Guidelines for UCLA Research Ramp-Up

Released May 26, 2020

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Introduction

This living document provides a set of principles and guidelines for a stepwise process to ramp up research at UCLA in coordinated phases; changes may be made as ramp-up progresses. The recommendations below were developed by a committee appointed by Vice Chancellor for Research and Creative Activities (VCR) Roger Wakimoto and incorporate some of the information shared by UCSF and UC Davis. They are intended for campus leadership, faculty and other academic employees, staff, and students. The main body of the document outlines campus-wide policies and requirements for ramping up research at UCLA; the appendices discuss policies and requirements for different campus sectors (e.g., those involved with lab-based research, performance, field research, or requiring access to Special Collections), and include the template for the research operational plans that must be submitted and approved prior to the resumption of on-campus activities.

The goal is to enable all UCLA research to resume as soon as possible while mitigating risks to personal safety and maintaining public health requirements. While we are not specifying a start date or the basis for transition from one phase to another, we suggest initiating Phase 2 as soon as Los Angeles City, Los Angeles County, and California State Safer at Home orders have been eased or lifted.¹ For the foreseeable future, safety considerations for on-campus research should follow similar considerations as those for a hazardous workplace until a COVID-19 vaccine is widely available. However, the risks posed by COVID-19 can be mitigated if everyone follows safe practices. If county or state health officials provide limiting/restrictive guidance, research efforts may need to drop back to a lower phase as appropriate and will again be ramped up when the guidance changes. Campus communications will be distributed by posting on the UCLA Bruins Safe Online website. Guidelines will be continually updated for all phases as necessary by leveraging experiences during the initial ramp-up phases. Positive nucleic acid test (or viral test) for SARS-COV-2 may require ramp down of research in some labs, buildings, or a section of campus as determined by the Emergency Management Policy Group (EMPG).

This document refers primarily to research conducted in university-controlled research and office spaces, such as the physical campus, astronomical observatories, field stations, agricultural lands, and field operations at non-university-owned facilities or research requiring direct contact with individuals (human subjects). On-campus research includes physical presence in campus laboratories, centers, libraries, archives, studios, theaters and museums to access any university material that cannot be accessed remotely, as well as performance and creative work that must be done on campus. This document also covers UCLA personnel doing research at non-UCLA sites. Teaching on-campus and event

planning (e.g., workshops, conferences, social gatherings) will need to be integrated into an overall on-campus implementation plan since they are all interconnected. The main body of the document covers campus-wide policies and issues. Method- and discipline-specific information is presented in the appendices.

Resource availability, procurement management, funding responsibilities, and other related issues are important, but not covered in this document. Issues related to human resource policies and funding of research also are not included in this document.

Direct questions about research ramp-up to C19@research.ucla.edu.

Guiding Principles and General Policies

Research at UCLA will resume in stages, under three basic operating principles. The campus research enterprise must:

PRINCIPLE #1: Follow local, state, and national public health authority directives to stay Safer at Home and maintain physical distancing.

- Decisions on when UCLA will begin to ramp up research (or if needed, to ramp down research), and at which phase research can be conducted (phases described below), are guided by the state governor, the Los Angeles mayor, and the county public health officer and may include specific agreements negotiated by UCLA with those entities. Chancellor Gene Block and Executive Vice Chancellor and Provost (EVCP) Emily Carter will make the final decision on any UCLA-wide action to initiate or restrict phased resumption of campus research operations. Research-related ramp-up information will be communicated to the campus through the VCR.
- Some research projects have successfully and safely transitioned to being fully remote, requiring infrequent or no access to university spaces. While challenges exist for faculty working at home (see equity, diversity, and inclusivity (EDI) considerations below), priority for work on campus for the foreseeable future should be given to those projects that are dependent on campus facilities.
- While the L.A. County Safer at Home order does not prohibit travel outside the county, UCLA has suspended all nonessential university-related international and domestic travel, and strongly discourages personal international and domestic travel. All requests to resume research involving travel should be carefully considered and need to follow the fieldwork protocols outlined in Appendix 5.

PRINCIPLE #2: Protect the mental and physical health and safety of the entire research workforce, clinical patients, and human research subjects.

- No one should feel they are being compelled to work on campus or in the field during periods of Safer at Home directives. There should be consideration of accommodations and flexibility for individuals who are unable to return to campus even after the Safer at Home directive is discontinued.
Our standards for safety and safe work practices must be rigorously and equitably maintained, with adequate access to personal protective equipment (PPE) specific to routine research hazards, as well as enhanced supplies required to reduce the spread of COVID-19 (e.g., cloth face coverings, sanitizers), provided centrally through UCLA Environment, Health & Safety (EH&S) for everyone working on campus. If the required laboratory PPE or cloth face coverings cannot be provided at any point, not only can research not be ramped up to the next level, but it may also have to be ramped down, until these supplies are available.

Considerations and accommodations need to be made very carefully for individuals in high-risk groups who are particularly vulnerable to COVID-19. UCLA Employee Disability Management Services provides assistance to employees seeking an accommodation.

Since the resurgence of COVID-19 is a very real possibility, our ability to gradually and sustainably return research and scholarly activities to ‘normal’ will depend on everyone’s commitment to physical distancing and other safety measures at work and in our personal lives.

Programs for effective testing of symptomatic and asymptomatic individuals, contact tracing, and protocols for isolation/quarantine are being developed and campus leadership will determine the required extent of their implementation before research activities can fully return to normal.

**PRINCIPLE #3: Ramp-up research activities in such a way as to mitigate the risks of contracting COVID-19 for all employees in compliance with public health guidelines.**

- Everyone must complete the UCLA Symptom Monitoring Survey each day before coming to work.
- The number of people in a workspace must be limited. To maximize the utility of workspaces, staggered work shifts, wherever feasible and allowable, should be encouraged and implemented. All decisions about staffing necessary to support new building schedules (e.g., facilities, security, campus police, janitorial services, delivery and stocking services) will need to be done in consultation with UCLA Labor Relations and follow union regulations.
- If a worker feels any signs of illness, no matter how mild, they must not perform work of any kind on campus. People should not come to campus if someone in their household becomes ill with COVID-19 symptoms. Per campus guidelines, they should follow instructions provided by the COVID-19 Hotline (310-267-3300) before returning to campus.
- Except where lab protocols call for specific face covering PPE requirements, all personnel on campus must wear reusable cloth face coverings, as specified by current UCLA policy, to minimize risk of asymptomatic individuals potentially exposing others to COVID-19. Individuals working in complete isolation with no contact with other people for a prolonged period are not required to use cloth face coverings. See UCLA Guidance on Face Coverings to Reduce the Spread of COVID-19 for more information.
- While physical distancing and low occupancy are critical, the safety of all personnel must be considered and appropriate mitigation measures implemented. Follow best practices when it is necessary to work in small groups.
- If the required PPE is not available and physical distancing cannot be maintained, the research cannot ramp up.


Campus Decision-Making Authority

After the chancellor and EVCP have made the decision to initiate resumption of campus research activities, deans have the final approval responsibility during the ramp-up for research activities within their units. Prior to resuming research activities that have previously been ramped down, operational plans for each independent research program must be submitted to the appropriate department chair/director for provisional written approval and then to the dean (or the dean’s designee) for final written approval. EH&S review may also be required, depending on the nature of the research. (See the appendices for more information, including the research operational plan template.) If more than one dean/school/central unit is involved, consultation and approval should be sought from each unit. Changes to operational plans (for example, changes that impact operations, personnel, and density) require resubmission through the aforementioned process. Approved operational plans will be accessible to department chairs, deans, the Office of the Vice Chancellor for Research, and EH&S personnel. Appeals will be handled in an escalating process. In the event of a subsequent ramp-down phase, authority on research activities returns to VCR Wakimoto.

Impact on Equity, Diversity, and Inclusion (EDI)

In light of the disproportionate impact of COVID-19 on researchers who have children living at home, who support other people in their homes (whether parents, relatives, or sick members of their family), who belong to a high-risk group and/or are themselves concerned about health risks, and/or who are at early stages of their career, the research subcommittee urges the campus leadership to consider EDI issues when making decisions. Differential impacts on research productivity have already been documented along gender lines. Early career faculty/staff, postdocs, and graduate students are more likely to have young children at home (and lack daycare during the COVID-19 crisis), potentially making both working from home and returning to campus nearly impossible. Researchers should not be penalized and, where possible, flexible accommodations should be considered, including adjusted work schedules, modified service duties, and expanded child-care. Campuswide, the continued relaxation of parking restrictions should be considered.

Even with the ramping up of remote access and digitization, certain kinds of research may not be able to move forward until travel restrictions are lifted and/or effective treatments are found (e.g., on-site research, fieldwork, archival visits, community-engaged research, health disparities research, communal arts-making). Research with and on underserved and/or vulnerable communities will be disproportionately affected, as these communities have been hardest hit by the virus. New resources will be needed to sustain research projects that have been disproportionately affected. To support research that cannot resume on or off campus, new research infrastructures and experimental approaches will need to be developed. These should be aligned with the foundational values of the public research university in advancing knowledge for the public good. At the same time, resources will be needed to facilitate greater and equitable digital access to materials and research support, especially through the Library’s increased digitization efforts. Since the implications for career development and research equity are significant, the research committee calls on the campus leadership to recognize, and

where possible mitigate, these extenuating circumstances when deciding about research ramp-up prioritization, resource allocation, infrastructure investments, and tenure/promotion.

**Building Management**

The campus may restrict the opening of certain campus buildings until specific conditions are met, including, but not limited to, the allowance and availability of custodial and security personnel. Deans/directors are responsible for coordinating building use amongst labs and departments for spaces under their control, and must coordinate with each other should space be occupied by faculty from multiple schools. Deans may choose to appoint a representative to negotiate building discussions across departments and schools. Building planning should begin immediately and consider the following:

1. Managing physical distancing in buildings will be more difficult when multiple academic units occupy the space and the building has multi-use spaces.
2. Research ramp-up decisions must be integrated with on-campus teaching when they both require space in the same building.
3. Space management must consider private, common, and shared spaces, including:
   a. Access and layout for individual labs, cubicles, and administrative and faculty offices.
   b. Common areas include conference rooms, break/lunch rooms, bathrooms, and any gathering areas. Consideration should be given to the number of individuals who can be in the common areas at the same time while maintaining physical distancing.
   c. Shared circulation spaces such as hallways, stairwells, elevators, and entries/exits must be able to serve everyone in a building without causing bottlenecks that create unsafe situations. Whenever physical distancing cannot be maintained, corridors and stairwells should be labeled for one-way use except in case of emergency.
4. Operational plans for research that involve pod-style labs and shared-equipment rooms should be coordinated across all principal investigators (PIs) working in those facilities. Each PI should submit an individual operational plan that acknowledges shared lab coordination.
5. All building re-configurations and modifications must meet accessibility requirements and be approved by the UCLA Fire Marshal. Non-UCLA personnel (e.g., vendors) may be required on-site to assist with such modifications; however, such visits should be limited to only those that are essential, noting that vendors are obligated to follow UCLA requirements for physical distancing and PPE use.
6. Coordination with Facilities Management, building security, janitorial services, campus mail services, and the UC Police Department, among other services under the Vice Chancellor for Administration, is critical to ensuring safer use of space as buildings are re-populated and densities increase.

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3 Throughout this document, the term ‘PI’ is meant in the broadest sense to include lead researchers, project directors, and those designated as responsible parties for the oversight of a lab or research project. For more information about PI eligibility and responsibilities, see [UCLA Administrative Policy 900](https://www.ucla.edu/policies).
Phases of Research Ramp-Up

During Phases 1 through 3, only personnel with a need to access physical locations to advance research should be on-site, and those personnel should minimize time on campus. All other personnel should remain off-site during the research ramp-up, unless otherwise instructed. Meetings and workshops should be conducted remotely. Chancellor Block and EVCP Carter will have the decision-making authority to move from one phase to another.

PHASE 1: Current Safer At Home state

Only those essential experiments and activities approved by deans and the VCR may continue, including:

1. Research that must be maintained for the health and safety of human and animal subjects.
2. Research for which discontinuation would cause effectively irreplaceable data and sample loss.
3. Maintenance of critical equipment and a safe standby mode of laboratories.
4. Maintenance of critical animal populations and/or ensuring the ethical care and conduct of research with animal subjects.
5. Generation-driven animal and plant experimentation that must be carried out or the value of the animal colony or plant varieties for research will be lost.
6. Human, animal, plant, and microbial longitudinal research studies that entail regular follow up of well-characterized cohorts, delays in which may lead to data loss or a failed study.
7. COVID-19 research with a timeline relevant to the current pandemic.
8. Core facilities that stay at a level of operational status appropriate for the ongoing research activities in this phase (e.g., Division of Laboratory Animal Medicine – DLAM).

PHASE 2: Ultra-low density research activities (~10-25% of normal density onsite at any given time)

Prioritization is for research that cannot be conducted remotely and can be adjusted to function in an ultra-low density format as defined below.

1. Ultra-low density can be approximated as one person per 250 square feet of lab or research space, one person per bay, and a minimum of six feet of distance maintained between researchers at any given time, including in public/shared/common spaces.  

4 Physical distancing of six feet, while widely recommended to reduce exposure to the coronavirus, is also acknowledged to be too little distance to account for all the aerosol particles generated by talking, breathing, and coughing, especially when sharing space for periods greater than a few minutes. (See https://www.sciencenews.org/article/coronavirus-covid-19-why-6-feet-may-not-be-enough-social-distance) Thus, in the first, ultra-low density phase, we are using the metric of one person per 250 square feet of space as a guideline to account for the fact that six feet of physical distancing will be hard to maintain in research spaces that have widely varied physical layouts and airflow patterns as well as common areas such as hallways and bathrooms. Research spaces contain different kinds of obstructions such as benches and equipment, entry and exit bottlenecks, and unusual (forced) airflow patterns due to fume hoods and biosafety cabinets that may spread aerosol particles further than in non-laboratory settings. Concerns over airflow or ventilation can be directed to the Industrial Hygiene Team at EH&S. The 250 square foot metric is insufficient on its own to ensure a safe environment and should be used as a guideline along with other risk mitigation measures. While these may change over time, our physical distancing recommendations currently reflect those adopted by many peer institutions nationally.
2. This phase requires ultra-low density research activities with little overlap with neighboring labs/research spaces/offices and restricted contact in common spaces.

3. Limited visits to individual offices (for instance, to retrieve materials) may occur during this phase with the approval of the department chair, adherence to physical distancing guidelines, and completion of the UCLA Symptom Monitoring Survey. Regular office visits are discouraged in this phase and are only allowable as part of an approved research operational plan that specifies why the work cannot be performed remotely.

4. Deans will have discretion to resolve questions about how to maintain ultra-low density.

5. Chairs and deans will have discretion to determine timelines for the resumption of high-priority projects.

6. Considerations for prioritization include:
   a. Seasonal data collection such as time-sensitive fieldwork or human subject research studies, experiments close to completion, or deadline-driven research whose pause or deferral would lead to long delays, loss of research results, or potential loss of funding.
   b. Short-term research or projects that could be quickly ramped down in the event of a return to Phase 1.
   c. Lab, studio, and/or office access for students and postdocs close to completing their degree/term of appointment.
   d. Individuals who seek a disability accommodation that includes on-premises activities.
   e. EDI and accommodations for early-career researchers and those researchers disproportionately affected by the campus closure.

7. Labs should ensure that they have necessary supplies, including proper PPE and those necessary for proper decontamination of surfaces. PIs and their teams should plan for supply chain issues that may delay the resumption of research, and coordinate with the EH&S central procurement team. (See Appendix 1.)

8. Animal experiments that can be performed by a single researcher in relative isolation are less risky to resume than those that require the presence and interactions of more than one person. DLAM will directly communicate with animal users about the availability of previously suspended activities, including researcher training; facility walk-throughs; animal orders, imports and exports, internal transfers and releases, and breeding requests; and technical service requests. (See Appendix 1.)

9. Human subjects research can be expanded to include in-person research where risk can be mitigated to a minimal level even if there is no potential for direct benefit to the participant. Ultra-low population densities and safe practices must be followed to minimize risk to faculty investigator, staff, and research participant health and safety. (See Appendix 2.)

10. Remote access to library collections remains in place. Libraries can begin to open to staff in accordance with ultra-low density guidelines and by following appropriate sanitization procedures/risk mitigation measures. (See Appendix 3 for specific phases.)

11. Museums, theaters, centers, and research institutes can begin a gradual process to open to researchers and staff so long as ultra-low density guidelines are followed. Appropriate sanitization procedures/risk mitigation measures must be in place before allowing researchers or staff to access collections, equipment, spaces, and services. (See Appendix 4.)

12. Field and community-based research can begin cautiously due to travel restrictions and greater potential for exposure to risks; researchers must follow all the policies outlined in Appendix 5.
13. Necessary core facilities, service centers, and support functions should be staffed and operational to accommodate only the ongoing research activities during this phase. Research activities dependent on core facilities may thus have a gradual ramp-up during this phase. Prior to reopening, core facility managers must adhere to the ultra-low density requirement and must develop operational plans that identify needed PPE and physical distancing strategies. (See Appendix 6.)

**PHASE 3: Low-density research activities (~25-50% of normal density onsite at any given time)**

With the exception of the increased personnel densities and the reevaluation of the one person per 250 square feet limitation, policies and guidelines are expected to remain largely unchanged relative to Phase 2, but relaxation of certain policies may be possible if approved by campus leadership. Phase 3 will include:

1. Continued expansion of all research activities and re-occupation of office space while following established campus requirements for physical distancing and health monitoring. (See appendices for additional guidelines.)
2. In-person clinical research where physical distancing can be maintained or risk mitigated to a minimal risk level. In general, this research can begin when clinical care settings open up and follow similar procedures.
3. Field and community-based research can be expanded provided researchers are able to adhere to relevant requirements and local guidelines, including lodging and travel. (See Appendix 5 for policies and practical considerations related to field and community-based research.)
4. Core research and fabrication facilities such as machine/glass shops, imaging facilities, nanofabrication lines, recording and filming studios, stages, rehearsal rooms, design studios, and arts production labs can expand their operations.
5. Access to library collections can gradually resume with appropriate risk mitigation procedures (e.g., closed stacks, paging of materials) and physical distancing plans in place. (See Appendix 3.)
6. Limited performance- and other group-based, creative activities can gradually restart with appropriate physical distancing and risk mitigation plans in place. (See Appendix 4 for specific guidelines.)

**PHASE 4: Restart a return to full research operations (~50-100% of normal density onsite at any given time)**

The return to the new normalcy may be gradual and, in some cases, it may require additional sub-phases, which can be locally defined under the guidance of deans and directors. Members of the general public can return to theaters, lecture halls, and auditoriums when allowed expressly by university leadership and in accordance with guidelines provided by the Los Angeles County Department of Public Health.

**Guidelines for the Submission of Research Ramp-Up Operational Plans**

Research personnel may not be authorized for campus access unless an operational plan (see appendices for more detail) has been defined, approved, and can be produced upon request by the deans and/or VCR. During research ramp-up, all deans will be deputized to approve activities and will be
trained for these new responsibilities. Various units of campus may elect to introduce and enforce stricter guidelines, depending on the risk level of activities proposed. Guidelines stated here have to be adopted as the minimum level of compliance.

1. These guidelines may not be sufficient for persons currently identified as being in high-risk groups.
2. Ramping up research projects that are distributed over multiple sites, involve multiple partners/centers, or depend on international collaborations will be challenging and require additional coordination.
3. PIs currently working on campus after being granted a research exception under Phase 1 still need to complete and submit an operational plan for Phase 2.

In the development of operational plans, all campus policies must be followed including:

1. Specific requirements regarding building access and security.
2. Requirements for daily completion of the UCLA Symptom Monitoring Survey for everyone working on campus.
3. Environment, Health & Safety (EH&S) requirements including the right to request modifications to approved operational plans for any and all research activities within university spaces.
4. Labor relations requirements for any covered personnel.
5. Completion of any conditions required by UC or UCLA for all personnel returning to work.
6. Any policies implemented by the campus following approval of the return to research activities must be followed.

Monitoring and Enforcement

The burden for compliance with research ramp-up operational plans is on PIs. EH&S staff has been charged to conduct spot checks to confirm appropriate density, distancing, and protective measures. Departmental and division leadership should also monitor compliance. Researchers must be informed of their right to report non-compliance problems to the PI. If appropriate action is not taken, the reporter must be empowered to take their concerns to the department chair who is obligated to follow up with the PI and report to the dean. Non-compliance with existing safety policies and principles could lead to the shutdown of on-campus research in the non-compliant lab or research space, and may require review by a faculty committee providing research oversight. Non-compliance could also result in discipline under applicable UC or UCLA policies.5

Reporting and Response in the Event of an Outbreak

COVID-19 testing is available to all UCLA employees who have symptoms of illness. Individuals working or learning on the UCLA campus who test or have tested positive for COVID-19 at an outside facility must self-report the positive COVID-19 test result to the appropriate UCLA department: UCLA Infectious Diseases Hotline at (310) 267-3300 for faculty, staff, trainees, and volunteers; and Ashe Center Infection

5 More information can be found: https://www.compliance.ucla.edu
Control Line at (310) 206-6217 for students. See the Standard Operating Procedure (SOP) for Responding to COVID-19 Cases on the UCLA Campus for more information.

On April 29, 2020, the campus released a comprehensive document that details ‘UCLA Requirements for COVID-19 Symptom Monitoring.’ This document answers the following questions:

A. Who is required to self-monitor for Novel Coronavirus (COVID-19)?
B. How do Covered Employees self-monitor for COVID-19 symptoms?
C. What should I do if I believe I may have COVID-19 symptoms?
D. Is my department required to conduct workplace temperature checks?
E. What steps will UCLA take when notified that an employee has been exposed to COVID-19?
F. Who should I contact for general questions regarding COVID-19?

Additional resources about workplace best practices are also included, along with a ‘COVID-19 Symptom Self-Monitoring Tracker for Home Personal Use’ form.

**Research Ramp-Down**

In the event of any applicable local, state, or federal orders to resume Safer at Home sheltering, or circumstances such as a lab- or building-specific outbreak dictate an immediate campus response, research activities may need to ramp down rapidly again. Personnel should have a plan in place to implement a ramp-down upon short notice. (See Appendix 8 for ramp-down instructions.)
APPENDIX 1: Policies and Practical Considerations for Laboratory Research

Schools and divisions with a focus on laboratory-based research including, but not limited to, the David Geffen School of Medicine (DGSOM), Life Sciences, Physical Sciences, Dentistry, Nursing, and Engineering should consider lab density during the four basic campus phases of research ramp-up.

Laboratory research activities must be phased in gradually so that population densities and safe practices can be monitored to ensure staff health and safety. Resumption of work from the current ramped down phase (Phase 1; see below) will therefore occur slowly. In Phase 2 (ultra-low density), a small number of researchers (approximately 10-25% of normal density) are permitted in campus buildings and research laboratories at the same time according to the space specifications detailed below. Following an evaluation of the success of Phase 2, including the degree of compliance with Phase 2 policies, and depending on the trajectory of the pandemic and on evolving state, county, and campus policies, the next phase of increased density (Phase 3, low-density laboratory research with approximately 25-50% of normal density) may occur. Phase 4, a return to near-normal activities, is possible but unlikely in the foreseeable future. Conversely, an undesirable trajectory of the pandemic, the appearance of COVID-19 in research personnel, and/or evidence of significant non-compliance with the directives outlined below (thereby putting the entire community at risk), could lead to a return to Phase 1.

PHASE 1: Current Safer at Home Phase

Only those essential experiments and activities approved by deans and the VCR may continue, as detailed in the main document.

PHASE 2: Ultra-Low Density Laboratory Research Phase (~10-25% of normal density)

Ultra-Low Density Personnel

Phase 2 will begin with extreme caution to allow the restart of the research enterprise at a measured pace. Work that can be performed remotely should remain remote to minimize personnel densities in research buildings and prioritize activities that depend on university facilities. For work that requires on campus activities, each faculty member with an independent research program must complete a research operational plan. (See Appendix 7 for more information.) The completed form must be formally approved by the department chair, then dean, before on-campus research in each laboratory can begin. The forms will be accessible to department chairs, deans, the Office of the Vice Chancellor for Research, and EH&S personnel.

Although UCLA research laboratories have diverse physical designs, an overall target during Phase 2 is 10-25% of normal personnel density. Ultra-low density is defined as one worker per 250 sq. ft., with the ability to maintain at least a six-foot separation from all other personnel at all times, including in shared/public/common spaces. For laboratories with traditional bays, no more than one lab worker per bay will be permitted. In the animal facility, no more than one person per animal holding or procedure room. Shifts can be scheduled to allow multiple people to work on a staggered schedule. Researchers should communicate by email and/or text to ensure that a researcher in one shift departs before the
next researcher arrives. Importantly, as dictated by current UCLA policies, all personnel working on campus are required to self-monitor for COVID-19 by completing a brief Symptom Monitoring Survey each day before coming to work, and must wear face coverings, except those working for a prolonged time period in complete isolation (NOTE: please read penultimate bullet regarding lab safety below). Workers who work with flammable or pyrophoric chemicals should wear a flame-resistant face mask/shield.

The ultra-low personnel density in Phase 2 will have a significant impact on the population density of our buildings. Even an incremental increase in activity in all labs will result in a significant number of people working simultaneously in each of our buildings and increase in density accordingly – not just in labs but in hallways, elevators, equipment rooms, and other shared spaces. Building units may want to consider the use of a building manager to help develop a shift schedule appropriate to each building in order to coordinate researcher density between multiple labs and in common/shared/public spaces.

The purpose of achieving a state of ultra-low density is not simply to promote physical distancing between people while they work at their benches, but also to minimize density in our buildings and on campus as a whole. Higher density leads to increased interactions in common equipment areas, hallways, and other locations. By beginning with minimal density, we aim to improve physical distancing in general.

Research groups with laboratories organized in close vicinity to each other and on floors with common equipment rooms, break areas, and entryways are strongly encouraged to discuss their restart plans as a group to optimize plans for use of space while minimizing social interactions in common areas and hallways.

Faculty should carefully consider the spirit of the policy and keep the health of UCLA trainees and staff as their top priority. Please resist the tendency to stretch the rules to squeeze in one more person: think instead about the health of that person and the health of the community. Lab personnel should follow all EH&S safety and health guidelines including maintaining physical distance of six feet and wearing face coverings or masks. Each PI is responsible for ensuring compliance with these policies by their laboratory personnel. In addition, EH&S staff have been charged to conduct spot checks to identify laboratories where there is inappropriate density or lack of distancing and protective measures. Non-compliance with policies may result in the shutdown of on-campus research in the non-compliant lab, following general EH&S safety policies and principles. Non-compliance could also result in discipline under applicable UC or UCLA policies.

The following additional details of the Phase 2 policy address specific circumstances:

- This directive and the density targets noted above also apply to labs performing approved essential experiments, including COVID-19 research. These labs cannot add more personnel if the resulting total density will exceed the targets stated above or those previously approved by the VCR.
Work in shared office spaces should be kept to a minimum, with computer/office work performed remotely whenever possible. If use of shared office spaces is necessary, they can be used only if a distance of at least six feet between individuals can be maintained at all times.

Many lab staff work in spaces that do not involve conventional bays and benches. These labs are allowed one person in a minimum laboratory space of 250 sq. ft. or one person per room if the room is smaller than 250 sq. ft. Accessory space where experiments are generally not performed (e.g., equipment rooms) does not count toward this density calculation.

The use of shared facilities (e.g., equipment rooms, cell culture spaces, animal rooms) should be coordinated and scheduled between members of participating labs to avoid overlap/unnecessary contact. Researchers using shared/common space and/or equipment should sanitize their work area directly upon completion of their work.

Personnel who spend all of their time away from a central lab (e.g., in animal facilities, cell culture rooms, or other auxiliary spaces) do not count toward the density of the central lab and must follow the same density policies in auxiliary spaces as above: one person per room (if smaller than 250 sq. ft.) or per 250 sq. ft., one person per bay or aisle, and the ability to maintain six feet of separation from all other workers. These individuals must coordinate their schedules with other workers.

Complex experiments and training may require teamwork between at least two people and are allowed when necessary, but should be minimized whenever possible. In any instance, physical distancing and face covering protocols need to be observed.

Laboratory safety must remain a high priority during times of low staff density. Those working with hazardous chemicals or materials should not work alone or during off hours when fewer people are present. Researchers must establish a buddy system with someone in a neighboring space or lab, or use check in/check out by phone or text with the PI or another laboratory member.

Cloth face coverings cannot be used to substitute for other required PPE, such as flame-resistant face masks when working with flammable or pyrophoric materials. Similarly, cloth face coverings are not intended to replace primary mitigation efforts against COVID-19 such as hand hygiene and physical distancing. Experiments must be performed using PPE appropriate for the required Biosafety Containment Level according to existing laboratory protocols.

Scheduling and Coordination of Work Hours
To allow multiple people to sequentially occupy the allotted space, labs should develop calendar systems to schedule work shifts throughout the day and on weekends, bearing in mind that safety is a concern for people working late at night. The structure of these schedules and the length of shifts can be flexible, depending on the type of experiment and the needs of each lab, as long as labs coordinate with neighboring labs to ensure compliance with personnel density in each building. Another option is for specific people to reserve certain days of the week. Lab staff should understand that their time in the lab is limited and they have to make the most of it. Furthermore:

Lab members should communicate regularly (by text or other messaging systems) to coordinate and adjust schedules as necessary and to be sure that they avoid each other. Everyone should complete work within their shift and not work during others’ shifts. It is strongly recommended that lab members also communicate frequently with adjacent labs.
● Lab members should plan ahead to maximize the use of their limited bench time, and they should do the majority of desktop activities when they return home.
● Lab members should be encouraged to help their colleagues by performing minor tasks and experiments that will reduce the need for others to come to the lab.
● Where possible, each lab member’s bench and desk space should be considered private and not be used by other lab members; all workspaces should be disinfected before and after use. Major scheduling overlaps between laboratories, especially those that may compromise researcher safety, should be brought to the attention of the department chair and escalated further to the dean, if necessary.

Choice of Lab Members Who Return to Work
Each PI must think carefully about which lab members will be allowed to return to work initially:

● Consider the urgency of the work: students or postdocs should be given high priority if they need to complete experiments to meet a thesis deadline, a paper submission or revision, or a degree or funding/scholarship requirement.
● Consider the well-being of trainees and staff who are feeling isolated and will benefit greatly from the ability to come to work.
● Undergraduate students are allowed in labs on a case-by-case basis, provided they are part of the PI’s approved research operational plan and the work is consistent with UCLA Interim Policy 906.
● Consider occasional replacement of personnel in the schedule with new people, to allow as many lab staff as possible to make progress with their projects. (As this rotation of personnel may increase the health risk by exposing more people to the same high-touch areas, additional cleaning and sanitizing will need to be coordinated.)

Support Staff, Core Facilities, and Delivery of Supplies
The reopening of laboratory research will require additional staff to support research, including those working in DLAM, operating core facilities, and in shipping and receiving. As the resumption of work begins, we can expect delays in the reactivation of core facilities (detailed in Appendix 6) as they adjust to the new demands, and there are likely to be delays in ramping up some supply lines. Furthermore, these added services will lead to increased population density and social interactions. The numbers of support staff should be kept to the minimum wherever possible.

Monitoring compliance
Based on excellent compliance that has been observed with current research ramp down policies, we are confident that faculty, trainees, and staff understand the importance of these policies and will operate their labs accordingly. Each PI is responsible for ensuring compliance with these policies by their laboratory personnel. Spot checks by EH&S staff will be used to identify laboratories where there is inappropriate density or lack of distancing and protective measures. Departmental and Division leadership will also be asked to help monitor compliance. Researchers must be informed of their right to report noncompliance problems to the PI. If appropriate action is not taken, the reporter must be empowered to take their concerns to the department chair who is obligated to follow up with the PI and report to the dean. More information can be found on the whistleblower resource and policy page:
Non-compliance with policies may result in the shut down of on-campus research in the non-compliant lab, following general EH&S safety policies and principles. Non-compliance could also result in discipline under applicable UC or UCLA policies.

Additional Safety Considerations

- Avoid social interactions and surface contamination during commutes, building entry and exit, elevator rides, movement in stairways, and bathroom breaks. Avoid common areas for lunch or coffee breaks unless you are alone or seated at distant tables; otherwise find an isolated location in lobby areas or outside the building.
- To reduce viral transmission between shifts, all labs should prepare spray bottles containing 70% ethanol or other acceptable disinfectants to disinfect bench surfaces, doorknobs, and equipment surfaces frequently, and at the beginning and end of a shift.
- All researchers should wash hands with soap regularly throughout the day, especially after removing gloves. Gloves should be removed before leaving the lab. Gloves should not be worn in hallways, elevators, or offices.
- Minimize elevator usage and use appropriate physical distancing.
- Appropriate physical distancing needs to be followed in bathrooms and in all common areas.
- All meetings that include more than two or three properly distanced researchers should continue to be held remotely. Conference rooms and other group meeting spaces should not be used by more than one or two individuals at a time; in these cases, individuals should maintain a physical distance of six feet and wear face masks.
- Maintain compliance with physical distancing directives provided by Facilities Management and building managers. When physical distancing is not possible (lab or office spaces with corridors less than six feet wide), seek an alternate route or make your presence known verbally from six feet away.
- If possible, minimize commuting on public transport and use personal transport.

PHASE 3: Low-Density Laboratory Research Phase (~25-50% of normal density)

As described above, a desirable trajectory of the pandemic, along with a relaxing of state, county, and campus policies, and evidence of consistent compliance with Phase 2 policies, may allow an increase in personnel densities to 25-50% of normal levels. The timing of this transition is difficult to predict. With the exception of the increased personnel densities, policies and guidelines are expected to remain largely unchanged relative to Phase 2, but relaxation of certain policies may be possible if approved by campus leadership. For example, undergraduate volunteers and other researchers may be permitted to participate in research and lab maintenance activities in Phase 3.

PHASE 4: Near-Normal Research Phase (50-100% of normal activity)

A return to full personnel densities and full research activities, including in-person meetings with multiple individuals, may not occur for several months or longer and will likely be dependent on evidence that a future resurgence of the SARS-CoV-2 pandemic is unlikely. This is likely to coincide with the availability of a successful vaccine, or novel and highly successful COVID-19 therapies.
APPENDIX 2: Policies and Practical Considerations for Clinical Trials and Human Subjects Research

Clinical and other human subjects research activities must also be phased in gradually so that population densities and safe practices can be monitored to minimize risk and to ensure faculty investigator, staff, and research participant health and safety. In addition to the details included in this section, all general UCLA Health guiding principles and general policies must be adhered to. Throughout the phased expansion of clinical and other human subjects research activities, risk and potential benefit to participants must be balanced, while implementing appropriate risk mitigation strategies. Resumption and/or expansion of work from the current ramped down phase (Phase 1; see below) will therefore occur slowly and will be a balancing act between ensuring access to clinical and human subject research with the potential for direct benefit to participants and ensuring the health and safety of all involved. Since clinical and other human subjects research includes components of both care and research, the guidelines related to the ramp up were a collaboration between the Vice Chancellor for Research and the Vice Chancellor for Health Sciences. Clinical and other human subjects research activities ramp up will occur in four phases as outlined below. It is important to note however, that an undesirable trajectory of the pandemic, the appearance of SARS-CoV-2 infection of clinical and other human subjects research personnel or participants, and/or evidence of significant non-compliance with the directives outlined below (thereby putting the entire community as risk), could lead to a return to earlier, more restrictive phases.

Phase 1: Current Safer at Home state – Very low onsite density (<10% of normal onsite personnel levels)

During Phase 1, the current Safer at Home phase, only three forms of clinical trials and human subjects’ research are allowed. They are:

- Therapeutic clinical trials (drug, device, or behavioral), including SARS-CoV-2 research, where there is potential for direct benefit to the participant and risk of viral exposure can be minimized.
- Clinical and human subjects research that can be conducted remotely regardless of potential for direct benefit.
- Clinical and other human subjects research without immediate benefit but happening entirely with essential clinical staff as a piggy back on a necessary clinical visit.

The determination of whether or not research has the potential for direct benefit to the participant is made by the principal investigator of the research study, the participant, and where possible the participant’s care provider. In addition, the department chair and dean must formally approve the decision to initiate or continue all clinical and other human subjects studies during Phase 1.

All clinical and human subjects research conducted in Phase 1 must be performed in a manner which minimizes risk to participants and research personnel. This includes:

- Adherence to UCLA screening protocols inclusive of daily completion of symptom tracking (UCLA Symptom Monitoring Survey) for all on-site research personnel and screening of study participants for COVID-19 symptoms in advance of visit and upon arrival. Note: Screening of remote study participants is not required. See Appendix 2A below for guidelines and a tool that
can be used to implement prior to arrival and upon arrival screening for study participants in non-clinical sites.

- Adherence to physical distancing and UCLA Health masking policies. See Appendix 2A.
- Cleaning of all surfaces that either the participant or research personnel had contact with in between participant visits and at the end of the day. See Appendix 2A.
- Adherence to UCLA Health visitor restrictions policy. See Appendix 2A.
- Adherence to UCLA visitor restrictions policies. See Appendix 2A.
- All clinical and human subjects research activities that can be performed remotely must be performed remotely.

* These policies are subject to change as we move through the various phases of ramp-up. Follow the newest guidelines as communicated by UCLA and federal, state and local governments.

On-site research personnel is limited only to those staff directly conducting participant-facing study activities for the three study types listed above that cannot be performed remotely. Once these research personnel complete the participant-facing portion of their work, the remainder of their work must be performed remotely. Whenever possible, scheduling of participants should be done in a manner to ensure multiple research personnel and study participants are not on-site concurrently. The number of research personnel who are required on-site should be limited through reassignment of duties and cross-coverage. Multiple research personnel can only be on-site concurrently when appropriate physical distancing (a minimum of 6 feet) and/or use of face coverings can be maintained.

Study Sponsor Monitoring: No sponsor onsite monitoring is allowed and non-urgent monitoring should be postponed. Urgent monitoring should be facilitated remotely. See Appendix 2A.

Risk Mitigation Planning, Attestation, & Compliance: Based on the experience with clinical and other human subjects research during the ramp down, the importance of established processes in place to mitigate risk is essential. In Phase I, clinical researchers benefited from leveraging the clinical processes provided by UCLA Health. As clinical research expands into non-clinical space, the importance of a risk mitigation plan (highlighted in the bullet points above) will be critical. A risk mitigation plan for all clinical and other human subjects research must be completed by the principal investigator and submitted for approval to the department chair, and then the dean (see Appendix 7). Approval by the chair and dean is essential for continuation of the research. In addition, spot checks by EH&S staff will be used to identify areas where there is inappropriate density or lack of distancing and protective measures. Departmental and Divisional leadership will also be asked to help monitor compliance. Non-compliance with policies could lead to the shutdown of clinical and other human subjects research activities in the non-compliant area and/or a return to earlier, more restrictive phases.

Phase 2: Minimal additional onsite research allowed - Ultra-low onsite density (10-25% of normal onsite personnel levels)

During Phase 2, in addition to the three forms of clinical trials and human subjects research allowed in Phase 1, one additional form of research is allowed. It is:

- In-person research where risk can be mitigated to a minimal risk level if there is no potential for direct benefit.
All clinical and human subjects research conducted in Phase 2 must be approved by the department chair and dean, and performed adhering to the same policies designed to minimize risk to participants and research personnel as were required in Phase 1 (see Phase 1 above). As studies allowed to occur in Phase 2 but not in Phase 1 are likely to be performed in non-clinical facilities adherence to the risk mitigation strategies will be more challenging and require detailed planning and effort on behalf of research personnel.

On-site research personnel is still limited in Phase 2 primarily to those directly conducting participant-facing study activities for the four allowable study types that cannot be performed remotely and to those required to be onsite to enable emergent onsite study sponsor monitoring. However, all duties that can be performed remotely should continue to be done so in Phase 2. Research personnel required for emergent onsite study sponsor monitoring may be onsite to support those activities provided appropriate risk mitigation protocols can be adhered to. As in Phase 1, plans should be implemented to limit the number of research personnel and participants onsite at any given time to ensure appropriate physical distancing and other risk mitigation factors are achievable, not only in offices or other workspaces but in common spaces such as elevators, hallways, restrooms, and break rooms.

**Study Sponsor Monitoring:** Emergent onsite monitoring allowed provided above risk mitigation protocols can be adhered to, however, remote monitoring is still preferred when possible. See Appendix 2A.

**Compliance to Criteria Monitoring:** As clinical research expands into non-clinical space, the importance of risk-mitigation plans to minimize risk (highlighted in the bullet points above) will be critical. A risk mitigation plan (see Appendix 7) must be completed by the principal investigator and submitted to the department chair, and then the dean for approval. Approval by the chair and dean is essential for the research to continue. Spot checks by EH&S staff to ensure compliance will still occur in Phase 2 and Departmental and Divisional leadership will continue to be asked to help monitor compliance.

**Phase 3: Additional onsite research personnel allowed** – *Low-medium onsite density (~25-50% of normal onsite personnel levels)*

During Phase 3, the same four forms of clinical trials and human subjects research allowed in Phase 2 may continue, however, minimal additional research personnel in non-participant facing roles are allowed to return onsite. Plans must be developed and implemented to ensure onsite research personnel does not exceed maximum allowable capacity or the maximum capacity where appropriate risk mitigation strategies can be implemented. To allow multiple people to occupy onsite workspace, units should think carefully about which individuals will be allowed to return to work initially and which should continue to work remotely. Priority to return to work should be given to those whose duties are more difficult to accomplish remotely as well as to considerations of the well-being of research personnel who may feel isolated and will benefit greatly from the ability to come to work. Systems may be developed to rotate onsite and remote research personnel provided shared workspaces are disinfected between use and appropriate physical distancing can be maintained. As in previous phases, the risk mitigation strategies as previously described must continue to be adhered to, not only in offices and other workspaces but in common spaces such as elevators, hallways, restrooms, and break rooms.

**Study Sponsor Monitoring:** Onsite monitoring allowed provided above risk mitigation protocols can be adhered to, however, remote monitoring should still occur when possible. See Appendix 2A.
Compliance to Criteria Monitoring: As clinical research expands into non-clinical space, the importance of risk-mitigation plans to minimize risk (highlighted in the bullet points above) will be critical. A risk mitigation plan (Appendix 7) must be completed by the principal investigator and submitted to the department chair, and then the dean for approval. Spot checks by EH&S staff to ensure compliance will still occur in Phase 3 and Departmental and Divisional leadership will continue to be asked to help monitor compliance.

Phase 4: Near-normal research phase – Medium-normal onsite density (~50-100% of normal onsite personnel levels)

Phase 4 represents a return to full clinical and human subjects research activities and ability to have full personnel densities, including in-person meetings with multiple individuals. In Phase 4, all forms of clinical and human subjects research are allowed, including the following form which was not previously allowed:

- In-person research in which risk cannot be mitigated to minimal risk levels and no potential for direct benefit.

While in Phase 4, full density is allowable, provided all remaining state, local and institutional risk mitigation policies are complied with, units are encouraged to maintain a balance between onsite and remote work. UCLA appreciates that recovery from the SARS-COV-2 pandemic may lead to a new normal that still may require more vigilance than pre-pandemic. These guidelines will be updated to reflect the new normal when more information is available.

Additional Considerations

Our strategies aspire to safeguard equity across diverse individuals. The following details of the policy address specific circumstances across all clinical and other human subjects research categories:

- Clinical researchers with laboratory-based components to their research must review and follow the appropriate phase directives and approval processes for increasing laboratory-based research at UCLA.
- In some cases, members of multiple research teams might, at different times, use the same equipment or room. These teams should avoid unnecessary interactions by coordinating or pre-scheduling activities and appropriately disinfecting shared equipment/work surfaces after each use.
- We understand that some clinical and other human subjects research activities require teamwork between at least two people. These interactions are allowed when necessary, but should be minimized whenever possible. Physical distancing of 6 feet must be employed whenever possible and all must follow UCLA COVID-19 face covering policy.

Buildings with large open floor plans where research is being conducted may pose higher inherent risk (e.g., the open work environment), and greater challenges coordinating across research units as multiple departments may be present on a single floor. In these cases, researchers should consider the designation of a floor captain to help coordinate activities. Additional recommendations for open
workspaces include the use of enclosed offices whenever possible and attention to the micro-environment within the floor to ensure adequate physical distancing.

_Scheduling and coordination of work hours_. To allow multiple people to sequentially occupy the allotted space, research groups should develop calendar systems to schedule work shifts throughout the day and on weekends as is feasible for clinical and other human subjects research activities, bearing in mind that safety is a particular concern for people working late at night. The structure of these schedules and the length of shifts can be flexible. Another option is for specific people to reserve certain days of the week. Research team members should understand that their time onsite is limited and they have to be efficient. Furthermore:

- Research team members should communicate openly and often (by text or other messaging systems) to coordinate and adjust schedules as necessary and to be sure that they avoid each other. Everyone should complete work within their shift and not work during others’ shifts.
- Research team members should plan ahead to maximize the use of their limited onsite time, and they should do from home any research activities that can occur remotely.
- Research team members should be encouraged to help their colleagues by doing minor tasks and work that will reduce the need for others to be onsite.
- Where applicable, research team members’ desk spaces should not be used by other research team members. The goal is to maintain these spaces free of contamination.

_Choice of research team members who return to work_. When PIs are considering which research team members will be allowed to return to work initially, they must first determine which research activities are the most important to resume at this time (for example, research needed to meet a thesis, paper submission, or grant submission deadline). Then consider the research team member – or group – previously performing this work, as well as others who are able to do such work. Each team member in that set should be confidentially queried for their level of interest in returning onsite at this time. Those who express interest should be considered first, with final selections based on the following factors:

- Trainees should be given high priority due to the need to complete their research projects in a timely fashion.
- Consider occasional rotation of team members in the schedule to allow as many as possible to make progress in their research projects.
- Consider equity, diversity, and inclusion, as well as the well-being of team members who are feeling isolated and may benefit greatly from the ability to come onsite.
- If there are questions regarding which employee should be assigned to a particular project, consult the applicable collective bargaining agreement and Labor and Employee Relations.
- Undergraduate volunteers will be allowed onsite on a case-by-case basis.

_Support staff, core facilities, and delivery of supplies_. The reopening of clinical and other human subjects research may require additional support staff, access to core facilities, and increases in the flow of supplies into our buildings. As the resumption of work begins, we can expect delays in the reactivation of core facilities as they adjust to the new protocols, and there are likely to be delays in ramping up some supply lines. Furthermore, these added services will likely lead to increased population density and physical interactions. Therefore, the numbers of support staff should be kept to the minimum.
Summary of Clinical and Human Subjects Research Ramp-up Process:

In summary, restoration of clinical trials and other human subjects research will occur in a stepwise fashion in accordance with the overarching principles and phases as provided in the overall guidance provided by the Vice Chancellor for Research (VCR) and the Vice Chancellor for Health Sciences (VC-HS). The following table summarizes the types of clinical and human subjects research that are allowable during each of the four Phases of ramp up.

<table>
<thead>
<tr>
<th>For these study designs</th>
<th>Research Business Operations Phase</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Phase 1 Safer at Home</td>
</tr>
<tr>
<td>On Site Research Staffing</td>
<td>&lt;10%</td>
</tr>
<tr>
<td>Approval by chair and dean</td>
<td>Required</td>
</tr>
<tr>
<td>Therapeutic clinical trial (drug, device, or behavioral), including SARS-CoV-2 research, where there is potential for direct benefit to the participant and risk of viral exposure can be minimized</td>
<td>Allowed</td>
</tr>
<tr>
<td>Clinical and other human subjects research that can be conducted remotely regardless of potential for direct benefit</td>
<td>Allowed*</td>
</tr>
<tr>
<td>Clinical and other human subjects research without immediate benefit but happening entirely with essential clinical staff as a piggy back on a necessary clinical visit</td>
<td>Allowed</td>
</tr>
<tr>
<td>In-person research where risk can be mitigated to a minimal risk level if there is no potential for direct benefit</td>
<td>Not Allowed</td>
</tr>
<tr>
<td>In-person research in which risk cannot be mitigated to minimal risk levels and no potential for direct benefit</td>
<td>Not Allowed</td>
</tr>
</tbody>
</table>

* Only if research personnel safety can be maintained with adherence to Safer at Home directives.
APPENDIX 2A: Protocols and Policies for Clinical Trials and Human Subjects Research

Screening Protocols for Study Participants

Pre-Screening

All subjects attending a scheduled appointment for clinical or research related purposes must be pre-screened via telephone prior to their appointment. Using the pre-screening checklist below, if the subject answers “No” to all questions, the in-person visit may proceed.

If the subject responds “Yes” to one or more of the questions, the subject may still attend the in-person visit based if the benefit to the subject outweighs the risks posed to the staff and other subjects as determined by the study PI and formally approved by them. However, the study participant will be required to have additional in-person screening upon arrival and all risk mitigation protocols must be adhered to.

Study personnel are responsible for maintaining a record of completed pre-screening checklists for all study participants. Audits to ensure compliance may occur.

Pre-Screening Checklist for Research Subjects by phone (or telehealth) prior to AND at the time of arrival on campus – each individual subject

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>In the last 30 days, have you had a positive COVID-19 test?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>In the last 14 days, have you had sustained close contact (such as a household contact) with a person with a positive COVID-19 test?</td>
<td></td>
<td></td>
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<tr>
<td>In the last 14 days, have you had a fever, cough or diarrhea?</td>
<td></td>
<td></td>
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<tr>
<td>In the last 14 days, have you had cold or flu like symptoms?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>In the last 14 days, do you have concerns regarding other potential symptoms (loss of taste, loss of smell, eye redness or discharge, confusion, dizziness, unexplained muscle aches) related to COVID 19?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If all responses are NO, the research subject is eligible for in-person visit.

If YES to any of the above, but subject has approval from the PI for an in-person visit:

PI/Sub PI who is providing approval: ____________________________________________

Enter the date approval received for in-person visit: ______________________________
Outpatient Research Visits

Goal: To transition to a hybrid model for the conduct of clinical trials and human subjects research, including a combination of in-person and virtual visits, that allows appropriate adherence to study specific requirements for all study subjects regardless of the type of study, while at the same time adhering to recommended physical distancing guidelines and considering the necessity of PPE conservation. This applies to all research and clinical space across the health system and campus. Study teams must be aware of and comply with policies and strategies for physical distancing and PPE utilization.

1. Scheduling
   - *Offices at the local level may change any visit type as deemed appropriate by the PI.*
   - For subjects **without** COVID symptoms, offer subjects the option of a video visit or an in-person visit with the PI. *Coordinators must specifically note that subjects are required to have an in-person visit if required by the protocol.*
   - For subjects **with** COVID symptoms, PI must be notified and the subject should have a video visit.

2. Personal Protective Equipment (PPE)
   - Use of PPE should follow all guidance provided by UCLA, the Los Angeles County Department of Public Health, and the CDC.
   - Masks will be provided to all upon entry into clinical care buildings during the screening process. Staff who work in off-site clinics should receive masks from their manager.
   - In clinical areas where there is no direct patient contact, cloth face coverings may be worn in lieu of masks. Cloth face coverings should be laundered with warm water and detergent daily or whenever they are visibly soiled.
   - Masks or cloth face coverings should be worn ALL DAY when inside clinical care or other University buildings. Masks or cloth face coverings should also be worn when traveling between buildings on campus.
   - Masks or cloth face coverings should be changed whenever soiled, wet, or damaged.
   - The mask or cloth face covering may be removed when eating/drinking or when in private (single person) offices, single restrooms, or lactation rooms.
   - Use of other PPE (e.g., face shields, safety goggles/glasses, gowns, gloves) should be in accordance with policies in effect at each location (i.e., UCLA Health clinical facility policies).

3. Clinical Areas
   - Clinics employ an “air traffic controller” position to optimize flow of subjects safely through the clinic from check in to check out.
   - For each clinic, assess in-person maximum capacity that will allow for appropriate physical distancing. Use the tactics described below to ensure volume does not exceed this number at any given time.
     - PIs will have staggered blocks of virtual visits and in-person visits scheduled each day to minimize the number of subjects waiting in the waiting room at any point in time.
     - Implement extended hours (in the early morning or evening) for all visit types to minimize the number of subjects waiting in the waiting room at a given time.
● Schedule vulnerable patients (e.g., elderly, immunocompromised) at the beginning of the day, if possible.
● Although discouraged, if any subjects with an upper respiratory infection or COVID symptoms need to be seen, schedule them at the end of the day, if possible and safe.

4. Physical Space and Workspaces
● Utilize additional office space in other locations to ensure physical distancing.
● Consider plexiglass partitions to facilitate infection prevention.
● Ensure that all computers (exam rooms and work rooms) have necessary software (i.e. syngo, Muse, Zoom, CareConnect Video, etc.).
● Ensure all computers have webcams.
● Consider noise cancelling headphones or headsets with directed microphones (individual use only).

5. Check-in/Waiting
● Ask subjects to check in via phone call to the study team who will coordinate the subjects’ entry into the facility.
● When subjects call to check in, let them know that they have the option of waiting in their car until the exam room is available. Study team will call the subject when the room is ready.
● Continue symptom and temperature screening at door.
  ○ Greeters will check temperatures and symptoms on arrival.
  ○ Those with a positive screen will be roomed immediately (or, as an option, consider video visit from the car).
  ○ Every subject (> 2 yrs old) will be asked to wear a mask upon arrival, and will be provided one if needed. Visitors will also follow the same policy.
● Gloves are not to be worn within the department to prevent cross contamination. Study subjects/patients/visitors who present with gloves on from outside will be asked to remove gloves to prevent cross contamination. Hand sanitizer needs to be available, as well as soap and water.
● Arrange waiting room seating to allow for proper physical distancing.
● Utilize separate entrances and exits as possible.
● Adhere to PPE Guidelines.
● Continue to limit visitors per current Ambulatory and Hospital Visitor Policies.

6. Rooming and Exit Coordination
● Room subjects as soon as an exam room is available.
● Cleaning and Disinfection of Exam Rooms: Once the subject has left the exam room, the room may be immediately disinfected following standard precautions. If level 1 PPE was worn during patient care, wear level 1 PPE to disinfect the room. PDI Sani-Prime wipes, PDI Super-Sani wipes, Clorox Hydrogen Peroxide wipes may be used to disinfect the patient exam room. Surfaces include but are not limited to: exam table, chair where subject sat, research workstation, sink area, door handles.
● New gloves should be provided AS SUBJECTS EXIT if requested.
Outpatient COVID-19 Visitor Guidelines

*Essential visitors are identified as those who will be providing physical assistance to the non-ambulatory subjects in a research area.*

Every UCLA research subject can bring one person with them to appointments in the outpatient research setting. This person can be a family member or support person who is necessary to help the study participant during the visit or with the return home.

Note: Visitors presenting with visible signs of fever, cough or other flu-like symptoms will be politely asked to wait outside the research building.

Remote Monitoring for Research Studies during COVID19

Remote monitoring options are being piloted:

Option A. Use of Zoom for “over the shoulder” remote monitoring.

Option B. Healthlink Access via CareConnect. This pathway requires appropriate contractual and budgeting language and approval from the study sponsor or CRO. Please contact the CTSI Office of Regulatory Affairs at ctsiora@mednet.ucla.edu.
APPENDIX 3: Policies and Practical Considerations for Libraries, Archives, and Reading Rooms

While there is currently no physical access to the Libraries, off-campus access to online collections, digital books, and research tools is available through VPN and on the various digital platforms the library offers. Through the UCLA Library’s partnership with the HathiTrust, UCLA students, staff, and faculty have temporary access to digital versions of millions of volumes currently in copyright and not available electronically in libraries across the University of California system and those kept in UC’s two off-site library storage facilities. The HathiTrust is providing emergency temporary access to member institutions, including UCLA, during the COVID-19 pandemic. This emergency access will end when the UCLA Libraries reopen and access to the print collections is restored, and thus a significant amount of planning and staffing will be required to reopen the Libraries. This has long-term implications to the campus plans for remote research and teaching.

In addition to digital access to e-books and articles, Library staff currently offer remote consultation, remote workshops, research tutorials, tutorials on teaching with primary sources, copyright and open access consultation, specialized software, and continue to make laptops and other technologies available for researchers. Special collections, which includes unique archives in all media formats (print, audio, film) as well as the Rare Books collections, are closed, although some have been digitized. These closures have had a significant impact on researchers needing access to these collections.

Reopening the Library aligns with the four basic campus phases of research ramp-up.

PHASE 1: Campus operations suspended, all Library facilities closed and not physically staffed

1. Services and access include the following: CLICC loaner equipment (e.g., laptops, iPads, MiFis) have been provided to faculty, staff, and students, and special arrangements for loading dock pickup or mail delivery continue to be made if equipment is needed.
2. Online activities (online access to collections, reference services, consultation, and workshops/tutorials) continue, and library staff are adding online tutorials frequently in response to queries from students and faculty.
3. Remote operations for the Data Sciences Center and Scholarly Innovation Lab (consultation and workshops/training).
4. As a response to the coronavirus, some publishers and vendors have temporarily provided expanded access to online resources to facilitate online instruction and research. These are listed on the Temporary Expanded Access During COVID-19 Resource Guide.
5. Loan periods for print materials currently in circulation have been extended to October 31, 2020, and will be extended again if necessary.
6. Interlibrary loan services for articles and other resources that can be delivered as a digital copy continue, and due dates for materials borrowed during winter quarter or earlier have been extended to June 30.
7. All CLICC software is available for campus-wide use using the virtual desktop and app services.
PHASE 2: Time-sensitive research resumes, small number of Library staff (10-25% density) return to campus

1. Library buildings remain closed to all users.
2. On-demand digitization available for some materials not already available in the library’s e-collections or through the HathiTrust as well as some special collections materials (many of which do not have copyright issues) in all media (print, audio, film). More information about on-demand digitization, including how to submit requests, will be provided on the Library website.
3. Limited staff access to special collections (in YRL, Clark Library, Film and Television Archive, SRLF) and digitization facilities.
4. Instructional design team may access YRL to work with faculty migrating courses for online delivery and will need to coordinate their schedules with the YRL building manager.
5. All other services remain remote. (See Temporary Expanded Access During COVID-19 Resource Guide.)

In light of the increased demand for digital access to books not available through the HathiTrust as well as requests for materials held in the Library’s special collections, a significant ramp-up of digitization efforts will be required for Phase 2. Additional staff, scanners, photography stations, media transfer technologies, servers, and backup storage will be required to meet demand.

PHASE 3: Partial reopening of some Library buildings

1. Lobby of Powell and/or YRL open limited hours with staff providing paging services so long as remote access for HathiTrust materials can be continued. Stacks are closed. SRLF remains closed to the public, but items may be paged and delivered to YRL or Powell.
2. Paged materials are checked out by staff and placed in Amazon-style lockers for pickup or self-check units are provided that enable faculty, students, and staff to check out their own materials that have been paged.
3. Sanitizing strategies for materials have been developed and are consistently utilized. At minimum, media must sit for three days in a dry, well-ventilated area before being handled by staff or a subsequent user.
4. All other services remain remote. (See Temporary Expanded Access During COVID-19 Resource Guide.)

PHASE 4: Return to quasi-normal operations

Depending on health and safety considerations, it is possible that some of the services and operations listed below could start in the later stages of Phase 3.

1. Library facilities will gradually reopen for study and other uses, while certain library spaces remain unavailable because physical distancing cannot be assured (i.e., use of the group study rooms, the YRL Main Conference Room, the YRL Presentation Room, the CLICC classrooms, and/or the SIL will likely not be available for use until campus clearances are given). Open hours will be limited initially.
2. Access to the stacks may be restricted to staff or limited numbers of people at one time. If materials are duplicated in other libraries, certain facilities or parts of facilities may not open. It may be necessary to make materials available for pickup at a central location.

3. The number of occupants of each library may be limited based on the number of seats available, and it may be necessary to make a reservation for a seat prior to coming to a library.

4. Considerations for opening buildings assume full security measures, access requirements, appropriate testing, and ability to do contact tracing as determined by the campus.

5. Additional custodial care will be required including frequent disinfecting of common areas and equipment, as well as placement of hand sanitizers and disinfecting wipes in public areas, stairwells, and elevators.

6. Commonly used items will be removed (e.g., staplers, scanners, three-hole punches, paper cutters, literature display racks).

7. Interlibrary Loan (ILL) will resume once staffing allows and when libraries in the UC system and across the country open up their services for reciprocal access.

8. Special collections reading rooms may have additional limitations in terms of access and use of materials.

9. In-person checkout of CLICC equipment will resume gradually.

10. Considerations for resuming quasi-normal operations must include the following:
    a. Use of face coverings and implementation of other risk mitigation measures for library staff who work with the public.
    b. Availability of CSOs or other staff to control access to the buildings and use of some areas in the buildings as appropriate.
    c. Installation of protective shields at service desks.
    d. Removal of seating or limitations on access to some areas.
    e. Possible need for 72-hour quarantine of books that have been checked out or used in-house.

11. Screenings of items from the Film & Television Archive will remain suspended until theaters reopen and adequate health precautions are determined.

12. Concerts, performances, conferences, and seminars in the library facilities may continue to be suspended. Members of the public will only be allowed after authorization by the university and in accordance with guidelines provided by the Los Angeles County Department of Public Health.

13. Exhibit areas will require extra monitoring and cleaning.

14. YRL’s Cafe 451 may not reopen for some time.

15. Remote services will continue in support of remote teaching and research.
APPENDIX 4: Policies and Practical Considerations for Performance- and Studio-based Research

Performance and studio-based research, broadly considered, is highly responsive to shared experience, the ethical dimensions and sociocultural circumstances of our lives, to sensory modalities, and to new technologies and strategies that reveal the extraordinary within the ordinary. As a result, such research, most often found in the arts or those working with artistic methods, evolves within diverse contexts and spaces in its different stages of development and public presentation.

Depending upon the medium, research engagement and creative work occur in individual or shared studios, labs, workshops, on ensemble stages, dance studios, or film/video set locations, among others. Foundational or continued research of individuals working in these fields may involve particular communities and populations (including students), sites and locations, archives and collections, travel and fieldwork as well as specialized equipment such as cameras, lighting, sensors, large-scale displays, and 3-D printers. Much research finds its way to theaters, galleries and museums, as well as non-traditional and public spaces, for public exhibition and experience, often at various stages in its iterative development.

Performance- and studio-based research includes the following:

- Work done individually or collaboratively, with students or professionals, in purpose-built facilities associated with the Schools of Arts and Architecture, the Herb Alpert School of Music, Theater Film and Television, and the various on-campus and off-campus facilities, museums, and studios such as those in Broad, Kaufman Hall, Magowan Hall, Melnitz Hall, Perloff Hall, the IDEAS campus, the Margo Levin Studios, the Fowler, the Hammer, and other studios, which often provide access to specialized space, facilities, professional staff, and equipment.
- Field research undertaken individually or collaboratively, involving travel and accommodations. (See Appendix 5 on field-based research.)
- Community-engaged research with local organizations, prison communities, K-12 schools, and other populations as participants and collaborators (not only audiences).
- Rehearsal and public presentations in theaters, galleries, museums, as well as non-traditional spaces.
- Researchers working on their own or in groups off-campus.

In fields with professional organizations (e.g., guilds, unions), best practices from these organizations should be reviewed and taken into account for the above type of work in each phase below.

PHASE 1: Current Safer At Home state
All performance and studio facilities closed.
PHASE 2: Ultra-low density research and creative activities (~10-25% of normal research density)

Prioritization is for research and creative activities that cannot be conducted remotely and can be adjusted to function in an ultra-low-density format as defined below. For work that requires on campus activities and facilities, individuals or research units/ensembles must first complete a research operational plan (See Appendix 7 for submission details). The completed form must be formally approved by the department chair/director and dean before on-campus research activities can begin. The forms will be accessible to department chairs, directors, deans, the Office of the Vice Chancellor for Research and Creative Activities, and EH&S personnel.

Although UCLA performance- and studio-based research spaces have diverse physical designs, an overall target during Phase 2 is 10-25% of normal personnel density. Ultra-low density is defined as the ability to maintain at least a six-foot separation from all other personnel at all times, including in shared/public/common spaces.

In this phase, the following guidelines will be in place:

1. Individual research activities and physical layout of spaces will dictate allowable personnel density, which may deviate from the general on-campus research/use of facilities guidelines that permit one person per 250 sq. ft. of space (e.g., use of low- or zero-latency data connections may allow coordination of creative work while maintaining the mandated level of distancing).

2. Solo researchers (e.g., composers, musicians, writers, actors, choreographers, dancers, designers) may work in privately assigned rehearsal studios on campus. This provision includes faculty, staff, graduate and undergraduate students, provided they are part of an approved research operational plan.

3. Museums, centers, practice rooms, and research institutes can begin a gradual process to open to staff and researchers so long as ultra-low density guidelines are followed and appropriate sanitization procedures/risk mitigation measures are in place before allowing access to collections, equipment, spaces, and services. Members of the public will not be allowed into these facilities unless otherwise announced and in accordance with guidelines provided by the Los Angeles County Department of Public Health.

4. Individual use of ceramic, photography, sculpture, painting, recording studios, workshops, maker-spaces, and editing bays is allowable with approval of the chair/director or dean.

5. Use of specialized shared lab environments, e.g., rapid fabrication or plotting, where equipment can be controlled remotely and proper distance/sanitization requirements can be maintained.

6. For rotation of studios, stages, rehearsal spaces, practice rooms, workshops, and shared lab environments, occupancy and use can occur only after comprehensive cleaning after each use and approval of the chair/director or dean who has discretion over who can use these spaces.

7. Where appropriate, core facility managers and lab staff must be present. All must adhere to the ultra-low-density requirement and must develop or be included in operational plans prior to reopening.

8. Field research undertaken by ethnographers, musicologists, ethno-musicologists, performance, film and dance studies scholars, architects, filmmakers, theater makers and other creative artists whose work involves individual and collaborative field research, production, and travel can
gradually resume, adhering to the relevant requirements and local guidelines including resolution of complicating issues such as lodging and travel. For more policies and guidelines for field research, see Appendix 5.

**PHASE 3: Low-density research activities (~25-50% of normal research density)**

With the exception of increased personnel densities (appropriately spaced small groups), policies and guidelines are expected to remain largely unchanged relative to Phase 2, but relaxation of certain policies may be possible if approved by campus leadership. These include:

1. Continued expansion of all research and creative activities, including re-occupation of office space while following established campus requirements for physical distancing and safety.
2. Research and fabrication facilities such as machine and printing shops, recording and filming studios, stages, rehearsal rooms, architecture and design studios, workshops and maker-spaces, and arts production labs, etc. could expand their operations.
3. Museums, centers, practice rooms, and research institutes can begin controlled public access subject to leadership approval.
4. Because several art forms require person-to-person engagement with movement in space, sight, breath, sound and shared construction, much research and creative activity will either need to be adapted or delayed. While small groups of researchers who are spaced appropriately and with appropriate PPE may be allowed, additional safety precautions will need to be followed, such as employing movable plexiglass gobos/barriers. Vocal performance and theater production, for instance, cannot resume without such safety precautions. Face-to-face singing and projected theatrical performance will not be allowed. Members of the public should not enter into these spaces without approval of the dean.

**PHASE 4: Restart a return to full research operations.**

Limited public programming with appropriate health and safety precautions in accordance with guidelines provided by the Los Angeles County Department of Public Health. Given the potential risks for face-to-face singing, certain instrument classes, and singing/projected theatrical speaking (both Western and non-Western), additional restrictions and layers of review will be needed for such practices and performances. Additional cleaning and purification protocols will also need to be established, whether in the performing venue, rehearsal space, or studios.
APPENDIX 5: Policies and Practical Considerations for Field and Community-Based Research

Due to travel restrictions and greater potential for exposure to risks, the timing for the resumption of field and community-based research may be different from that of the other phases of research ramp-up. Local, state, and national guidelines from the Centers for Disease Control (CDC), the World Health Organization (WHO), and other official public health organizations with regard to travel need to be followed and, where applicable, additional country-specific guidelines for international travel as well as any local health regulations. The policies and practical considerations below are meant to serve as guidelines for researchers, deans, and chairs when submitting and reviewing research operational plans that include travel for field or community-based research. (See Appendix 7 for more information on the research operational plan submission process.) A copy of the research operational plan should also be submitted to the UCLA EH&S Field Safety Specialist (fieldresearch@ehs.ucla.edu) for review and should describe any deviations from the policies and recommendations contained herein and what safety measures are being followed to mitigate risk. A UCLA COVID-19 Field Protocol Worksite Planning Checklist is available on the EH&S Research Safety and COVID-19 website.

1. Research operational plans must be reviewed by all researchers and partners.
   a. The field research plan must spell out potential risks to research personnel, participants, and community partners, and the risk mitigation efforts these individuals can take.
   b. The research plan should describe safety protocols for ensuring that neither the researcher nor members of the community is put at risk by the researcher’s presence. Researchers should describe any local field conditions, such as social or cultural protocols and special circumstances (e.g., working with vulnerable communities), that should be considered and addressed in the risk mitigation plan.

2. No one should be compelled to engage in activities with which they are uncomfortable.
   a. Research personnel must be given a departmental or university officer to contact if they feel that safety considerations have not been sufficiently addressed, or if they feel compelled to participate in the research against their wishes.
   b. The faculty PI/responsible person will inform research personnel and community partners that they have the right to refuse to engage in activities that could expose them to risk, and should obtain positive consent of their willingness to assume the risks involved.
   c. Positive consent should be obtained in writing, either on paper or via email, from research participants and partners as required by the IRB.
   d. For studies involving anonymous subjects or public observation research, the research operational plan should include protocols to be followed for the protection of the general public.

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6 The following write-up integrates guidelines formulated by the University of Toledo.
7 For information on UC policies and procedures, see: https://ucnet.universityofcalifornia.edu/coronavirus/travel/index.html
3. Depending on the nature of the research, operational plans should include:
   a. List of all research personnel, their contact information, including an emergency contact.
   b. Location of fieldwork and travel plans for all research personnel.
   c. Description of lodging and meal plans for research personnel staying more than a day. (See also guidelines listed in #16 below.)
   d. Justification why delaying the research will have a detrimental impact on the research project, community, or progression towards degree for relevant research personnel.
   e. Description of the research activities, community partners (if applicable), and what precautions are being undertaken to limit potential disease transmission (e.g., personal protective equipment, physical distancing)
      i. for research personnel.
      ii. for research participants.
      iii. for community partners.
   f. Plan for care/treatment if any research personnel become sick in the field. (See requirements listed in #17 below.)
   g. Contingency plan for carrying on research if any personnel become sick or if an individual on the research team is no longer willing or able to participate in research activities.
   h. Contingency plan for medical treatment and potential medical evacuation if an individual on the research team becomes sick.

4. Research being conducted at non-UCLA sites must have written permission for the research to proceed from those that control access to the field site, organization, and/or the funding agency, as applicable.

5. If IRB approval for the research is required because the research involves human subjects, the PI must obtain an updated IRB approval that details the potential risk to the study participants and community partners of being exposed to COVID-19 from being involved in the research.

6. If non-UCLA agencies or research partners are actively engaged in the research, the research should follow the health and safety guidelines that are the most stringent unless expressly permitted by the partner agencies.

7. Before conducting research each day, all UCLA personnel working at the field location must measure their body temperatures. If they have answered yes to any of the questions in the symptom survey, they should not work and should call the Infectious Disease hotline. Personnel should also keep a daily log of COVID-19-related symptoms. Contact fieldresearch@ehs.ucla.edu if you are in need of thermometers.

8. No one should participate in any fieldwork/community-engaged research if they are feeling ill, have a temperature of >100°F, or if any members of their household are experiencing flu-like
symptoms. High-risk individuals should be especially cautious about participating in any field/community-based research.  

9. A log of each day’s activities should be recorded in a shared folder (e.g., within the onsite network, UCLA Box, a shared Google Drive, Microsoft Teams).
   a. This log will include locations where research occurred, public or private venues accessed or visited, personnel in attendance, and any operational anomalies that may have occurred requiring assistance from persons outside the research team (e.g., mechanical issues).
   b. The log should also include, as far as possible, the name and contact information of individuals involved in the research or daily activities, partners, and participants in the research study.

10. If traveling out of state, express permission must be granted by the supervising dean. A 14-day quarantine may be required upon return and before returning to work on campus.
   a. If permitted to travel, register your travel plans as required by UCLA guidelines.
   b. If traveling long distances, stops should only be made for fuel and restrooms; sanitize hands after these activities.

11. No more than two people may occupy a vehicle to, from, and at the work site. Cloth face coverings are to be worn in vehicles when there are two people. If possible, travel with windows open. High touch areas (e.g., vehicle keys, door handles, steering wheel) must be disinfected before and after the field day.

12. When boats are used, the maximum number of total personnel allowed on the vessel at any one time is dictated by the size of the ship. Outboard vessels that are 21 feet or less will be limited to crews of two. Vessels larger than 21 feet should make determination of crew density based on size and research scope.

13. Unless precluded by environmental conditions (e.g., high altitude, extreme heat), it is recommended that face coverings be worn at all times during field- or community-based research. Face coverings, however, are always required when conducting tasks involving personal interactions at less than six feet distance.

14. For day trips, all researchers should bring ample food and fluids for themselves in their own cooler. No sharing of food or drinks is allowed.

15. Upon completion of research at the end of each day, all equipment must be disinfected.
   a. The level and timing of disinfecting equipment between uses should be determined by the research team. For some, it may make sense to clean after each use; for other teams, it may be understood that the risk of exposure is a daily risk not an individual encounter risk.

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b. PPE (such as masks, gloves, and goggles) should not be shared.

16. Additional guidelines for research that requires lodging and/or long-term stays:
   a. Traveling to a remote work site often brings individuals from multiple locations to the same location, enhancing risk upon arrival, but limiting external exposure after arrival.
   b. Personnel planning to participate in remote work should self-quarantine as much as possible (ideally 14 days), or as much as required by prevailing travel regulations in the origin and destination location, before and after traveling to the remote site.
   c. Research teams should establish protocols to physically isolate individuals, pairs, and groups in a hierarchical fashion. For example, if individuals have to share sleeping quarters, other daily activities should be arranged to maximize these interactions such as scheduled eating times, riding in vehicles, etc.
   d. Purchasing of food and supplies, and contact with the general public outside the research team, should be limited to as few individual interactions as possible. It is recommended to disinfect supplies before storage and use for research or other activities.

17. If a member of the research team presents flu-like symptoms the following steps are required:
   a. The individual must cease fieldwork and self-quarantine. PI should identify contingency funds for a separate hotel room or other measures before research begins.
   b. Seek COVID-19 testing as soon as possible.
   c. Call the UCLA Infectious Disease Hotline for additional instructions.
   d. The remainder of the team may continue their work, but must make extra efforts to isolate themselves from external sources. If possible, everyone in the local research team should be tested. The research team must adhere to local testing requirements and contact tracing policies.
   e. The symptomatic individual should follow the return-to-work guidance offered by the Los Angeles County Public Health Department. Currently, their recommendations are to stay home or isolated until at least ten days have passed from the onset of symptoms AND at least three days since recovery. Recovery means no fever for at least 72 hours without the use of fever-reducing medications, and respiratory symptoms (e.g., cough, shortness of breath) have improved.

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9 [http://publichealth.lacounty.gov/acd/docs/HomeisolationenCoV.pdf](http://publichealth.lacounty.gov/acd/docs/HomeisolationenCoV.pdf)
APPENDIX 6: Policies and Practical Considerations for Core Facilities

Core facilities are ideally positioned to provide low-contact, high-impact support to the research community and may serve as pilot locations for health surveillance programs as they are developed in the coming weeks. Core facilities must follow density recommendations for research lab spaces as described earlier in this document for Phases 1-4.

Eligible cores:
- The core location must be a discrete physical space that is separated from other labs or common areas,
- Access to the physical site or instruments must be under core control (either physically or electronically)
- The core must be able to track access if contact tracing becomes necessary.

Scope of permitted work:
- Activities as approved by the relevant dean in individual researcher operational plans,
- Analysis of samples and live animals that already exist at the core and/or are generated under approved critical projects, and
- Processing of time-sensitive samples (in terms of the sample itself and/or the ongoing research) and live animals that can be transferred to core and retrieved (if needed) with no contact.

Staffing to ensure physical distancing:
- Only core staff or trained users who are both certified with the facility and approved to return to campus are permitted in the core facility space.
- Participation will be voluntary: no staff member will be compelled or coerced to work onsite.
- Staffing levels will be low density and appropriate for core physical dimensions and layout as dictated by each Phase of research ramp-up.
- Scheduling via software or other means that are easily accessible for core staff and user should be used to ensure that allowed personnel density in the core facility is not exceeded at any time.
- Time onsite will be minimized to essential tasks.
- Core facility directors may consider repossessing any keys loaned to researchers in order to manage access.
- Use of common areas outside the laboratory will be limited or key card access will be restricted according to the same general building guidance applied across campus during the different ramp-up phases.

Core facility access review and oversight process:
- The director of each core facility will develop an operational plan that addresses needs for physical distancing, disinfection, and safe-working-alone processes (if applicable) in adherence with campus guidelines.
- Phase 2 operational plans for both the core facility and core users will be reviewed and approved by the relevant dean or director.

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● Researchers planning to use core facilities must submit current proof of Phase-dependent operational plan approval to the core facility director. Cores are encouraged to maintain a current list of all researchers who have been granted privileges to use the core.

● Availability of core services does not imply or confer authorization for researchers to resume lab-based activities without an approved operational plan.

● Core services will be denied to those researchers who abuse access privileges, for example, by exceeding the volume and/or duration of their approved research as performed in the core facility.
APPENDIX 7: Research Operational Plan Template

Per the “Guidelines for UCLA Research Ramp-Up,” deans (or their designated representatives) have the final approval responsibility during the ramp-up to on-campus research activities. Prior to resuming research activities, each faculty member with an independent research program must submit operational plans to their department chairs for provisional written approval and submission to the dean for final written approval. If more than one dean/school is involved, consultation and approval should be sought from each unit. Instructions for submitting operational plans will be posted on the OVCR’s website, along with links to complete and submit the plans through DocuSign. It is recommended that operational plans be written in advance, and the information transferred to the DocuSign template at the point of submission. Appeals will be handled on a case-by-case basis through the OVCR. In the event of a subsequent ramp-down phase, authority on research activities returns to VCR Wakimoto.

Approved operational plans will be accessible to department chairs, deans (and their designated representatives, if applicable), the Office of the Vice Chancellor for Research, and EH&S personnel. PIs are responsible for sharing the plan with every member of the research team, the directors of required core facilities and/or shared resources, and any PIs with research activities operating in close proximity and/or with personnel using shared common spaces.

DocuSign Summary Information

The DocuSign process has been set up to require a few fields of basic information when initiated:

1. Name of PI or responsible person
2. Email of PI or responsible person
3. Name of department chair
4. Email of department chair
5. Name of school/division dean (or designated representative)
6. Email of school/division dean (or designated representative)

Additional fields are available to provide the name and email of people or entities that should receive notification when the operational plan is approved (e.g., core facilities, EH&S, co-PIs, PIs in adjacent research spaces or that share common areas, central units).

DocuSign Operational Plan Template

The DocuSign operational plan template requires significant information regarding the proposed research activities. The bulk of the form addresses common issues; a single field is provided for the inclusion of other information required for operational plans specific to lab, library/archival, and performance/studio-based research (see relevant appendices in these guidelines for more information).

In addition, for clinical research

1. Address any additional items discussed in Appendix 2A.
2. Complete the risk mitigation section in the template.
3. If research involves human subjects, include an updated IRB protocol that takes into account potential risks from exposure to COVID-19 for involved human subjects.

**In addition, for field research**

1. Address any additional items discussed in Appendix 5.
2. List the UCLA EH&S Field Safety Specialist (fieldresearch@ehs.ucla.edu) as a secondary reviewer.
3. Detail considerations for off-site locations for research
   a. Travel route and stops
   b. Contingency plans for quarantine before and after out-of-state travel per prevailing university guidelines
      i. For local, community-based research, quarantine before and after travel is necessary in the event of a known COVID-19 exposure
   c. Details for each planned research location: location of shelter/accommodations, location of research site, locations visited for supplies, etc.
   d. Description of lodging and meal plans for personnel staying more than a day
   e. Locations used to process collected information
   f. Rooms under the direction of the PI or Responsible Person where personnel will work
   g. Shared rooms (e.g., instrumentation labs not under the direction of the PI) personnel will commonly access
   h. Action plan for any team member who becomes sick in the field (e.g., emergency evacuation, notification, self-quarantine, and available medical resources)
4. Guidelines for work or shelter in shared rooms
   a. List/describe actions expected in shared living spaces or shared research environments.
   b. Include specific guidelines/limitations/requirements/restrictions.

**In addition, for computational research**

If there are any health and safety issues not addressed in the basic template section above, then provide additional details here in the operational plan.

**Attestations**

The research operational plan submission form concludes with an attestation regarding compliance with health and safety risk mitigation measures. In submitting their operational plan, PIs are acknowledging their awareness of and intent to follow the listed declarations. Group leaders (PIs) are strongly encouraged to ask their team members to complete and sign the personal attestation provided below, to further reinforce the importance of compliance with campus and research group policies and ramp-up plans. These attestations can be maintained by group leaders. Some departments or schools/divisions may choose to require personal attestations for all on-campus personnel.
Personal Attestation

No member of a research team should feel they are being compelled to work on campus or in the field during periods of Safer at Home directives. Flexible accommodations can be sought for those who do not feel safe returning to campus or who cannot return to campus. The attestation below should only be signed by individuals who are returning voluntarily to work on campus or in the field.

I have read and will follow the ‘UCLA Requirements for COVID-19 Symptom Monitoring.’ I understand that I will only be allowed to participate in research activities on campus if I:

a. Complete the UCLA Symptom Monitoring Survey each day before reporting to work on campus or in locations where they will be in contact with others.
b. Have been cleared to work after completing the UCLA Symptom Monitoring Survey.
c. Have completed any required COVID19 training
d. Wear a facemask or covering whenever other personnel are present in the research space and always when outside in public spaces.
e. Have a body temperature less than 100.4°F (38°C)
f. Have had no COVID-19 symptoms in the past seven days (e.g., fever, headache, cough, shortness of breath, difficulty breathing, chills, muscle pain, sore throat, loss of smell/taste).
g. Have had no contact with positive or suspected-positive COVID-19 individuals in the past 14 days.
h. Have not been ordered to quarantine or self-isolate by physician or government.

I will follow UCLA reporting guidelines related to COVID-19 infections. Personnel working or learning on campus or working with others in the field who test or have tested positive for COVID-19 at an outside facility must self-report the positive COVID-19 test result to the appropriate UCLA department: UCLA Infectious Diseases Hotline at (310) 267-3300 for faculty, staff, trainees, and volunteers; and Ashe Center Infection Control Line at (310) 206-6217 for students.

I also pledge that I will:
1. Follow physical distancing guidelines as set forth by the campus and my supervisor.
2. Ensure that personal protective equipment (PPE) and/or face coverings are worn while on campus and that other health mitigation measures are followed.
3. Follow disinfecting protocols as set out by my supervisor.
4. Follow instructions given by my supervisor for wearing a face covering within the research environment and comply with any other risk mitigation requirements.

______________________________     ______________________________   ___________________
Printed Name                                                     Signature                                                    Date

______________________________     ______________________________   ___________________
PI Printed Name                                                 Signature                                                    Date
Guidelines for UCLA Research Ramp-Up | May 26, 2020

Research Operational Plan

For more detailed instructions about the information to be included in this form, see Appendix 7 in the most current version of the Guidelines for UCLA Research Ramp-Up. Not all form items and questions will be applicable to all research; use N/A as appropriate. If any research activities have already been approved during a previous ramp-up phase and will continue in the current research operational plan, include those activities and the associated personnel in the responses below.

PI/Responsible Person:

First Name ___________________  Last Name _______________________ Email ______________
Campus Phone # _________________________    Cell Phone # _____________________________
Name of campus designee in case of emergency _________________________________________
Phone # ________________________________ Email  ____________________________________
Primary Department ______________________________  School/Division_____________________

Department Chair:

First Name ________________  Last Name _______________________ Email __________________

School/Division Dean:

First Name ________________  Last Name _______________________ Email __________________

Ramp-Up Phase: _____
(This must correspond to the current campus research ramp-up phase; refer to the Guidelines for more information about what is allowed.)

Provide a brief justification for the resumption of research activity on campus.
List additional supplies (including quantities) required for compliance with COVID-19 risk mitigation guidelines (e.g., cloth face coverings, sanitizers). (Do not include the personal protective equipment (PPE) normally used for lab operations.)

Type of research (check all that apply)
☐ Lab  ☐ Clinical/Human Subjects  ☐ Library/Archival  ☐ Performance  ☐ Studio  ☐ Field
☐ Core  ☐ Computational  ☐ Office-Based  ☐ Other _________________________

Total number of people associated with research activity/group ______

Maximum number of personnel involved in research activity/group on campus (or at off-campus field location) at any one time under this ramp-up request ______

☐ Y  ☐ N  Is this research activity typically monitored by Environment, Health & Safety?
☐ Y  ☐ N  Will this research activity use core facilities or other shared resources? (If yes, list below.)

Facility/Resource __________________________________________
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Health and Safety Plans

List any physical modifications necessary to make the research environment compliant with COVID-19 risk mitigation guidelines (e.g., floor markings, rearrangement of furniture).

Describe general protocols to be implemented to maintain low density in PI-controlled spaces (e.g., staggered work schedules, cleaning routines).

Describe general protocols to be implemented to maintain low density in shared spaces (e.g., communication plans, staggered work schedules, clearly marked entries and exits).
Identify the person/people in your department or division/school responsible for coordinating use of common building spaces applicable to your research activity (e.g., bathrooms, hallways, elevators, entries), as well as those coordinating with researchers working in adjacent occupied spaces to maintain compliance with COVID-19 risk mitigation guidelines.

Name _____________________________________________  Email _____________________________
Name _____________________________________________  Email _____________________________
Name _____________________________________________  Email _____________________________

Describe other health and safety COVID-19-related accommodations appropriate for the research activity that are not discussed elsewhere.
List each team member to be working under this research ramp-up request. Include name, role (e.g., staff researcher, postdoc, graduate student, undergraduate student, visiting scholar, other), email, and a non-campus phone number. Reminder: Undergraduates are allowed to return to campus to work on a case-by-case basis and in accordance with interim policy 906. (If more than 20 entries are required or to update personnel roster, please email a complete personnel list to your department chair.)

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☐ Y  ☐ N  Are there equity considerations for the prioritization of your own research and/or that of any of the research personnel listed above? *(If yes, describe below.)*

What accommodations are you making in consideration of research personnel who may be unable to return to campus or who may request modified work schedules/duties? *(Do not describe individual needs, even anonymously, and do not provide any personal information that may be protected by privacy/HIPAA regulations.)*

Describe plans for addressing team member non-compliance with COVID-19 risk mitigation measures. *(Consult with campus units as needed (e.g., Campus Human Resources, Graduate Division, Academic Personnel).)*
In the event of a research ramp-down, how much time will be required to safely shut down your lab/research space and ongoing research activities?

Describe other relevant information required for operational plans specific to lab (including animal-based), library/archival, performance/studio-based, field, community-based, or computational research. (See Appendices 1-5 in the Guidelines for UCLA Research Ramp-Up for more information; for core facilities, see Appendix 6; for clinical/human subjects, see Appendix 2 and below.)
Risk Mitigation Plan for Clinical Trials and Human Subjects Research

Study Name: ____________________________________________________________
IRB Number: __________________________________________________________
PI: ________________________________________________________________
Department: __________________________________________________________
Ramp-Up Phase: ______

Benefit to Subjects (choose one):
☐ Immediate Benefit
☐ Deferred Benefit
☐ No Benefit

Brief Summary of Research

Risk Mitigation Strategies

● Adherence to UCLA screening protocols inclusive of daily completion of the UCLA Symptom Monitoring Survey for all on-site research personnel and screening of study participants for COVID-19 symptoms in advance of visit and upon arrival. Note: Screening of remote study participants is not required. See Appendix 2A for guidelines and a tool that can be used prior to and upon arrival for screening study participants in non-clinical sites.
● Adherence to UCLA physical distancing and face covering policies. (See Appendix 2A.)
● Cleaning of all surfaces that either the participant or research personnel had contact with in between participant visits and at the end of the day. (See Appendix 2A.)
● Adherence to UCLA visitor restrictions policies. (See Appendix 2A.)
● All clinical research activities that can be performed remotely must be performed remotely. (See Appendix 2A.)
● Additional risks related to COVID-19 will be communicated to research subjects.

* These policies are subject to change as we move through the various phases of ramp-up. Follow the newest guidelines as communicated by UCLA and federal, state and local governments.
Pre-screening and On-site Screening Plan:

On-site Physical Distancing and Face Covering Plan:

Surface Cleaning Plan:

Communication Plan to subjects discussing risks and risk mitigation:
By submitting this research operational plan, I, the undersigned researcher, declare that I have read and will follow the ‘UCLA Requirements for COVID-19 Symptom Monitoring.’ Workers will only be allowed to participate in research activities if they:

1. Are willing to return voluntarily to work. No staff, student, postdoc, or other member of a research team should feel they are being compelled to work on campus or in the field during periods of Safer at Home directives. Flexible accommodations should be sought for those members who do not feel safe returning to campus or who cannot return to campus.
2. Complete the UCLA Symptom Monitoring Survey each day before reporting to work on campus or in locations where they will be in contact with others.
3. Have been cleared to work after completing the UCLA Symptom Monitoring Survey.
4. Have completed any required COVID-19 training.
5. Wear a face covering whenever other individuals are present in the research space and always when outside in public spaces.
6. Have a body temperature less than 100.4°F (38°C).
7. Have had no COVID-19 symptoms in the past seven days (e.g., fever, headache, cough, shortness of breath, difficulty breathing, chills, muscle pain, sore throat, loss of smell or taste).
8. Have had no contact with positive or suspect-positive COVID-19 individuals in the past 14 days.
9. Have not been ordered to quarantine or self-isolate by a physician or government.

I will seek immediate medical attention for any research personnel who report trouble breathing, persistent pain or pressure in the chest, new confusion or inability to arouse, or bluish lips or face. I will follow UCLA reporting guidelines related to COVID-19 infections. I will also ensure that personnel working or learning on campus or working with others in the field who test or have tested positive for COVID-19 at an outside facility self-report the positive COVID-19 test result to the appropriate UCLA department: UCLA Infectious Diseases Hotline at (310) 267-3300 for faculty, staff, postdocs, trainees, and volunteers; and Ashe Center Infection Control Line at (310) 206-6217 for students.

In the course of the approved research activities, I will:

1. Enforce physical distancing.
2. Ensure that personal protective equipment (PPE) and/or cloth face coverings and other health mitigation measures are available as required and appropriate for proposed research activities.
3. Follow disinfection protocols.
4. Ensure that there are cleaning materials available to perform appropriate self-care.
5. Provide instructions for personnel working directly with study participants or in hazardous environments. These instructions have to state how risk of contagion from COVID-19 can be minimized for research subjects.
6. Provide instructions for cloth face covering use within the research environment.
7. Provide instructions on other risk mitigation measures as appropriate within the research environment.

ATTESTATION SIGNATURE

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<th>Role</th>
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## Approval Signatures

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Comments

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Guidelines for UCLA Research Ramp-Up | May 26, 2020
APPENDIX 8: Ramp-Down Directive

March 20, 2020 - 5:30pm
CORONAVIRUS UPDATE 30 Office of the Vice Chancellor for Research and Creative Activities

Most Campus Laboratory Research to Shut Down

To the Campus Community:

I appreciate your efforts to develop strategies for ramping down on-campus research activities following my March 17 communication.

In light of Los Angeles County’s safer at home order, UCLA has determined that these ramp-down strategies must be fully deployed by Monday. Please know that buildings will be locked at 10 p.m. tonight and remain locked on Monday, so please check with your department if you require special arrangements to enter your building. Effective at 11:59 p.m. tonight, all on-campus operations will be suspended, with the exception of those that are essential and cannot be conducted remotely.

Effective immediately, all group meetings, courses and scientific convocations are to transition to virtual environments — for example, Zoom, Slack or another approved, secure platform.

Research performed on campus

If you have not already done so, please obtain approval for any essential experiments and essential research personnel you believe must remain active on campus during this time. To minimize community interactions, each lab is to activate no more than one or two essential research personnel to manage animal husbandry, equipment or essential experiments. To ensure the safety of essential research personnel, labs should establish a communication protocol and use it while personnel are working on campus.

Some units, including the David Geffen School of Medicine, Samueli School of Engineering and the UCLA College Divisions of Life Sciences and Physical Sciences, have developed internal processes and deadlines for researchers to obtain approval for personnel and experiments. Those units will communicate directly with researchers under their purview. All other requests are to be submitted to me via C19@research.ucla.edu. Requests to continue research activities must include a full description of why the on-campus research is essential, a timeline for completion and documented support of the department chair or dean; essential personnel should also be identified in each request. All on-campus projects and personnel not approved to continue research activities or that do not have a pending request to their unit filed are required to cease operations.

As previously communicated, essential research personnel are those individuals who are:
• Necessary to ensure the ongoing viability of research, including the well-being of research animals. This includes vivarium lab staff and non-vivarium lab staff responsible for animal care, although staffing should be minimized to the extent feasible to maintain the health and safety of the animals.
• Necessary to ensure the ongoing viability of research that includes not easily replaceable, perishable research materials.
• Responsible for the maintenance of equipment that, if not done, could result in damage to equipment or extraordinary cost — for example, cryogen fill on NMR spectrometers.
• Researchers working on experiments that have a small window for completion — for example, research that relies on the ability to make specific measurements only a few times a year.

As a reminder, note that students, including graduate students, cannot be mandated to serve as essential personnel.

Essential experiments are those for which suspension of on-campus activities would cause irreparable harm to the research project. This will usually involve ongoing animal experiments that required enormous time and cost to get to their current state, and that will be completed in the near future. UCLA has also made a commitment to prioritizing COVID-19 research. Requests for continuation of such projects must be described in writing as indicated above.

In animal facilities, all animal orders, imports/exports and internal transfers will be put on hold and rodent breeding reduced to the minimum possible. Please contact UCLA’s Division of Laboratory Animal Medicine for guidance on identifying unique and irreplaceable animals. Study areas maintaining aquatic, avian or other species are expected to maintain basic animal care and husbandry operations, and labs with USDA-covered animals that require specialized lab care or intensive husbandry operations are expected to continue providing this care as well.

Environment, Health & Safety (EH&S) staff are available for safety consultations related to ramping down your on-campus research activities. Contact C19Support@ehs.ucla.edu for support. In the event of a lab emergency, researchers should immediately call 911 rather than the EH&S hotline or email contacts.

Clinical research activities

With respect to clinical research, in-person research visits should not be conducted unless the specific research visit provides an immediate benefit to a participant’s health and/or well-being, or the visit is part of the course of ongoing clinical care. (Note: Policies for routine and elective visits are also undergoing review by UCLA Health.)

Please consider suspending recruitment or conducting follow-up visits remotely, if this presents no harm to your participants. Please also be certain to personally inform participants of the risks of COVID-19. Visit UCLA CTSI Research Go and the Office of the Human Research Protection Program website for detailed information about UCLA’s COVID-19 clinical research policy and human subjects research.
Off-campus research activities

Research activities that can be performed remotely and do not require physical interaction with human subjects (for example, field studies, surveys, record reviews and data analysis) can and should continue. As a reminder, the University of California Office of the President has stated that under no circumstances are researchers to take materials — other than lab notebooks, laptops and data storage devices — off-site, including to their homes. Notebooks taken off campus must be inventoried and tracked to protect university property while off-site.

While it is not possible to predict how long we will remain in this new state of ramped-down activities, you should plan for the possibility that this could continue through the end of the quarter or longer. I will continue to communicate with you regularly as I receive new information. Thank you for being True Bruins and exemplary members of our community.

Please direct questions to C19@research.ucla.edu.

Sincerely,

Roger Wakimoto
Vice Chancellor for Research and Creative Activities
APPENDIX 9: Ramp-Up Committee

Roger Wakimoto – Vice Chancellor for Research and Creative Activities, Committee Chair
Colin Dimock – Assistant Vice Chancellor, Environment, Health & Safety (EH&S)
Andrea Kasko – Engineering, Chair Graduate Council
Renate Lux – Dentistry, Associate Dean Graduate Division
Victoria Marks – Arts & Architecture, Associate Dean
Kelsey Martin – Dean, David Geffen School of Medicine
Craig Merlic – Physical Sciences, Executive Director, UC Center for Laboratory Safety
Jennifer Perkins – Director, Research Safety & Animal Welfare Administration (RSAWA)
Todd Presner – Humanities, Associate Dean and Advisor, Office for Research and Creative Activities
Steve Smale - Vice Dean, David Geffen School of Medicine
Marcia Smith – Associate Vice Chancellor, Office of Research Administration
Lisa M. Snyder – Director, Office of Information Technology and Institute for Digital Research and Education
Virginia Steel – University Librarian
Till von Wachter – Social Sciences, Associate Dean