# **Pandemic Medical Advisory Team**

# Decision-Making Framework for Changes to State of Campus Operations

## Campus Density Levels, Approach and Resourcing

The University of Kansas Pandemic Medical Advisory Team has developed a data-driven approach to managing decisions during the COVID-19 pandemic. We believe the prudent approach is to regularly review a continuum of General States of Campus Operations coupled with Specific Possible Interventions, all informed by relevant Circumstances and Data updated as frequently as daily.

We learn more about this virus every day, and predetermined threshold levels for action and inaccurate data risk ill-advised decisions with unintended consequences for community health and safety. On-campus operations may have general themes, as outlined below. We believe most of our decisions will relate to specific interventions for targeted needs. For example, as we see positivity trends in specific populations or locations, we will deploy additional education and testing resources to those specific populations or locations.

# **General States of Campus Operations**

This framework creates a continuum of five states of campus operation based on varying levels of population density. The five states range from Level 1 to Level 5, with Level 1 being a fully open campus and Level 5 being a closed campus. We will begin the fall semester at Level 3.

#### • Level 1: Campus Open

 New normal of managed density and infection prevention culture with relatively few restrictions

## • Level 2: Campus Open with Moderate Density

o Infection prevention requirements consistent with Douglas County requirements

#### • Level 3: Campus Open with Low Density

o Increased infection prevention requirements consistent with Douglas County requirements, including advanced/heightened social distancing, environmental cleaning

## • Level 4: Campus Open with Ultralow Density

o Infection prevention requirements more stringent than Douglas County requirements

#### • Level 5: Campus Open to Essential Personnel and Individuals Only

 Most classes temporarily online; in-person class suspended; occupancy reduced and buildings closed



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## **Specific Possible Interventions**

- Advanced or heightened social distancing, environmental cleaning
- Focused surveillance testing resulting from positive trends in specific populations or locations, and/or randomized sampling
- In-person class suspensions
- On-campus housing/residence-hall-specific housing unit and classroom occupancy reductions and closures
- Modified in-person class attendance for certain populations (e.g., individuals physically present in an identified cluster/outbreak, medically vulnerable populations, higher risk populations)
- Expanded existing clinic and testing capacity or creation of new surge clinic and testing capacity
- Temporary on-campus closure; full transition to remote learning

## **Relevant Circumstances and Data**

A combination of indicators from campus, county, and clinical/hospital domains will inform dashboards and models used by the Pandemic Medical Advisory Team to recommend modification and reduction to in-person campus activities.

#### **Initial Set of Recommended Considerations and Indicators**

## • Community Considerations

- Significant, applicable action by the Governor, Secretary of KDHE, Douglas County Health Officer, or other public official
- o Escalation or relaxation of the Douglas County COVID-19 Reopening Phase
- Douglas County hotel occupancy
- o Trends among institutions of higher education
- Upward trajectory of influenza-like illness (ILI) –when compared to traditional rates and COVID-19-like syndromic surveillance within a 14-day period
- Upward trajectory of documented cases or percentage of positive tests (with flat or increasing volume of tests) for 14 days
- o Hospitals unable to treat all patients without crisis care
- o Degradation of robust testing capacity in community including screening and contact tracing for symptomatic individuals
- o Positive tests and other metrics in excess of predicted model

## • Campus Considerations

- o Employee absenteeism
- Positive tests and other metrics in excess of predicted model
- Testing supply and turnaround time test for COVID-19 due to supply chain issues
- Upward trajectory of influenza-like illness (ILI) when compared to traditional rates and COVID-19-like syndromic surveillance within a 14-day period



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- Upward trajectory of documented cases or percentage of positive tests (with flat or increasing volume of tests) for 14 days
- Clusters of positives on-campus and off-campus
- o Personal protective equipment (PPE) shortages
- o Campus community member death

## Dashboard Leading Indicators

- Campus Domain
  - Results of students, faculty/staff, and student-athletes testing positive
  - Testing positivity rate
    - Symptomatic
    - Surveillance
  - # of isolated students/faculty/staff
  - Watkins daily testing counts (#)
  - Watkins clinic visits (#)
  - Watkins PPE supplies
  - Turnaround time for send outs above 48 hours
  - Hotline / in-bound calls with questions about COVID-19
- County Domain
  - # of Lawrence residents (non-students) testing + for COVID (daily and 7-day avg)
    (Source: health department)
  - Disease Spread: Rate of COVID-19 cases per 100,000 population over a 14-day period.
- LMH Capacity Domain
  - Respiratory clinic volumes per day

## Lagging Indicators

- LMH Domain
  - Non-ICU admissions from KU community
  - ICU admissions
  - Ventilator utilization
- o UKHS Domain
  - UKHS admissions from KU community
- o Campus Domain
  - Campus community member death

# **Governance for Decision-Making**

The Pandemic Medical Advisory Team will provide recommendations – guided by evidence-based science and expert opinions – to inform KU Leadership decisions regarding on-campus activities and potential status changes related to closure, partial closure, and/or reduction of services. These recommendations will be revised as our understanding of COVID-19 and situational awareness changes. Risk cannot be eliminated, only mitigated. This guidance may be used on and off campus as applicable, and we encourage university partners, affiliated organizations and off-campus student housing to consider these as well.



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