduct and from chairs/supervisors/ORAs reports on employee behavioral incidents.

COVID Response Team (CRT)

Immediate Purpose: Assess the significance and context of concerning trends the CMT has identified in the data. Calibrate the level of campus intervention that may be needed to mitigate the trends. Communicate recommendations to EPG regarding potential campus interventions.

Membership: *[Blue = members of CMT; Bold = members of EPG]*

- **Epidemiology: Dr. Natasha Martin**
- **Infectious Disease: Dr. Robert Schooley**
- **OSI: Executive Director Robert Neuhard**
- **Public Health: Dean, Dr. Cheryl Anderson**
- **Student Affairs: VCSA Alysson Satterlund**
- **Student Health: Executive Director, Dr. Angela Scioscia**
- **Academic Affairs: EVC Elizabeth Simmons (Chair)**
- **CEO Health System / RTL Steering co-lead: Patty Maysent**
- **CFO / RTL Steering co-lead: Pierre Ouillet**
- **Communication: CCMO Anne Buckley**
- EOC Lead: Dismas Abelman
- Health System IS: Dr. Chris Longhurst
- Health System HR: Lydia Ikeda
- HDH: Executive Director Hemlata Jhaveri
- **HR: CHRO Nancy Resnick**
- **RMP: VC Gary Matthews**

Schedule:

COVID Response Team will be briefed weekly by the CMT to be ready to provide prompt response to any concerning trends in the data; most CRT members are also in Cabinet or COG, so they will actually hear 2-3 briefings weekly. CRT members will keep a standard time open on their daily calendars, to enable meetings to happen without delay, if the CMT finds concerning trends in the data. CRT will convene on very short notice if an emergency arises.

Activities:

- Assess the significance and context of concerning trends the CMT has identified in data on population health, student and employee behavior, usage of campus facilities, and/or community context.
- Call in other subject matter experts as required to understand unique situations [e.g., as related to Research or Athletics or Teaching].
- Calibrate the level of prompt campus intervention that may be needed to mitigate the trends.
- Formulate recommendations for the Chancellor and EPG regarding potential immediate campus interventions.
- Brief the Chancellor and EPG so that decisions can be made promptly.
- *Refer ideas about possible development or modification of campus policies and processes to RTL Steering for incorporation into the longitudinal campus response to COVID-19.*

Executive Policy Group (EPG)

Constituted under the UC San Diego Emergency Operations and Incident Management Plan, the EPG is the executive level oversight and strategic decision-making body for UC San Diego during a crisis situation. The EPG is responsible for and has the authority to make financial, operational, and policy decisions in response to the issue or event.

Membership: *[blue = members of CMT; bold = members of CRT]*

1. Chancellor Khosla
2. **EVC Simmons**
3. **VC-RMP Gary Matthews**
4. Associate Chancellor Jeff Gattas
5. Associate Chancellor Susan Sterner
6. **CFO Pierre Ouillet**
7. **VCSA Alysson Satterlund**
8. VCR Sandra Brown
9. VC-MS Margaret Leinen
10. VC-HS David Brenner
11. VC-EDI Becky Petitt
12. CECO Judy Bruner
13. Chief Campus Counsel Daniel Park
14. **CHRO Resnick**
15. **CEO Patty Maysent**
16. CIO Vince Kellen
17. **CCMO Buckley**
18. Police Chief David Rose
19. EOC Lead Dismas Abelman
20. EH&S Director Corey Singleton
21. Senate Chair Steven Constable

Schedule:

The campus Emergency Operations Center (EOC) leadership convenes EPG on short notice whenever the need arises.

Activities:

- Evaluate the CRT recommendations in light of the significance, context, and calibration of the data trends identified by the CMT.
- Determine appropriate level of immediate campus intervention to mitigate those trends.
- Arrange for prompt implementation and communication, as appropriate.

SYMPTOM SCREENING

Trends in daily % positivity of symptom screen by campus group

Geographical location of screening and positive screens

WASTEWATER MONITORING

current positive and new positive manholes

Location of positive manholes

HEALTHCARE INTERACTIONS

Current COVID-19 hospitalizations (students, campus employees, health employees)

Cumulative COVID-19 related deaths by campus group

HIGH LEVEL HEALTH AND EPI MONITORING DATA

TESTING

Trends in daily new cases by group

Trends in daily test numbers (asymptomatic, symptomatic)

Trends in daily rolling 14-day avg % test positivity by group

Geographical locations of cases & tests

of active outbreaks & distribution of outbreak sizes

Test turnaround time

COUNTY EPI

Trends in daily new cases

Trends in daily rolling 14-day avg % test positivity

County triggers dashboard

ISOLATION/QUARANTINE

Isolation dorm capacity and beds in use (# isolation, # quarantine)

students isolating or quarantining in other residences

CONTACT TRACING

cases under active investigation

% cases investigated within 24 hours

valid contacts under investigation

% first contact attempts of close contacts within 24 hours

% contacts interviewed within 24 hours

% completed interview

MODELING

Campus effective reproduction number

County epidemic forecasts

EXAMPLES OF CAMPUS INTERVENTIONS (NON-EXHAUSTIVE)

INTERVENTION CATEGORY	EXAMPLES OF POSSIBLE INTERVENTIONS	DECISION AUTHORITY	CONSULTATION WITH	EARLY NOTIFICATION SHOULD INCLUDE
INDIVIDUAL HEALTH INTERVENTIONS	Isolation of individual student	SHS		1-2 cases none needed; IF greater than 3 cases in a given day or 5 in a 7 day period: CMT, CRT, EPG, EOC
	Isolation of individual student-athlete	SHS	Athletic Director	1-2 cases none needed; IF greater than 3 cases in a given day or 5 in a 7 day period: CMT, CRT, EPG, EOC
	Quarantine individual student	SHS		1-2 cases none needed; IF greater than 3 cases in a given day or 5 in a 7 day period: CMT, CRT, EPG, EOC
	Quarantine individual student-athlete	SHS	Athletic Director	1-2 cases none needed; IF greater than 3 cases in a given day or 5 in a 7 day period: CMT, CRT, EPG, EOC
	Quarantine of residential unit	SHS		CRT, cognizant Provost, EOC
	Closure of research lab due to serious safety violations	EH&S	VC Research	CRT, cognizaant Dean/Chair, EPG, EOC
PUBLIC HEALTH INTERVENTIONS	Action- Initiation and reversal			Notification -
	Quarantine of multiple residential units	Chancellor with EPG	DUE or Graduate Dean	COG, EOC
	Quarantine of a residential building	Chancellor with EPG	DUE or Graduate Dean	COG, EOC
	Quarantine of multiple residential buildings	Chancellor with EPG	DUE or Graduate Dean	COG, EOC
	Postive case in athletic team/quarantine team	CRT	Athletic Director	Provosts, Coaches, EOC
	Quarantine of more than one athletic team	Chancellor with EPG	Athletic Director	COG, Coaches, EOC
	Quarantine of all atheletic teams/ cessation of training	Chancellor with EPG	Athletic Director	COG, Coaches, EOC
	initiate ad hoc asymptomatic screening for specific populations	Chancellor with EPG		COG, EOC
	Restrict testing due to lab capacity challenge	Chancellor with EPG		COG, EOC
	add capacity in health staff, supplies, or facilities	Chancellor with EPG		COG, EOC
CHANGE OF CAMPUS ACTIVITY LEVEL	Closure of reseach lab due to infection	CRT	VC Research, EH&S	EPG, cognizant Dean, EOC
	Closure of research lab due to safety violations	EH&S	VC Research	
	Closure of multiple research labs	Chancellor with EPG	VC Research, EH&S	COG, EOC
	Return to Red [Research]	Chancellor with EPG	VC Research, EH&S	COG, EOC
	Closure of in person dining	Chancellor with EPG		COG, EOC
	Convert specific in person class to remote	CRT	AVC-EI; DUE or Graduate Dean, Senate Leadership; AS and GSA leadership	cognizant Dean/Chair/Provost, EOC
	All learning remote	Chancellor with EPG	AVC-EI; DUE or Graduate Dean, Senate Leadership; AS and GSA leadership	COG, EOC
	Restrict access to specific campus sites	Chancellor with EPG		COG, EOC
	Curtail campus access by students living off-campus	Chancellor with EPG		COG, EOC
	Restrict campus access by the general public	Chancellor with EPG		COG, EOC
Shelter in place	Chancellor with EPG		COG, EOC	
BEHAVIORAL INTERVENTION	increased messaging to campus populations about requirements	Chancellor with EPG		COG, EOC
	communicate change in health protocols	Chancellor with EPG		COG, EOC
	train campus community in health protocols	Chancellor with EPG		COG, EOC
Note: The Campus Operations Group (COG) includes the leadership of the Academic Senate, AS, and GSA; the Chancellor and Cabinet; the Deans and Provosts; and other campus leaders.				

Fall 2020 – Timeline of Behavioral Risks and Stressors

Week	Dates	Item	Risk-taking elevated
Week 0	September 28 – October 4	Transition into the Quarter	All
Week 1	October 5-11		1 st years
Week 2	October 12-18		1 st years
Week 3	October 19-25	Weekend: Pre-Halloween Party Period	1 st years
Week 4	October 26 – November 1	Weekend: Halloween Party Period	1 st years
Week 5	November 2-8	National / State Elections	1 st years
Week 6	November 9-15	Mid-Week Holiday – Veterans Day (Nov 11)	1 st years
Week 7	November 16-22		
Week 8	November 23-29	Thursday/Friday: Thanksgiving Holiday travel	
Week 9	November 30-December 6		
Week 10	December 7-13		
Finals	December 14-18	Final Exams	