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LETTER FROM DEAN SCOTT LEPHART

The UK College of Health Sciences and the University of Kentucky have worked diligently to reinvent operations and prepare for our campus reopening while helping our community understand the campus experience is going to look very different for the foreseeable future.

The devastating impact of COVID-19 halted what we once knew as normal in mid-March when campus was shuttered, class delivery moved online, and social connection switched to Zoom meetings and teleconferencing.

Concurrently, we are taking this opportunity to face our implicit biases and combat all forms of racism that exist in our community. Thanks to university leadership, and the staff and faculty of our college, I am convinced we are poised to confront the challenges of this virus and reopen our campus on Aug. 17, 2020.

This College of Health Sciences Safe and Smart Restart Playbook reflects the work of nearly all of our staff and faculty to re-envision operations focused on the health and safety of everyone in our community. Our planning process established five major work groups comprising Facilities and Administration, Academic Affairs, Clinical Education and Practice, Research and Scholarship, and Faculty Advancement.

Our Facilities Workgroup made significant modifications to our physical space and incorporated best practices to ensure a safe and smart reopening for students, faculty, and staff. This includes academic instruction, research, and office workspace considerations that comply with social distancing protocols and minimizes exposure of students, staff, and faculty to COVID-19 transmission.

To reduce workplace density, students can expect a mixture of in-person instruction and online instruction—including video or remote learning—to reduce capacity for classrooms, enforce physical distancing, and keep our students and faculty safe.

Furthermore, our staff and faculty will operate with staggered schedules—with preference to promote and encourage remote work whenever possible—consistent with quality instruction, research, service and administration.

I am proud of the work of our CHS community to rapidly respond and restore college operations as we re-envision this new normal. Our staff and faculty have been thoughtful and intentional in establishing a secure environment for our mission to thrive in a manner that is safe and smart for our students.

I applaud the courage of everyone in our community as we embark on a journey that will be exciting, yet scary, as there are still many unknowns we will encounter in the coming days. I am fully confident we will succeed and emerge from this crisis with a community of acceptance and ready to resume our role as one of the preeminent Colleges of Health Sciences in the country.
We at the College of Health Sciences condemn racism and are committed to eradicating it in our college, our state, and in this country. As a college, our goal is to create a safe, inclusive environment for all—one from which every one of our students emerge as leaders in health care who practice with compassion and cultural humility. We cannot truthfully say our community is one of belonging when inequity and injustice still exists for so many.

Our commitment to pursue justice, equity, and inclusivity must remain a priority throughout our restart efforts as COVID-19 changes may place additional burdens on communities of color and will require intentional and thoughtful action.

Our tactics to enact change must be both sustainable and systemic. The Diversity, Equity, and Inclusion Committee in CHS has continued to meet every other week to ensure we are attentive to the current and future environment. We have also established a $100,000 Fund for the Advancement of Justice, Equity, and Inclusivity in the College of Health Sciences. Other actions include:

- A standing committee has been appointed and empowered to be thought leaders to give us direction, redirect our course when needed, and assess the effectiveness of our actions. The committee will report regularly to the Dean.
- Regular communication has been disseminated, and the efforts given a more prominent location on the CHS website for easy access.
- A Town Hall for students, facilitated by the Associate Director of the Center for Graduate and Professional Diversity Initiatives (CGPDI) was held via Zoom. Highlights included a need for trust, transparency, and teaching. Recommendations included (with actions thus far following).
  - More intentional inclusion of diversity in curricula, including both professional roles and personal growth
    » Each Department is currently undergoing such a review.
    » The Faculty and Staff Kickoff will focus on a structured process for such review, facilitated by Janine Schmedding-Bartley based on information shared at a national faculty development program.
  - Weave more culturally relevant conversation into the college experience
    » We will work with CGPDI and other campus partners to facilitate this
- Enhanced communication
  » In addition to that already seen on the website, the DEI Committee will institute regular Zoom Open Office Hours with a sincere intent on hearing concerns and suggestions for action.
    › Establishing trust will be a work in progress, however CHS leadership commits to creating an environment of support for and valuing of feedback, even when challenging.
  » Each Department has identified student diversity champions who will become part of the re-envisioned student organization (BIG I.D.E.A).
- Need to recruit more people of color including students, faculty, and staff
  » Formalized a relationship with Kentucky State University to support an existing program targeting diverse students for health careers. This effort will build upon faculty, student, and staff connections.
  » Will be participating in national conferences for recruiting diverse students, possibly along with CGPDI, again including faculty, student, and staff connections.
  » Have revised faculty recruitment procedures to focus more intentionally on diversity recruitment and hold search committees and departments accountable for actions.

• Town Halls for staff and faculty are planned in the coming weeks.
• Unconscious bias training for faculty and staff has been transitioned by UK to a Zoom format. We are scheduled for sessions in August and October and will schedule attendees within the coming days.
• All faculty, staff and students will participate in annual training including the training required by the University, with additional trainings provided and encouraged. Contribution to a sense of belonging will continue to be assessed in annual reviews.
• Members of the college have been and will continue to be actively engaged in diversity initiatives at the University and community levels.
• We are establishing a $100,000 Fund for the Advancement of Justice, Equity, and Inclusivity in the College of Health Sciences
HOW WE’RE PLANNING
FOR A SAFE AND SMART RESTART

ACADEMIC AFFAIRS
- ACADEMIC PROGRAMS
- STUDENT SERVICES
- ENROLLMENT MANAGEMENT

CLINICAL EDUCATION AND PRACTICE
- PLACEMENT/COMMUNITY PARTNER ENGAGEMENT
- UK PEDIATRICS THERAPIES, MAAC, VOICE, ACADEMIC CSD
- PRACTICE PLAN

RESEARCH AND SCHOLARSHIP
- CLINICAL RESEARCH
- COMMUNITY-BASED RESEARCH/INSTRUCTION
- CENTERS/INSTITUTES/LABS
- STUDENT INVOLVEMENT
- OPERATIONS

FACULTY ADVANCEMENT
- APPOINTMENT, PROMOTION, & TENURE
- EFFORT ALLOCATION (DOE)
- RECRUITMENT PLANNING

Facilities

Physical Space
- Technology
- Finance & Purchasing
- Human Resources
- Communication PR/Marketing
- Analytics

Building Access/Personnel Protocols

Signage

PPE


**Workstream Groups**

**Facilities and Administrative Units**

Workgroup and subgroups led by Denise McCarthy, CHS Assistant Dean for Operations

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**Facilities**

*McCarthy, Houlihan*

**Physical Space**

*Black, Hieronymus*

**Building Access/Personnel Protocols**

*Black, Jennings, Schwarze*

**Signage**

*Black, Hieronymus*

**PPE**

*Black*
Academic Affairs

Workgroup and subgroups led by Dr. Karen Badger, CHS Associate Dean for Academic Affairs and Undergraduate Education
Clinical Education & Practice
Workgroup and subgroups led by Dr. Janice Kuperstein, CHS Associate Dean for Faculty Affairs and Clinical Engagement

CLINICAL EDUCATION AND PRACTICE

Kuperstein

Placement/Community Partner Engagement
Baker, Chatterjee, Clancy, L. English, Joyner, Lee, Morris, Warren

Clinical Practice
UK Pediatric Therapies, MAAC, Voice, Academic Clinical
Folczyk, Morris, Sayre, Suiter, West

Practice Plan
Black, H. Hoch, Schuer, Uhl
Faculty Advancement

Workgroup and subgroups led by Dr. Janice Kuperstein, CHS Associate Dean for Faculty Affairs and Clinical Engagement

FACULTY ADVANCEMENT

Kuperstein

Effort Planning - DOEs
Badger, Black, English, Gribble, Olson

APT
Collett, Jennings, Skaff, Woltenberg

Recruitment Preparation
Badger, Black, English, Gribble, Jennings, Law, Olson
Research and Scholarship

Workgroup and subgroups led by Dr. Anthony Faiola, CHS Associate Dean for Research and Scholarship

**RESEARCH & SCHOLARSHIP**

*Faiola, Northrup*

**Clinical Research (Intramural & Extramural)**

*Girbble, J. Fry, Long, Malone, Noehren*

**Community-based Research/Instruction (Intramural & Extramural)**

*Carper, Kitzman, Lowman, White*

**Centers/Institutes/Labs**

*C. Fry, Heebner, Meulenbroek, Noehren, Peterson*

**Student Involvement in Research (High school, undergraduate, graduate)**

*Andreatta, Dupont-Versteegden*

**Operations**

*Houlihan, McCarthy, McCauley*
Reinventing OPERATIONS
FACILITIES AND ADMINISTRATIVE UNITS

Introduction

The College of Health Sciences (CHS) facilities workgroup is a vital part of the CHS safe and smart restart process. The workgroup assessed all facilities under the CHS umbrella with respect to the COVID-19 pandemic to assure the well-being of the campus and college communities, with CHS workgroup priorities mirroring those of the university. These facilities include offices and workstations, academic clinic space, academic instruction (both classroom and instructional lab) spaces, conference rooms, and research facilities.

The College of Health Sciences has space in the Charles T. Wethington, Jr. (CTW) building, the Multi-Disciplinary Science Building, and the E.J. Nutter Training Facility on the Lexington campus. We also have two professional programs with distance programs in different parts of the state.

Facilities in Morehead at the Center for Health Education & Research and in Hazard at the UK Center for Excellence in Rural Health are being addressed by those campuses.

The facilities workgroup established the following goals for all CHS facilities:

- Ensure a safe and smart reopening for students, faculty and staff. This includes academic instruction, research, and office work spaces.
- Adhere to all university facility policies by following the guidance provided by the UK facilities workstream team.
- Create a flexible plan that can be adapted as needed in this ever changing, fluid situation.
- Effective communication to all parties about facility updates, requirements, and planning.

CHS workgroup leads met with members of the UK facilities team on multiple occasions via Zoom and in person to discuss overall facility needs and guidelines. A thorough review was made of all CHS spaces, including a physical review with a representative of the UK facilities workstream team. The workgroup assessed signage needs, facility capacity, workstation needs, staffing schedules, sanitation, PPE, and updated administrative office guidelines. A summary of actions taken can be found below.
Signage

During the physical walk through, the workgroup assessed where signage was most needed to help ensure proper traffic flow, reinforce the use of PPE and social distancing, eliminate congregating, communicate areas of the building that will remain closed, and to limit people within the CTW building to those with CHS business.

One way hallways were designated on the second floor to help with traffic flow and to ensure students, faculty and staff do not congregate in public areas. One way doors were also established (as possible) in classrooms and instructional lab spaces.

The workgroup reviewed signage templates provided from the university and worked to create any additional needed items with members of our Creative Services team. Signage was generated and placed accordingly.

Signage was also used to eliminate seating and congregating in public space and to communicate areas that will remain closed through the end of 2020 including the student lounge, faculty and staff break room, hospitality room off of the large conference room, and student locker rooms and showers.

Limited Personnel

The workgroup has surveyed academic and administrative staff to best plan for return to work on campus. CHS will follow the university’s guidelines provided in UK’s Playbook for Reinvented Operations, p. 13, that those that can work remotely will continue to do so.

Those that need to be on campus to perform portions of their job responsibilities will have staggered schedules and help cover for other staff as needed with daily tasks, in accordance with recommendations from the Human Resources Workstream (UK’s Playbook for Reinventing Operations, pp. 144-149).
Updated Facility Capacity

During the physical walk through with the UK facilities representative, updated capacity information for spaces within the Charles T. Wethington, Jr. building for non-centrally scheduled areas were established. Furniture was reconfigured as needed within office spaces, classrooms, instructional labs, conference rooms, academic clinic spaces, and research facilities in order to create the appropriate social distance between individuals.

Diagrams were generated and posted within certain spaces to include updated room capacities and furniture reconfiguration. All updated capacities were communicated to college constituents and posted outside areas as necessary.

<table>
<thead>
<tr>
<th>Room</th>
<th>Room Name</th>
<th>Normal Seat Count</th>
<th>Updated Capacity</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>222</td>
<td>AT Instructional Lab</td>
<td>24</td>
<td>14 plus instructor</td>
<td>Could increase to if high/low tables were removed and new tables could be spread out allowing two students per table</td>
</tr>
<tr>
<td>119</td>
<td>Conference Room</td>
<td>8</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>127</td>
<td>Conference Room</td>
<td>66</td>
<td>30</td>
<td></td>
</tr>
<tr>
<td>205A</td>
<td>Conference Room</td>
<td>14</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>214B</td>
<td>Conference Room</td>
<td>20</td>
<td>8</td>
<td>4 at table, 4 on side of room</td>
</tr>
<tr>
<td>104</td>
<td>CSD Instructional Lab</td>
<td>10</td>
<td>6</td>
<td>2 per table if furniture is reconfigured</td>
</tr>
<tr>
<td>108</td>
<td>CSD Instructional Lab</td>
<td>10</td>
<td>6</td>
<td>2 per table if furniture is reconfigured</td>
</tr>
<tr>
<td>108A</td>
<td>CSD Instructional Lab</td>
<td>3</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>108B</td>
<td>CSD Instructional Lab</td>
<td>3</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>108C</td>
<td>CSD Instructional Lab</td>
<td>10</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>110F</td>
<td>CSD Instructional Lab</td>
<td>15</td>
<td>7</td>
<td>4 on long wall, 1 on each of the three remaining walls</td>
</tr>
<tr>
<td>421</td>
<td>MLS Instructional Lab</td>
<td>18</td>
<td>10 plus instructor</td>
<td></td>
</tr>
<tr>
<td>423</td>
<td>MLS Instructional Lab</td>
<td>18</td>
<td>10 plus instructor</td>
<td>8 students in tall chairs, 2 at low computer work stations</td>
</tr>
<tr>
<td>425</td>
<td>MLS Instructional Lab</td>
<td>20</td>
<td>11 plus instructor</td>
<td></td>
</tr>
<tr>
<td>226</td>
<td>PAS Instructional Lab</td>
<td>48</td>
<td>28 plus instructor</td>
<td>Suggested moving round tables out of space or to the middle of the room so exam tables could be spread out further</td>
</tr>
<tr>
<td>228</td>
<td>PAS Instructional Lab</td>
<td>4</td>
<td>2 in waiting area</td>
<td>remove additional chairs</td>
</tr>
<tr>
<td>228A</td>
<td>PAS Instructional Lab</td>
<td>3</td>
<td>2 per room</td>
<td>Instructor could be present in corner of room if necessary but is not preferred</td>
</tr>
<tr>
<td>228B</td>
<td>PAS Instructional Lab</td>
<td>1</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>228C</td>
<td>PAS Instructional Lab</td>
<td>3</td>
<td>2 per room</td>
<td>Instructor could be present in corner of room if necessary but is not preferred</td>
</tr>
<tr>
<td>228D</td>
<td>PAS Instructional Lab</td>
<td>3</td>
<td>2 per room</td>
<td>Instructor could be present in corner of room if necessary but is not preferred</td>
</tr>
<tr>
<td>230</td>
<td>PAS Instructional Lab</td>
<td>24</td>
<td>14 plus instructor</td>
<td>Could increase to 18 if 2 students were placed at 2 round tables in middle of room</td>
</tr>
<tr>
<td>224</td>
<td>PT Instructional Lab</td>
<td>48</td>
<td>24 plus instructor</td>
<td></td>
</tr>
</tbody>
</table>
CTW conference rooms will be used primarily by CHS faculty, staff and students throughout the fall 2020 semester. CHS academic programs may utilize CTW 127 for classes as needed. This will continue to be monitored through the Outlook reservation system. Conference rooms will be sanitized at the beginning and ending of every day as well after each scheduled event.

**Workstations**

CHS has many workstations that are in open areas. The workgroup assessed all open work stations, academic clinic spaces, and instruction/podiums of non-centrally scheduled classrooms and instructional lab areas for needed updates.

Plexiglass has been installed in many of these areas to create a safer environment for faculty, staff and students. Shared workstations have also been created in units where no more than one staff member will be present at a time. Staff will disinfect the workstation at the start and finish of each working shift. This will allow staff to keep their desktop computers at home to continue increased efficiency.

**Updated Guidelines for CHS Administrative Offices**

The workgroup has asked the leads in the CHS Administrative Offices for updated guidelines for students, faculty and staff to adhere to upon a return to campus. Information is outlined in the appendix.

**Sanitation and Personal Protective Equipment**

Disposable personal protective equipment and sanitation items have been purchased for use in CHS facilities. These will be distributed as needed along with the office cleaning kits provided by the UK facilities team. The university will provide two cloth masks for each student, faculty and staff member. CHS purchased an additional cloth mask for each student and employee within the college. Wearing masks will be required at all times unless you are alone in a room.

Classrooms will be cleaned and sanitized at the end of each day. Sanitation supplies will be available within each classroom for use by students, faculty, and staff as needed between classes.
Screening

The College of Health Sciences will follow the University’s guidelines for screening.

- Students will receive a START kit from the University containing appropriate information, instructions and PPE. The College will also provide all faculty, staff and students with a cloth mask and access to appropriate PPE.
- All faculty, staff and students must do a daily self-assessment for possible symptoms. An updated list of symptoms based on CDC recommendations will be available and posted on campus signage and distributed through other campus communication. Signage with instructions and resources for campus visitors will also be prominently displayed with instructions about how to complete the self-assessment prior to engaging in on-campus university business.
- CHS will utilize the university’s technology-based application for daily symptom checks and self-attestation.
- CHS will follow the university guidelines. Anyone with a positive screen (one or more symptoms) will be instructed to not enter any CHS space and should contact a health care provider for instructions on viral testing, appropriate quarantine, and care.

Testing

The College of Health Sciences will follow the University’s guidelines for testing.

- Viral testing will be conducted on all individuals with symptoms or for those exposed to COVID-19-infected individuals.
- Additional testing for students will be conducted prior to or during the first week of returning to campus using the university’s stated guidelines.
- Additional testing for faculty and staff is encouraged and will be made available using the university’s stated guidelines.
Isolation, PPE, and Social Distancing

CHS will follow the University’s guidelines for PPE and social distancing, including:

- Masks will be required unless individuals are alone in a room, eating, drinking or exercising, or when it interferes with required curricular activities.
- Social distancing practices will be utilized. Specifically, individuals should be at least six feet apart unless required by specific curricular requirements and activities.
- Specific plans for individual rooms, halls and areas will be developed based on area limitations and options. Occupancy in rooms should be guided by overall room capacity.
- Elevators will limit capacity in accordance with recommendations from CDC- or state-issued guidelines. Signage will be utilized to promote social distancing.
- Physical health protection barriers will be utilized to reduce aerosolization spread, where appropriate. Plexiglass will be used in open air workstations and some classrooms.
- Appropriate instructions and information signage will be in place at all appropriate locations.
- Continued remote work options for key services will remain in place when possible.
- Enhanced sanitation of the environment will be conducted, and adequate hand sanitizer will be provided (e.g., alcohol-based hand rubs or handwashing with soap and water, plans for regular disinfection of frequently touched surfaces and common areas).

Contact Tracing and Quarantine

Contact tracing will be performed at the University level. All CHS faculty, staff and students will be expected to participate as needed.
Communications and Marketing

Reopening/public health communications and marketing materials produced and disseminated by the College of Health Sciences will be in accordance with, and follow all guidelines, required by the university. It is our goal to ensure all necessary information is communicated proactively and transparently to students, their families, faculty, staff, and other stakeholders.

We will keep all parties informed of contingency plans should a switch to fully online instruction become necessary.

All communication will be delivered in a timely and effective manner through our website (college and reopening microsite), email (list-servs, e-newsletters, etc.), social media platforms (Facebook, Instagram, Twitter) and canvas shells (when appropriate).

Summary of Tactics

College website and reopening microsite (all audiences)

- We will consistently update the CHS Safe and Smart Restart microsite with college specific reopening information, and university information, as it is made available or is updated during this fluid situation.
- We will ensure all communications direct audiences to the CHS microsite and UK coronavirus/restart website for continuity.

Faculty and Staff Town Halls

- We plan to meet with faculty and staff via zoom webinar format to review restart plans and actions.
- We will answer participant questions in real-time during webinars. Additional questions can be addressed subsequent to the meeting if needed.
- Webinars will be recorded so all faculty and staff have the opportunity to review should they be unable to attend the live presentation.

Regular Email Communication

- We are sending weekly email communications from the Dean to students, faculty, and staff containing updates
Social Media

- We will continue to use social media channels to push updates from the university and college, messages from the Dean, facility updates, public health guidance, etc.
- In collaboration with UK PR, we will help execute the #MaskUpCats and Protect, Respect, Do Your Part social media campaigns to encourage safety on campus and encourage compliance with testing, screening, and public health protocols.

Please see the Appendix (Page 59) for our complete communications plan.

Events

All in person CHS events will either be held virtually or, if held in person, will operate in a way that keeps those attending and the campus community safe and healthy.

All events that involve CHS faculty, staff, students or space must be approved by the CHS Dean’s Office. The Dean’s Office will ensure the event has been approved by the appropriate work streams on campus and/or will ensure that the appropriate guidelines are followed.

CHS will follow all best practices and requirements as outlined by the University, in accordance with UK’s Playbook for Reinvented Operations (pp 102-108):

- Events must adhere to social distancing requirements by maintaining six feet between individuals as requested by CDC. All CHS spaces have been reconfigured in order to meet this requirement.
- Events must adhere to the newly established capacities in each CHS space. New capacities are clearly posted on each space, as well as communicated with event organizers when the space is reserved.
- Event organizers must provide access to COVID-19 prevention supplies and personal protective equipment, such as hand sanitizer, to event staff, participants and attendees.
- Attendees, participants and event staff must follow university policy for face coverings (masks).
• In-person meetings and events should have a virtual component where appropriate to increase accessibility for those who cannot safely attend or do not feel comfortable attending in-person.
• Event organizers should track rsvps to ensure social distancing and avoid capacity concerns.
• Self-service food options should be avoided.
• Event organizers will work with housekeeping to ensure appropriate cleaning and sanitation before and after events.
• Events in CHS spaces will be scheduled to ensure appropriate time for cleaning and sanitation between events.
• Screening requirements for attendees and participation (UK and Non-UK attendees) will adhere to the START plan.

Human Resources

CHS faculty, staff and student workers within the academic and administrative units will start returning to campus no sooner than Aug. 10. Decisions to return positions to on-site work will be approved by unit supervisors, in consultation with the Dean’s Office.

Additionally, we will continuously strive to sustain a productive and positive remote work experience as part of this new norm. Our plans address our distinctive needs and adhere to health and safety guidelines, with consideration for team members in high-risk populations.

Faculty, staff and students who work in research areas will follow the guidance from the Vice President for Research’s Office and will continue to have all Return to Research plans approved. Faculty and staff within clinical areas will continue to follow UKHC guidelines for returning to work.

With the priority of ensuring a safe on-campus work environment for personnel, the facilities work group completed a survey of the building and implemented changes according to the guidelines presented by the University.

The actions of the work group included placing plexiglass in open areas, creating additional signage for the building, and establishing one-way hallways and staircases where possible. More details can be found within the facilities section.

In addition to the changes within the space, the college has purchased a reusable
cloth mask for every faculty, staff and student (in addition to the two provided by the University) as well as a significant supply of disposable PPE and cleaning/sanitizing supplies.

To begin planning for the return to campus, the CHS Dean’s Office conducted a survey of all staff that are employed within the academic and administrative units in the college. The staff employed in clinical and research units are covered under their respective restart plans. The survey asked the following questions:

• How do you feel about returning to the office on campus?
• What concerns do you have about returning to the office on campus?
• Are your work duties essential and need to be completed on campus?
• Are there additional materials, training or equipment that you need to place in order to feel safe in the office?
• Are there any obstacles that need to be solved in order for you to return to the office (health issues, family and/or childcare challenges, etc.)
• Is there anything the college can do to help you currently or during this transition?

The survey data was distributed to each Department Chair, staff supervisor, and the Dean to begin staffing schedule conversations. Our goal was to create a staffing plan that considered efficiency of the unit, effectiveness of staff, health and family considerations and limited the total number of people in the building at one time. We created a plan that considered all of these variables for each staff member as we move forward with reinvented operations. Our staff will all receive the formal notification letter recommended by HR if they are expected to return to campus and we will ensure that any faculty or staff working remotely updates their address in MyUK.

Most of our staff will be coming to campus on a limited basis. The days they come to campus will be consistent and scheduled in a way that limits the number of people in the building and within each specific space. Staff who are working remotely will be available via Zoom, phone, and e-mail during their regular work hours (unless requested/approved time off) unless it is their assigned day in the office or they are on campus for a specific purpose.

The CHS Dean’s Office is working with supervisors and the Office of Technology to ensure that faculty
and staff have access to computers and appropriate work spaces enabling them to be effective both at home and in the office if they have a split schedule.

CHS employees will be expected to follow screening and reporting guidelines established by the university. We will require faculty and staff to wear masks at all times while they are in the building, except when alone in a room. We will follow Employee Relations’ guidance for noncompliance of these guidelines. We will also make arrangements on an individual level if faculty or staff become ill or need to quarantine.
Introduction

A reinvented reopening requires the faculty of each CHS program to review and revise courses offered in Fall 2020, and the student support services and functions necessary to carry out CHS academic-related responsibilities due to COVID-19 implications in accordance with UK’s Playbook for Reinvented Operations (p. 15; pp. 30-53).

The Academic Affairs Workgroup comprises two areas: Academic Course Delivery and Office of Student Affairs Student Services. Workgroup members include each program chair and director, several CHS faculty; the Associate Dean of Academic Affairs; the OSA Director; OSA academic advisors, recruiter, and admissions; and compliance and registration professional staff along with the student peer mentor coordinator.

The following executive summary highlights primary goals and key strategies to meet the outcomes related to Academic Course Delivery outlined as:

1. CHS Student Academic Course Experience
2. Student Organizations and Co-curricular Programming
3. Faculty Experience

Those related to the Office of Student Affairs are outlined as:

1. Overall Operations
2. Student Advising and Support Services
3. Recruitment
4. Admission, Registration, and Compliance

Academic Course Delivery

CHS academic programs consist of a variety of course formats including didactic (lecture: distance learning and face-to-face), seminars, and clinical/lab/practicum course components.

Several programs are accredited:

- Athletic Training - graduate program
- Communication Sciences and Disorders - graduate program
- Medical Laboratory Sciences - undergraduate program
- Physician Assistant Studies - graduate program
- Doctorate of Physical Therapy - professional program
All teach to standards, competencies and other requirements associated with their accrediting bodies.

Course re- visioning is occurring within the context of the overall curriculum, in relation to course and program outcomes, and responsibilities to accrediting agencies and students to prepare them to progress successfully through their program of study.

Course delivery modes and class size categories described in UK’s Playbook for Reinvented Operations (pp. 46-47) provided guidance for this effort. Course delivery by program will be detailed once delivery modes are finalized and course development complete.

Primary goals and key strategies associated with this work are:

**CHS Student Academic Experience**

1. *Determine and implement the course delivery method that best meets the outcomes of each course/program and engages students in active and applied learning within the context of COVID-19 health and safety parameters for safe, flexible instruction.*

Program chairs and directors worked with their respective faculty to assess each course to determine the recommended required or preferred delivery format to effectively address course and program outcomes and engage students in a meaningful and productive way. Faculty consulted the Flexible Instructional Strategies for Fall 2020 to inform their decision-making.

Course specific details were submitted to the Provost’s Office and Enrollment Management on June 29, 2020.

Additional information regarding courses requesting alternative meeting modes and those offered as part-of-term was submitted on July 17, 2020. This work is being coordinated at the college level and completed within each department and program with opportunities for involvement of all faculty.

Develop course content and activities in alignment with the UK approved delivery method.
2. *Develop course content and activities in alignment with the UK approved delivery method.*

Faculty are adapting their courses for the fall and will continue this course development in accordance with approved delivery modes once confirmed, focusing on the following:

- Leveraging technology, virtual platforms, and developing innovative assignments and activities to:
  - Create opportunities for virtual and face-to-face engagement of students and participation in active learning activities to meet course outcomes, using campus resources (e.g., Reference Guide for the Continuity of Instruction).
  - Create access to face-to-face portions of classes for students who need to participate remotely due to implications of COVID-19. (See Appendix for CELT’s Quick Tips for Continuity of Learning)
- Preparing courses for the potential of a pivot to remote teaching of face-to-face class components if campus-wide remote teaching is required.
  - Identify means through which outcomes and material can be delivered synchronously or asynchronously during course planning to assist with smooth transition to remote delivery if required.
  - Identify those courses for which exceptions need to be submitted for permission to continue place-based teaching in the event of a shift to remote delivery to achieve course outcomes and continue student progression to degree (e.g., clinical education, laboratory).
- Determining means through which instructors will communicate and engage with students.
  - Establish published and consistent virtual office hours and/or group chats.
  - Arrange for intentional check-ins with students (through Canvas, class activities, or otherwise).
  - Communicate clearly to students via Canvas and course syllabi how they arrange for individual meeting times.
- Reviewing assessment of student work to determine if modifications are needed.
  - Revise those assignments and activities impacted by delivery mode change to ensure effectiveness (e.g., moved from a face-to-face mode to virtual completion).
  - Determine needs for proctoring of exams or otherwise safeguarding academic integrity of student assessments conducted remotely.
3. **Review and adjust course/program logistics and policies related to implications of COVID-19.**
   - All program curricula and Fall 2020 course offerings were reviewed in light of the modified semester calendar to identify courses for which a nonstandard calendar needed to be requested to ensure student progression. Exception requests were submitted to the Provost Office and University Senate for CSD (graduate program), PAS (clinical year students), and DPT. Final approval was received on July 20, 2020.
   - Integrate University policies related to COVID-19 safety precautions, screening-testing expectations, facility modifications, and relevant Senate course policies into course syllabi, classroom procedures, and course/student behavior expectations. University Senate COVID-19 Syllabi Policies and other policies developed and received from central units to be disseminated to faculty for syllabi inclusion.

4. **Arrange a back-up instructor/plan for every Fall 2020 course in the event the assigned instructor is unable to teach due to illness or quarantine.**

**Athletic Training**

Athletic Training faculty will be teaching courses in three different programs this fall:

1. Professional masters in AT,
2. Post-Professional masters in AT,
3. Graduate Certificate in Musculoskeletal Management.

These include lecture, lecture/lab, seminar and independent study courses. All courses have some in-person instruction but should remote teaching be required, they plan to request that some lab-based instruction be retained face-to-face. In the event of a faculty illness, AT faculty agreed that any other AT faculty could provide back-up didactic and laboratory teaching needs to any of the courses. This may involve more than one faculty stepping in. There are also four doctoral students working with AT faculty who are certified Athletic Trainers who could provide guest lecturing in didactic or laboratory components of the courses, if this plan would also support the learning and professional development needs of the doctoral students.
Clinical Nutrition

Clinical Nutrition faculty will teach courses in the Masters of Nutritional Sciences through the College of Medicine and some courses that are offered to CHS students. These courses include lecture, lecture/lab, seminar and independent study. CNU faculty agreed that all faculty would be able to provide back-up didactic and laboratory teaching needs to any of the courses, which at times could be carried out as a teaching team. Additional resources include a .5 FTE doctoral student assigned to CNU and College of Medicine faculty colleagues who would also be able to provide supplementary instruction if needed.

Clinical Leadership and Management & Human Health Sciences

Each Clinical Leadership & Management and Human Health Sciences course instructor will have a designated faculty member added to their Canvas Shell as a co-instructor. That back-up faculty member will have access to course materials on an ongoing basis and will be able to step in to facilitate the distance learning components of the course if need be. Face-to-face instruction needs of any course will be directed to the program director who will work with faculty (and designated co-instructor faculty) to meet instruction needs in accordance with availability and expertise required.

Communication Sciences and Disorders

Communication Sciences & Disorders faculty have met and assigned specific back-up instructors for courses offered during the Fall 2020 semester. Each course has an organizational template that serves to ground a back-up instructor in carrying out the course if the need arises. The template includes course logistics, course delivery strategy for synchronous delivery, in-person enrichment experiences, assessment plans and an articulation of how course activities align to course objectives. Details about office hours, communications with students and safety precautions/policies are also included.

Medical Laboratory Science

Medical Laboratory Science labs are staffed with multiple instructors so if one is quarantined others can fill in. There are multiple lab courses (MLS400, MLS465, MLS466 and MLS 420) so additional faculty may be needed to carry out these labs if current faculty drop below two per course. Lecture courses are all being taught remotely and can continue in light of an instructor illness. Lectures are recorded from previous semesters which can be used as a back-up if needed. MLS 470 (capstone and GCCR) is hybrid and the majority of work completed on-line. It is team-taught and instruction can be re-distributed if one faculty falls ill.
**Physician Assistant Studies**

All of the Physician Assistant Studies lectures are being simulcast via Zoom to our Morehead campus. They are also available to any students who cannot come to a face-to-face class for any reason. If a faculty/course director cannot deliver a lecture(s) or cannot serve as course director due to illness (or other reasons), one of the other PAS faculty will step in. Faculty are aligned with didactic and/or clinical years and approach delivery of the curriculum as a team.

**Physical Therapy**

All the Physical Therapy program didactic material is taught over ITV. Usual practice is to teach from the classroom which will simultaneously broadcast via Zoom to Hazard (or from Hazard to Lexington). About half of our Lexington-based students will attend via Zoom while classroom attendance is limited during the Fall 2020 semester. Faculty responsible for these classes can teach from the classroom or via Zoom from their homes if unable to come to the classroom or can pre-record lectures and post on Canvas. Each course has a back-up instructor assigned in the event of assigned faculty illness and unavailability to work from home. Hands-on clinical skills taught in labs are always taught by a team of two faculty who can cover for each other if needed. A group of community Physical Therapists who help with the labs when help is needed can be called on if more help is required.

**Rehabilitation Sciences PhD Program**

Courses offered in the Rehabilitation Sciences Doctoral program are team taught with 2-3 instructors assigned to each course. In the event that one instructor falls ill, the other instructors can continue with the course. If there is an identified instruction gap, the assigned instructor will contact the RHB program director to plan for teaching needs.

**Student Organizations and Co-curricular Programming**

Continuation of student organization and co-curricular activities is essential during this time of uncertainty in order to promote belongingness and build community among students. CHS connected student associations are in various stages of preparing for the upcoming semester and including virtual means for participation. Co-curricular offerings are also being planned while keeping a dual delivery mode in mind.
• Student organization faculty and staff advisors will assist student organization leadership with planning activities to engage students during the Fall 2020 semester virtually and face to face (in accordance with university, state, and CDC recommendations) in alignment with the purpose of the organization.

• Co-curricular offerings developed by OSA or facilitated by program faculty and staff will need to be reviewed to determine if they need to be amended to minimize student risk (e.g., student success series, orientations, special interest programming, service activities). Whenever possible the option for students to participate remotely will be put in place for face-to-face activities to increase access.

Faculty and Staff Experience

The course modifications required in Fall 2020 to provide a safe, engaged, residential and accessible academic experience for students will at times require faculty to conceptualize their courses differently, utilize technology and methods new to them, as well as potentially change their delivery mode if COVID-19 circumstances require this.

The need to provide for faculty opportunities to explore innovative instruction options, receive training in technology and new modalities, as well as experiences in a more intentional support structure around course delivery are recognized.

The safety of all in our campus community is paramount. Faculty and staff have expressed a unanimous need to receive clear protocol details and directives and other information needed to conduct their teaching with safety and precaution. Faculty and staff are also meeting these responsibilities while managing the uncertainty of our current circumstances and family needs associated with the COVID-19 pandemic. We will:

1. Establish support mechanisms for part-time instructors and teaching assistants to manage the fluidity of the semester and its impact on class planning and delivery at the department and/or program level with support and/or coordination at the College level.

2. Support faculty and staff to maintain well-being and work-life balance in light of COVID-19 induced stress and additional responsibilities (e.g., on-line schooling for children, child-care needs, family caregiving, personal wellness/mental health).
3. Conduct dynamic assessment for professional development needs of faculty (full-time, part-time, TAs) to address targeted technology and pedagogical training and other support requests

Examples:
   i. Conduct college and department level needs assessments
   ii. Apply CELT created Quality Design Checklist when creating on-line course components
   iii. Assess student and faculty experience of the course mid-point in the semester or at other pivotal points

4. Conduct dynamic assessment for professional development needs of faculty (full-time, part-time, TAs) to address targeted technology and pedagogical training and other support requests

Examples:
   i. Utilize web-based CELT materials.
   ii. Encourage participation in teaching seminars/trainings (e.g., Fast-Track Your Summer 2020 Courses)
   iii. Share other teaching resources and create virtual forums within departments or at College-level to discuss teaching challenges or innovations (See UK’s Playbook for Reinvented Operations, pp. 50-52)

CHS Office of Student Affairs

Overview of Operations

The Office of Student Affairs has reviewed their operating procedures to make adjustments that allow them to remain responsive and accessible to our students, CHS colleagues, and campus partners, and adhere to CDC guidelines and social distancing protocols.

CHS Office of Student Affairs (OSA) staff will be primarily operating remotely with dual-mode service for provision of student support (UK’s Playbook for Reinvented Operations, p. 164) while also maintaining a physical presence in the office during normal business operating hours, COVID-19 conditions permitting.

The OSA has organized a weekly assigned “day-in the office” staff schedule that places one to two staff in the office to complete work that requires an on-campus
presence and delivery of student requested face-to-face appointments. The OSA Director will coordinate this schedule, which can be flexed according to unit needs. On days during which no on-campus presence is required, staff will be monitoring the call bell system should any students arrive at the office so that they get an immediate response.

When planning on campus time, OSA staff will regularly communicate within the team to ensure no more than three members of the unit staff are present in the office simultaneously, thus limiting the number of people within the area at any time and ensuring distancing and other safety protocols remain effective. Each OSA team member is assigned a day. Days can flex among staff to meet student and unit needs. Campus office space will be used within safety guidelines and parameters whenever tasks or appointments are to be conducted face-to-face as requested by the student rather than via remote delivery. The OSA staff will comply with university guidelines and use face coverings, masks, social distancing, and hygiene and require office visitors do the same for any pre-scheduled face-to-face visits. See the Appendix for more details regarding University face to face advising protocol recommendations.

In order to ensure our ability to maintain social distancing and carry out planned operations, we will implement a gate-keeping protocol to manage unplanned access to the OSA Office and keep foot traffic to a minimum.

The OSA doors will be locked and access to the office available only by appointment. The OSA staff contact information and details of standard operating procedures will be clearly posted on the main OSA door to ensure anyone who needs to reach an OSA staff member will have the direct email address and phone number to make contact. Signage on the office door will provide a phone number and email contact for visitors to access OSA should they arrive at the unit without a scheduled appointment. We are also installing a ring bell system so that visitors can notify OSA staff of their arrival. Scheduled visitors will access the unit upon arrival by calling the staff person providing service or through the use of an installed doorbell/alert technology to ensure visitors are greeted immediately upon entry.

In addition, all staff members will continue to operate remotely to reduce unnecessary exposure to themselves and others, and for maximum availability to students and colleagues via virtual connection. All staff will be available via Zoom, phone, and e-mail during their regular work hours (unless requested/approved time off) and will be working remotely from home unless it is their assigned day in the office or they are on campus for a specific purpose. All office phone lines will continue to be forwarded and information on college web pages updated regularly to ensure uninterrupted service to all who are in need.
Shared e-mails for

- CHS-StudentAffairs@uky.edu,
- CHS-Compliance@uky.edu,
- CHS-Registration@uky.edu,
- CHS-Admissions@uky.edu, and
- CHS-Recruitment@uky.edu

are available to ensure a team approach is maintained and issues/concerns are addressed expeditiously.

**Student Advising and Support Services**

Students will continue to be able to connect with OSA to obtain academic advising, other support, and referrals to campus resources, consistent with recommendations described in the Student Success section of *UK’s Playbook for Reinvented Operations* (pp. 163-167). The OSA is planning on offering dual-mode service delivery of academic advising services. Students will self-schedule advising appointments via the website and be able to select a remote or face-to-face meeting option, the latter being available on a limited basis and arranged in accordance with university, state and CDC guidelines to ensure safety while also assisting with student needs. Should a student wish to have a face-to-face appointment when a CHS advisor is not available in the office, the student will be directed to Transformative Learning to the Academic Coaching team and the academic advisor will follow-up.

Should students elect to meet with their advisors remotely, these contacts will be arranged primarily using Zoom but will also utilize email and phone calls. Advisors have established their own internal procedures including virtual advising hours, appointment scheduling confirmations to connect for Zoom video conferencing, and regular and active use of Microsoft Teams. Sanitation and precaution protocols will be employed when campus-based appointments or tasks are necessary. A Canvas shell is used to communicate to the student body on a regular basis. The OSA website will be kept current to reflect current procedures and access pathways, as well as include links to University level student resources.

As always, OSA remains dedicated to being accessible, efficient, and maintaining the highest quality service to students and those who interface with student issues.
Admissions, Registration, and Compliance

Admissions, registration, and compliance services are provided by the Office of Student Affairs. A restart plan addressing these services require OSA to determine formats needed for safe delivery of:

1. Admissions logistics, including but not limited to: student file and records management for applicants, answering queries, monitoring confirmations and fees paid for admitted applicants.
2. Technical standards orientation activities and materials.
3. Registration and compliance services, including but not limited to CastleBranch (student compliance) support, course scheduling and edits, and student records updates and management.

Admissions

All admissions related logistics services supported by OSA and carried out in collaboration with CHS faculty are planned for remote delivery using Zoom, e-mail, shared files/databases and/or phone as needed. Admissions functions are carried out using a faculty-staff team approach that includes OSA, faculty program directors, analytics, and the Associate Dean of Academic Affairs. The team coordinates all activities with Central Administration’s Enrollment Management team. OSA staff will complete those admissions related tasks requiring an office presence on their assigned day in the office in order to ensure student applicant files are completed accurately and efficiently. The CHS Admissions Team maintains a One Note record accessible to all that provides a central hub for communications and decisions that are admissions related. This method of managing admissions has been in operation since March 2020 and has been effective.

Technical Standards

Technical Standards orientation will be delivered to students via Zoom with synchronous and asynchronous components; synchronous meetings will be recorded for those who are absent and need to make-up the session (facilitated and moderated by Rebecca Serrano). Rebecca Serrano has enrolled all students in a Canvas shell to navigate needed materials with module-based tasks for asynchronous completion ahead of a synchronous meeting being held August 13 from 9:00-11:00 am that will be recorded for any students who have conflicts during that time.

Registration and Compliance

All registration and compliance related services are planned to be communicated with students remotely via Zoom, e-mail, and/or phone as needed (facilitated by Tammy Jo
Recruitment/prospective student visits

The CHS recruiter works with central administration on recruitment and prospective student visit activities. A goal in this restart effort is to determine the format needed for safe delivery of recruitment activities, including but not limited to: student/family individual visits, CHS Visit Days, and academic program interest/information sessions, consistent with recommendations found in *UK’s Playbook for Reinventing Operations* “Prospective Students” (pp. 160-162).

The above described plan for OSA operations provides guidance for CHS recruitment activity contacts, with the preferred method of contact being remote to avoid the necessity of prospective students and their families to travel. Planned individual family visits and prospective student sessions will be scheduled to connect via Zoom, phone, and/or e-mail based on student needs (facilitated by Will Bickers). The CHS Recruiter and/or CHS Student Ambassadors will facilitate meetings with prospective students using cloud-based documentation to track
visit requests and accommodate appropriately. CHS Visit Days and interest/information sessions will be delivered via Zoom live stream and recorded to share with those who may have a conflict and cannot attend but would like access to the information.

If there is a specific need for face-to-face meeting and remote/online cannot be arranged, those meetings will be planned and facilitated by CHS Recruiter (Will Bickers). CHS Student Ambassadors will attend as needed and will be available remotely. The CHS Recruiter will communicate with the OSA Director any plans to visit campus and provide recruitment related services with prospective students and families in the Office of Student Affairs so that OSA can adjust the day’s activities and ensure implementation of COVID-19 safety protocols (e.g., ensure social distancing, wearing masks, limited personnel in the office to the appropriate number, and operating behind placed plexiglass).
Clinical Practice

Introduction

This work group worked largely in parallel, rather than together, although appropriate consultation was done between and among groups. For example, when the Communication Sciences & Disorders Academic Clinic pivoted to all telehealth for the summer, documents already vetted by UK’s Legal Office for Telehealth at UK Pediatric Therapies were used. Likewise, many of the face to face (f2f) policies developed for UK Pediatric Therapies with input from the Infection Prevention and Control Office (IPAC), Legal Office, and Risk Management were incorporated into the Academic Clinic plans to resume f2f this fall. Resumption of the Multidisciplinary Autism Assessment Clinic (MAAC) was done with full input from both the Academic Clinic (whose space the clinic uses) and UK Pediatric Therapies (the therapists serve the clinic along with Department of Pediatrics staff), and was vetted through both UKHC and the EOC. The Voice and Swallow Clinic followed the UKHC Re-start phased plan, with specific attention to the PPE and safety concerns related to the procedures considered invasive and aerosol producing.

Goal: Safe resumption of Clinical Practice in CHS CSD Academic Clinic, UK Pediatric Therapies at CDCB, Multidisciplinary Autism Assessment Clinic (MAAC) and UK Voice and Swallow Clinic

CSD Academic Clinic

The CSD Academic Clinic pivoted to telepractice only through the end of summer. Learners were accommodated in other ways and the summer “camp” pivoted to a telepractice model with approvals of family marketing and permissions vetted through UK Legal.

The Academic Clinic is planning for a hybrid model of telepractice and face to face (f2f) in the fall. Procedures are in development following facilities walk-through with the CHS Facilities Workgroup; consideration of UK Pediatric Therapies guidelines (which were thoroughly vetted through Legal, Infection Prevention and Control, Risk Management, and the Privacy Officer); and consultation with Chair, faculty, and the CHS Associate Dean for Faculty Advancement and Clinical Engagement.
UK Pediatric Therapies at CDCB

All face to face therapies were suspended by the Governor on March 19. The team pivoted quickly to telepractice (they had been preparing already) and developed home programs for families who preferred to wait. At that time, First Steps suspended services for all providers and would not permit telepractice. Tele-visits were gradually increased in Mid-May and UK Pediatric Therapies began phasing in f2f visits once permitted by the Governor. This plan was vetted through Legal, Infection Prevention and Control, Risk Management, and the Privacy Officer.

They also formalized the plan for interpreter services for all different modes. On June 15, a modified f2f Plan was implemented to remain safe as CDCB re-opened as a Child Care Center. On June 22, First Steps implemented a return to service using telehealth as the only permitted modality.

Currently, therapy services are balanced between f2f and telepractice based on needs of individual children and safety for staff.

MAAC

MAAC resumed outpatient clinic in cooperation with the UKHC Department of Pediatrics and Division of Developmental Pediatrics in late June. The clinic is run in CTW 110—Academic Clinic—and includes staff therapists from our CHS UK Pediatric Therapies team. Their plan was vetted and approved through UKHC and through EOC.

The Voice and Swallow Clinic

The Voice and Swallow Clinic suspended all outpatient procedures except for emergent cases (TEP changes, emergent swallowing issues) mid-March per the Governor’s order. On March 25, their team developed a strategic plan with specific guidelines in cooperation with the ENT Clinical Medical Director to resume care considered urgent.

The plan meets all UKHC requirements and also some additional safety measures for our staff. Staff transitioned on a limited basis to telepractice for outpatient services, and transitioned back to increased f2f care (including staffing ENT and Markey Clinics and performing swallow studies) according to the UKHC re-start plan.

All clinical re-start plans referenced in this section are on file with the CHS Dean’s Office and are available for review upon request.
Challenges and Next Steps

This is clearly an area that will need to be nimble in adapting to changes necessitated by COVID-19 decisions at the State and UKHC levels. We have the teams in place and good cooperation from UKHC to adapt with reasonable speed.

- The Academic Clinic will need additional part-time instructors to serve as supervisors for graduate students. This has been requested. Increased amount of PPE will be needed as the usage will be higher than in a typical semester.
- UK Pediatric Therapies will require an increased amount of PPE and cleaning supplies will be needed as the usage will be higher than in a typical semester. Productivity of staff and clinicians is undetermined given updated cleaning and safety requirements (much as in all clinical encounters).
- The MAAC clinicians that travel from UK Pediatric Therapies for the three half-day clinics are not given options for parking closer to campus. They continue to walk the long distance instead of utilizing bus transportation because of risk concerns. We currently have a parking validation stamp for approved campus visitors and would request an exception to allow one car on the three half days of MAAC clinic for use by off-site clinicians to alleviate concerns and transportation issues.
- The Voice & Swallow Clinic will require an increased amount of PPE and cleaning supplies will be needed as the usage will be higher than in a typical semester. Productivity of staff and clinicians is undetermined given updated cleaning and safety requirements (much as in all clinical encounters).
Clinical Placements

Introduction
This work group is a sub group of a team already working on Clinical Placements, so we pivoted to COVID-19 issues as a progression of earlier work. After identifying that UK HealthCare had placed a hold on almost all student learners with an indefinite re-start date, we met with their team to devise the plan that is now being used throughout the Academic Medical Center. This includes a student attestation, a screening process, and various policies that comply with CDC and UKHC recommendations. This enabled our students to return for summer and fall experiences. As other clinical partners have provided their requirements for students to return, we shared the information and developed statements that will ultimately be included in syllabi. These have been vetted with the Legal Office when specific statements have been required. Each Clinical Coordinator has been working with their contacts within and outside UK to place students.

Significant uncertainty remains as the pandemic evolves. Clinical partners are sometimes required to restrict students, even at the last minute, based on real time decisions in their region and their facility. Established relationships have proven to be essential to solving these last-minute occurrences, and the possibility of future unanticipated cancellations is very real. Another remaining issue is obtaining COVID-19 testing for students when sites require them prior to start dates of particular rotations.

Goal: Work closely among all programs with clinical placement requirements and all of our community partners to effectuate resumption of clinical experiences that meet the needs of our academic programs. Requirements linked to accreditation are prioritized, but other program needs are included. The plans and strategies that follow are consistent with recommendations made by the Community Partners Workstream regarding clinical education as described in UK’s Playbook for Reinvented Operations (pp. 71-73).

Summary of challenges and next steps
Essentially all students were recalled from clinical rotations mid-March as such rotations were cancelled by the university. Programs pivoted to alternative means when possible to meet requirements and keep students on track for graduation. Each considered their own accrediting body guidelines and these actually changed over time.

Physical Therapy was able to resume a limited number of clinical placements based on
Almost all students in all programs will graduate on time. We began working with UKHC, which can be a major provider of sites for several of our programs but had put a hard stop on learners. An agreement was reached for a resumption plan in early July. Requirements include an attestation, a screening process (they prefer the UKHC app), and following all UKHC policies. Each Clinical Coordinator worked with their clinical contacts to understand and respond to any site-specific requirements.

Such requirements are shared with the group. Some require enhanced COVID-19 testing and essentially all require screening. Castle Branch offers a screening app that several sites are requiring. It is free through the end of calendar 2020, but will likely involve cost to the student moving forward.

With the exception of PAS, all expected needs for the fall semester have been met for now (with the knowledge that as state regulations may change, clinical site availability may change). PAS continues to seek clinical sites to meet their needs, both in the community and through UKHC.

Unresolved items/challenges

- Unknown cost of Castle Branch module for students beginning in January 2021
- COVID-19 screening and testing for students on clinical rotations will need to be addressed – both for local students and for students on out-of-state rotations- in accordance with procedures outlined in UK’s Playbook for Reinvented Operations, (pp. 7-12).
- Working to develop syllabus language to address notification issues. Clinical sites are requiring information
- The university has determined that clinical contracts do not have be amended at this time.
  - UK Contracting office will be collecting information regarding new requirements received from clinical sites, to be prepared for contract addenda if they become necessary.
- Likely will be a need for contingency plans as rules in various clinical sites are likely to change as the pandemic changes

Other needs include language for syllabi that must be vetted through ADAA and the legal office and PAS preceptor development.
Appointment, Promotion, and Tenure

Introduction
The Appointment, Promotion & Tenure Work Group met with a goal of assuring ongoing support to all faculty throughout the academic life course. We recognized this as an opportunity to consider the impact of COVID-19 and the potential impact of systemic injustice; from initial on-boarding, through distribution of effort development, ongoing assessment in the tripartite mission of instruction, scholarship, and service, and ultimately the tenure and promotion processes. Specific recommendations are included to mitigate anticipated challenges.

Goal: Assure ongoing support to all faculty throughout the academic life course

All new faculty are invited to the university orientation scheduled by the Provost office on August 13. The college orientation will be scheduled as 1:1 meetings given the uniqueness of each new faculty position and will be completed during the month of August.

Faculty mentors have been asked to reach out to their mentees and the Associate Dean for Faculty Advancement has periodic meetings with faculty. Chairs have met with all faculty, most recently in relationship to distribution of effort development.

We are moving forward with scheduled two and four year reviews. No regular promotion and tenure (P&T) is scheduled and all requests for off cycle P&T as well as promotions are due Aug. 1. The P&T Meeting will be offered via Zoom and is required for all NEW faculty in tenure track lines and is recommended as a refresher for others.

All tenure track faculty will be reminded of the opportunity to request a tenure clock extension. Planned email to CHS faculty Aug. 3 with fillable accept or decline form to be returned by Aug. 30. Extensions will be processed by the Office of Faculty Advancement (OFA) by the September deadline.

Unresolved items/challenges

- Recognition of challenges to faculty assessment. In all cases, changes related to impact of COVID-19 should be carefully documented.
- Need to adopt and convey the clear message that we understand the different
dynamics that may impact faculty progress in P&T. In light of both COVID-19 and greater recognition of the potential impact of social injustice, all reviewers, including members of the APT Committee, must reframe and broaden the lens through which we are conducting dossier reviews. The CHS OFA plans to seek input from University Office of Faculty Affairs, Office of Institutional Diversity, and Provost to address this as soon as possible.

- Any unplanned changes to distribution of effort (DOE) necessitated by real-time needs to support instruction and/or scholarship will be done with careful attention to impact on P&T. Such changes should be done with input from faculty, department chair, and relevant college leadership and will be thoroughly documented for inclusion in faculty performance reviews and others as needed.

- Need to mitigate potential differences in assessment of instruction. This includes specific indication on all teacher course evaluations (TCE) reports/summaries noting COVID-19 adjustments to instruction.

- Complete at least one (or more) peer review of each course per semester for non-tenured faculty (including Tenure Track and Lecturer positions).

- Develop or obtain a standardized assessment tool which may be supplemented as desired by academic departments and programs. Our goal is to have this available by mid-September.

- Recommend periodic check-ins with students for formative feedback by the UK Center for Enhancement of Teaching and Learning (CELT) or by faculty member.

- Recommend attention to self-assessment in Teaching Portfolios each year.
Perform advisor evaluations for those faculty who serve as academic advisors to students (this is different than research advisors). This will allow consideration of this important, but often overlooked component of instruction and should be accomplished by the end of the 2020-2021 academic year.

Need to mitigate potential challenges in research and scholarship and related evaluation. This will require collaboration with the CHS Associate Dean for Research and Scholarship, department chairs and faculty mentor for each junior faculty member to determine the most appropriate ongoing schedule of meetings for support. (Such meetings may be appropriate for others as well, but should be required at established frequency for tenure track faculty.)

Need to mitigate potential challenges in service and related evaluation. In light of priority needs to support Department, College and University service, consideration should be given to the need to balance service to their profession along with the community as a component of P&T.

New resource needs include educational resources related to dossier review, standardized peer review forms (which can be supplemented as desired), and advisor evaluations from all departments.

The committee recognized and recommended this as an opportunity to discuss dossier review practices throughout the College.

**Distribution of Effort (DOE)**

**Introduction**

Following a collective recalibrating of the timeline for distribution of effort preparation, Chairs met with individual faculty and first drafts were submitted for review in the Office of Faculty Advancement. Suggestions were conveyed to Chairs for reconsideration with faculty based on current state expectations about the coming year. There was agreement that these represent a current “best guess” but that changes may be needed as the year progresses. Proposed DOEs are poised for the next step of review by the Dean, then the internal UK process should be completed by the University deadline.

**Goal:** Develop reasonable expectations for effort allocation for Academic 2020-2021 despite unknowns
CHS delayed initiation of the DOE process until June 12 to allow more time for department chairs and faculty to consider efforts while still meeting university requirements for the process to be completed in September. An email that included Guidelines for Completion and an adjusted timeline was distributed to department chairs that was to be forwarded to their faculty on June 12. The DOE worksheets were corrected from last year and sent to all faculty as a working template. Chairs worked with faculty on DOE expectations and with ADFA for any needed adjustments and considerations prior to review with the Dean.

Unresolved items/challenges

With the rapidly evolving and fluid situation, DOEs are a best guess and may need to be adapted throughout the academic year. Any unplanned changes to faculty DOE necessitated by real-time needs to support instruction and/or scholarship will be done with careful attention to impact on P&T. Such changes should be completed with input from faculty, department chair, ADFA, and the Dean and will be thoroughly documented for inclusion in FPRs and other reviews.

Practice Plan

Introduction

This work group addressed both a pending issue with the CHS Practice Plan Committee and specific issues related to Practice Plan in light of COVID-19. Specific recommendations included that the CHS promptly vote on the members to form a Practice Plan Committee, and to consider the relative driving and restraining forces of our current plan. Specific to Safe Re-start, there was agreement that clinical practice while following CDC guidelines involves risks that are similar to risks for other activities, so no additional contingency plans are required. If clinical practice is within a faculty member’s DOE and the individual is not able to practice in the selected environment, the effort should be redistributed to other activities to benefit the Department.

Goal: Resolve Practice Plan Addendum issues and consider COVID-related implications for faculty in Practice Plan

It is very important an election for a Practice Plan Committee be held as soon as possible so that issues related to AR 3.14 can be resolved, and a proposed CHS Addendum can be submitted for Senate approval.
With respect to faculty currently in Practice Plan, we believe the risk for exposure to COVID-19 is similar to the risk for other activities, so no different teaching contingency plan would need to be developed beyond what other faculty will be developing. Faculty who have clinical practice within their DOEs, but are not able to practice due to constraints of the clinical environment itself, should negotiate with their Chair to determine how this time should be utilized to support the Department and whether DOE revision is needed (depending upon expected duration of practice interruption).

The Practice Plan Committee, once formed, should be encouraged to consider the relative driving and restraining forces and identify potential opportunities for improvement in the Plan (ie: force field analysis). The Legal office still has not resolved issues related to the Addendum and Faculty Handbook.
Introduction

The Office of Research and Scholarship (ORS) oversight of the Research Safe Restart Committee delineated seven common goals for a safe return to research activities for faculty and students within the College of Health Sciences (CHS) and in collaboration with our University colleagues and community-based partners.

Our effort is consistent with that of the Office of the Vice President of Research’s Resumption of Research Phased Plan currently being implemented.

The Office of the Vice President for Research (VPR) has provided both the leadership and the infrastructure to facilitate the continuation of essential research and a safe return to on-campus research through a phased process.

In Phase I – Essential On-Campus Research, seven CHS investigators submitted detailed plans to the CHS Office of Research and Scholarship (ORS) and to the VPR so essential research-related work could continue without interruption.

While activities on campus were significantly curtailed, investigators ensured animal colonies were protected and maximized, clinical subjects received critical interventions, and research equipment and facilities were maintained.

On May 29, 2020, the VPR’s Office released the UK’s Resumption of Research Phased Plan that delineated the requirements for a phased return to research.

In Phase 1, only essential and critical capacity activities (15-20%) were allowed. In Phase II, the VPR increased access to 50% of previous research capacity if studies met clearly delineated criteria and investigators submitted a detailed plan for a safe return. Sixteen CHS investigators have approved Phase II Return to Research Plans currently. While specific dates have not yet been released and is wholly dependent upon public health conditions, Phase III will increase research capacity up to 70%, and Phase IV will be a return to full research operations.
During Phases I and II, CHS investigators expressed an urgent need for PPE, specifically sanitizing wipes and hand sanitizer. In collaboration with the Dean’s Office, we provided investigators with the needed PPE and have a robust supply stored in ORS for the weeks to come. Additionally, CHS investigators needed and will continue to need access to COVID-19 testing for participants who will undergo biopsies or other high-contact services within CCTS.

Dr. Brian Noehren led the effort to secure testing for participants in his study and has offered his work as a template for the college. Doug Long has agreed to serve as the college’s point person to monitor and communicate the changing guidance, and ORS has agreed to cover the costs of necessary testing. In Phase III, we anticipate a need for additional technology/software subscriptions as more research personnel return to campus and work remotely.

Next Steps

In June, CHS convened a series of work groups to begin planning a return to campus, including the Research Safe Restart Workgroup.

This workgroup formed four committees, including

1. Centers and Institutes,
2. Clinical Research,
3. Community-based Research, and
4. Students’ Return to Research.

The workgroup summary is below.

The four phase approach is summarized in the UK Playbook for Reinventing Operations, p. 186.

Goals

1. Ensure consistent availability of PPE (masks, gloves, hand sanitizer, disinfectant spray and wipes) for researchers (faculty and students), staff and research subjects.

2. Provide adequate computer access for research personnel working both on campus and remotely throughout a phased return.
3. Facilitate COVID-19 testing for research subjects who meet the UK CCTS threshold for testing (e.g. vulnerable populations, undergoing muscle biopsies, etc.).

4. Assure that all equipment used for research (including shared computers) have online sign up systems to reserve use.

5. Establish consistent guidelines for safe and effective practices for researchers across disciplines and facilities within CHS.

6. Monitor community-based partners’ public health measures to determine when a safe return to research is possible.

7. Ensure mentoring faculty have fully developed research plans including lockdown contingencies and shared their plans with students.

Summary of Plans and Completed Actions

ORS worked with individual investigators, the Dean, and the UK Vice President of Research (VPR) to approve Phase 2-4 Safe Return to Research plans. These plans are specific to each faculty member’s lab, research studies, and participating research students—and are on file with the UK VPR as required. The faculty have already established an online equipment reservation system and it has been operational throughout the pandemic.

Additional completed actions include:

- In coordination with the Dean’s Office, ORS ordered disinfecting wipes, masks, hand sanitizer, and disinfecting surface cleaner and distributed a portion of these supplies to investigators in June.
- ORS committed to paying for research-related PPE that cannot be charged to sponsored projects for six months (December 31, 2020). We will reassess this commitment when necessary.
- Doug Long has agreed to serve as CHS’s point-person to monitor UK and CCTS testing requirements and to communicate these requirements to faculty investigators as necessary.
• ORS has committed to paying for COVID-19 testing for research subjects when it is required to access CCTS clinical services until June 30, 2021.

• The ADR has been working with designated faculty and the VPR to secure permission for volunteer undergraduates to participate in research remotely during Phase 2.

• The VPR released guidance for a safe return to research that should serve as a template for investigators, regardless of their academic home. If CHS faculty and students experience issues with investigators from other colleges (in the use of adjoining facilities that use the same hallway), the ADR and/or the Dean’s office will intervene as appropriate to ensure our personnel are safe and guidelines are followed.

• The ADR has requested that ‘all’ faculty submit a Safe Return to Research Plan – including those faculty who do not have sponsored effort but who do actively mentor students. Once we receive these plans, ORS will submit a consolidated plan to the VPR.

Unresolved Items and/or Challenges

The ADR and the Director of Research Operations will discuss specific technology-related barriers to a full return with faculty on a case-by-case basis in collaboration with IT and the Operations Committee.

Community-based research within CHS is so varied—from public schools to athletic fields to military bases. We must depend upon the investigators to work with their partners and to comply with the public health measures in place at each site.
<table>
<thead>
<tr>
<th>Goal: Identify situation or configuration needed for safe delivery of research (labs, online, other etc.)</th>
<th>Actions: Strategies and delivery plans to move forward</th>
<th>Barriers: Barriers or concerns to be addressed</th>
<th>Resources Required</th>
<th>Responsible Party</th>
<th>Target Date(s)</th>
<th>Progress Summary: Status and date of progress</th>
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<tbody>
<tr>
<td>Ready availability of PPE (masks, gloves, hand sanitizer, disinfectant spray and wipes) for researchers, staff and research subjects.</td>
<td>College to stockpile PPE for distribution based on need.</td>
<td>PPE distribution. How will need be assessed and how will staff access PPE?</td>
<td>ADR</td>
<td>Now.</td>
<td>UK is providing cleaning kits for all areas. The College and the Office of Research &amp; Scholarship (OoRS) will pay for the needed PPE for six months. OoRS and Dean’s office has PPE in stock currently. PI’s will be asked to let us know what their needs are well in advance to allow for ordering/shipping and possible supply shortages nationwide.</td>
<td></td>
</tr>
<tr>
<td>Provide adequate computer access for researchers currently working on campus in Phase 2 (≥50%).</td>
<td>Assess current need for those working in Phase 2 for additional computers.</td>
<td>Could shared computers be located in different facilities (Human performance lab, 4th floor labs, SMRI, CRD labs, other labs)?</td>
<td>College, ADR, PI’s?</td>
<td>Now.</td>
<td>This is a college-wide issue and is being addressed at the college-level. OoRS will ask each PI to assess their IT needs within their labs and to communicate those needs to the ADR for additional discussion. A possible solution is to purchase additional software licenses to eliminate the need to be in the lab for computing. There may be additional flexibility to purchase short-term license contracts.</td>
<td></td>
</tr>
<tr>
<td>Assure that all equipment (including computers) have online sign up systems to reserve use.</td>
<td>This is currently in place for most labs.</td>
<td>Oversight.</td>
<td>PI</td>
<td>Now.</td>
<td>This is currently in place.</td>
<td></td>
</tr>
<tr>
<td>Implement lab meetings for ≥10 participants, with others zooming in.</td>
<td>Equip more classrooms in C TW with Zoom capabilities that will be available for researchers to schedule.</td>
<td>Classroom availability</td>
<td>College, ADR</td>
<td>Now.</td>
<td>Campus IT is equipping the centrally scheduled classrooms with cameras and computers with a targeted completion date of August 1st. College is assessing the needs in other classrooms and teaching labs.</td>
<td></td>
</tr>
<tr>
<td>Establish guidelines for safe and effective practices for researchers across disciplines/facilities in the college.</td>
<td>Contact ADRs/PIs from other colleges to assess their best practices and agree on guidelines.</td>
<td>Many of our facilities are shared with researchers outside our college who may not receive adequate oversight/guidance.</td>
<td>Time &amp; Effort</td>
<td>ADR</td>
<td>Now.</td>
<td>Denise is meeting with UK facilities to address restrooms/common areas. PI’s need to address their own areas and the people who are using the facilities. If there is an issue with personnel from other areas not abiding by safety protocols, the ADR and/or the Dean’s Office will contact counterparts in the other colleges to address the situation. Denise will bring facilities people to MDS to work with Brian on traffic flow to enable his people to avoid the lobby.</td>
</tr>
<tr>
<td>Adequate COVID-19 testing for researchers and research subjects.</td>
<td>Identify locations for free testing recommended by the college.</td>
<td>UK is currently not providing testing. Should this be implemented, costs of the tests may be as high as $65, but reliability, logistics and turn-around time may warrant this approach for research subjects.</td>
<td>A point person to monitor UK testing recommendations and communicate those to faculty. Funds to support testing may be required.</td>
<td>ADR</td>
<td>Now.</td>
<td>Doug Long has agreed to serve as the point person to monitor UK’s emerging policies relevant to testing. Brian Noehren has developed his own testing protocol for his research subjects and is willing to share that protocol with other investigators. We have not, to date, seen definitive guidelines for testing other than that of vulnerable populations, but the word on the street is that CCTS is going to require testing for subjects undergoing surgical type procedures (i.e. biopsies).</td>
</tr>
<tr>
<td>How common areas will be used and hallway access among researchers on the 4th floor labs, human performance labs, SMRI, 1st floor lab.</td>
<td>Identify other users (e Med school, COE, etc.) and guidance in hallways as to what is open, traffic flow.</td>
<td>Coordinate with the college facilities sub-groups which will also be working on this.</td>
<td>Time effort, Kinkos to print signage if needed</td>
<td>ADR</td>
<td>Now</td>
<td>The Dean’s Office and Creative Services are working on signage for the college.</td>
</tr>
</tbody>
</table>
### RESEARCH: COMMUNITY-BASED RESEARCH
**Sub-Group Facilitators: Carper, Lowman, Kliman, White**

<table>
<thead>
<tr>
<th>Goal:</th>
<th>Actions:</th>
<th>Barriers:</th>
<th>Resources Required</th>
<th>Responsible Party</th>
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</thead>
<tbody>
<tr>
<td>Monitor our community groups’ public health measures</td>
<td>Ps to contact community-based partners to determine their public health measures</td>
<td>Competing priorities for community partners</td>
<td>Time &amp; Effort</td>
<td>Ps</td>
<td>Ongoing</td>
<td>Monitor our community groups’ public health measures</td>
</tr>
<tr>
<td>Identify alternate data collection methods, such as data mining, secondary data, network analysis, hospitalization data, to continue research agenda (e.g., doctoral students, undergrad/grad students, junior faculty)</td>
<td>Work with ADR to identify potential resources Collaborate with Esther for RHBI seminars</td>
<td>Limited personnel and resources</td>
<td>Time &amp; Effort</td>
<td>Community-based Sub-committee working with ADR</td>
<td>Fall</td>
<td>Databases can provide some support. Working with ADR to start identifying partnerships with people across the campus – to start collecting information about communities remotely – Talk to Esther to have people come in and talk about alternate methods of data collection.</td>
</tr>
<tr>
<td>Ready availability of PPE (masks, gloves, hand sanitizer, disinfectant spray and wipes) for researchers, staff and research participants</td>
<td>College to stockpile PPE for distribution based on need.</td>
<td>PPE distribution. How will need be assessed and how will staff access PPE?</td>
<td>Who will be responsible for paying for PPE for research? Will this be covered by the ADR office or passed down to faculty NR accounts?</td>
<td>ADR</td>
<td>When in-person data collection resumes</td>
<td>Will face shields become an acceptable version in place of the masks? Research has been shut down and we don’t know what schools are going to ask. Research in schools may not be possible.</td>
</tr>
<tr>
<td>Provide adequate computer access for researchers and Research Assistants currently working remotely in Phase 2-3.</td>
<td>Assess current need for those working in Phase 2 for additional computers.</td>
<td>Money; Limited internet access; Technological difficulties (e.g., Zoom)</td>
<td>Money for purchase of computers through Phase 3</td>
<td>College, ADR, Ps?</td>
<td>Now</td>
<td>We are taking our laptops into the communities to access local hotspots Purchasing portable hotspots to use while in remote regions</td>
</tr>
</tbody>
</table>
### RESEARCH: CLINICAL RESEARCH

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<tr>
<td>Identify situation or configuration needed for safe delivery of research (labs, online, other etc.)</td>
<td>Strategies and delivery plans to move forward</td>
<td>Barriers or concerns to be addressed</td>
<td>PA buy in, getting a contract set up, how to prioritize who has access to testing resources</td>
<td>PA faculty</td>
<td>ADR</td>
<td>ASAP</td>
</tr>
<tr>
<td>Patient/Participant Safety- COVID testing for subjects at risk or mandated by core facilities on campus</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Challenge – unless there is a rapid test, the value is limited. Additionally, there is a high inaccuracy to some of the tests. Some centers have taken the position that we should just screen. Additional testing information addressed above.</td>
</tr>
<tr>
<td>Consistency across protocols - Language that everybody can put in IRB’s or clarifying with the IRB as to what does and does not need approval if we are going to test and screen</td>
<td>Research office talks to Dr. Malone and or the ORI</td>
<td>?</td>
<td>None</td>
<td>ADR</td>
<td>Now</td>
<td>ORI has a lot of resources on their webpage.</td>
</tr>
<tr>
<td>Patient/Participant Safety- PPE</td>
<td>Order and stock pile things now. Create PPE START kits for off campus participants in need of PPE to be stored in central location for research teams.</td>
<td>Running out of supplies</td>
<td>Masks, hand sanitizer and disinfecting wipes</td>
<td>ADR</td>
<td>Now</td>
<td>PPE is addressed above.</td>
</tr>
<tr>
<td>Patient/Participant Safety- Screening</td>
<td>Centralized location for screening those in our building for research REDCAP? (to be consistent with CCTS).</td>
<td>Requires access and knowledge for use</td>
<td>Computer or Smart Phone/IT setup</td>
<td>ADR</td>
<td>Now</td>
<td>This method would be useful for contact tracing. However, it isn’t feasible to screen everyone who comes into the building.</td>
</tr>
</tbody>
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## RESEARCH: STUDENT RETURN TO RESEARCH

### Undergraduate or High School Volunteers in research labs

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- Undergraduate or High School Volunteers in research labs
  - As per the VPR directive, no UG or HS volunteers will be allowed during COVID pandemic period. PI needs to be reminded that UG and HS student volunteers are not allowed until COVID restrictions are lifted.
  - PPE is required for students to participate as decided upon by the PI for health and safety of research student.
  - Phase 3 and Phase 4 of research re-opening as designated by the VPR.
  - Richie and Esther provided a proposal with rationale and Tony will approach the VPR — to bring undergraduates back safely.

### Undergraduate FOR CREDIT research assistant participation

- Undergraduate FOR CREDIT research assistant participation
  - As per the VPR directive, "for credit" UG research students will be allowed during Phase 3 and Phase 4 research. PI should try to provide remote research experience if possible.
  - UG students with COVID vulnerabilities will need to be counseled accordingly and PI must adjust work to accommodate.

### PhD student participation

- PhD student participation
  - Research plans of mentors need to be fully developed and shared with all doctoral students including contingency plans if lock down is necessary again. PI should use this opportunity to help doctoral students develop lab management skills, especially for those doc students mentoring younger lab members.

### DPT and all professional Masters students (across all departments) with research projects and theses

- Mentoring faculty member needs to develop safety plans and enforce CDC specified restrictions for students and all lab personnel. Mentoring faculty should continually educate students to PPE use and safety practices in the lab.

- Communication to students needs to be improved from mentors to students. Non-essential human research is currently severely inhibited, especially in areas where aerosolization risk and high human contact is greatest. Cost of PPE. PPE cost should not operate as a limit to restarting research labs and projects.

- Faculty mentor overseeing research projects are responsible for all safety measures and adherence. Faculty mentor responsible for the research classes in the programs. Faculty mentor.

- PPE will be required.

- Phase 2 and Phase 3

- Students are under the supervision of mentors who do not have a research plan in place. Chairs should bring this up in their next faculty meeting so all of the students are covered. Communication from ADR office to all faculty about research restart plans.

- Starting with Phase 2

- Communication is the issue.
CHS BUSINESS OFFICE

CHS Business Office staff will come to campus one day each week to assist with daily needs. All other staff members will continue to operate remotely to reduce unnecessary exposure to themselves and customers. They have established their own internal procedures including no longer having walk-in options and having a well-established sanitation routine. The following changes will alter our operations to better adhere with CDC guidelines and social distancing protocols.

Appointment Policy
To maintain social distancing and keep foot traffic to a minimum the CHS Business Office in Wethington will be closed for walk-ins except by appointment and only when absolutely necessary. As always, we will comply with UK guidelines and use face coverings and masks and ask that you do the same for any face-to-face visits.

Remote Support Focused
Our primary mode of serving the college will remain remote, mostly via email and phone calls. Please continue to submit orders through the online order system and we will process as quickly as possible.

Staffing
The staff in the business office will rotate the days that they work from the office, trying to limit the number of people within the area to one at a time. The schedule and office hours will be clearly posted on the door.
CHS CREATIVE SERVICES OFFICE
Alumni Relations, Communications & Marketing, Web & Graphic Design

CHS Creative Services staff will have no more than one representative on campus each day. All other staff members will continue to operate remotely to reduce unnecessary exposure to themselves and customers. They have established their own internal procedures including no longer having walk-in options and having a well-established sanitation routine. The following changes will alter our operations to better adhere with CDC guidelines and social distancing protocols.

Appointment Policy
To maintain social distancing and keep foot traffic to a minimum, the CHS Creative Services Office in Wethington will be closed for walk-ins except by appointment and only when absolutely necessary. As always, we will comply with UK guidelines and use face coverings and masks and ask that you do the same for any face-to-face visits.

Remote Support Focused
Our primary mode of serving the college will remain remote, mostly via email and phone calls. Please continue to submit requests via email and we will respond as quickly as possible.

Staffing
The staff in the creative services office will continue to work from home the majority of the time and limit the number of people within the area to one at a time. The schedule and office hours will be clearly posted on the door. The Director of Communications and the Web Manager will primarily work from home and come to campus as needed. The Director of Alumni Relations will be on campus Mondays and Wednesdays and will work remotely Tuesdays, Thursdays, and Fridays.
CHS DEAN’S OFFICE

CHS Dean’s Office staff will have several representatives on campus each day to assist with daily needs. All other staff members will continue to operate remotely to reduce unnecessary exposure to themselves and customers. They have established their own internal procedures and having a well-established sanitation routine. The following changes will alter our operations to better adhere with CDC guidelines and social distancing protocols.

Appointment Policy
To maintain social distancing and keep foot traffic to a minimum, the CHS Dean’s Office will request all internal and external customers make an appointment. Meetings will be conducted via zoom as often as possible. Masks will be required, and social distancing enforced when people enter the office.

Remote Support Focused
Our primary mode of serving the college will remain remote, mostly via email and phone calls. Please continue to submit requests via email and we will respond as quickly as possible.

Staffing
The staff in the Dean’s Office will have staggered schedules; working both on campus and remotely each. When not in the office, staff will forward desk phones and be available during normal business hours. The schedule and office hours will be communicated to CHS faculty and staff.
CHS OFFICE OF RESEARCH AND SCHOLARSHIP

The Office of Research and Scholarship will alter operations to maximize safety and reduce exposure. The anticipated changes include:

Staggered Staff Schedules
To reduce the population within the office suite, personnel will alternate work schedules to ensure only one person is working in the common area at a time. While recognizing schedule changes may be necessary to accommodate childcare, staff will work consistent hours and schedules will be posted in advance.

Appointment Policy
To minimize exposure, the outer suite door will remain closed during business hours. Given the high volume of people who stop by the office to ask for directions, we will have a sign directing patients seeking directions for medical appointments to the two information desks in the KY Clinic.

Appointments will be strongly encouraged, and meetings conducted via zoom as often as possible. Masks will be required, and social distancing enforced when people enter the office.

Remote Operations
Remote operations will be encouraged as much as possible. When not in the office, staff will forward desk phones and be available during normal business hours.

Cleaning
Staff will clean the shared workstation (located in the far corner of the suite) at the beginning and end of each workday. Other common areas (door handles, copier, refrigerator) will be sanitized twice a day by staff on a rotating basis.
CHS Office of Technology staff will continue to operate remotely to reduce unnecessary exposure to themselves and customers. They have established their own internal procedures including no longer having walk-in options and having a well-established sanitation routine. The following changes will alter our operations to better adhere with CDC guidelines and social distancing protocols.

**Appointment Policy**

To maintain social distancing and keep foot traffic to a minimum the CHS Office of Technology Services in Wethington room 109 will be closed for walk-ins except by appointment and only when absolutely necessary. As always, we will comply with UK guidelines and use face coverings and masks and ask that you do the same for any face-to-face ticket resolution.

**Remote Support Focused**

Our primary mode of ticket resolution will continue through remote means unless in person troubleshooting is unavoidable. Please continue to submit tickets by always sending an email to chs.helpdesk@uky.edu and we will do our best to resolve them as quickly as possible.

**Safe Space Resolution**

The nature of certain IT issues may require that we enter your space to resolve the problem. We are aware that offices are confined spaces and social distancing becomes difficult. Therefore when this becomes necessary we will notify you ahead of time and ask that you vacate the space until the work is complete. We will be equipped with means to sanitize the work area and will do so before we leave.

Remote learning carts have been assembled to enable programs to broadcast their laboratory classes on zoom as needed. Additional equipment has been purchased for classrooms and instructional labs that are not centrally scheduled by the university. Ordered equipment was done so at the recommendation of the UK ITS office.
CHS SAFE AND SMART RESTART
COMMUNICATIONS PLAN

To communicate proactively and transparently with CHS audiences and stakeholders about campus reopening and COVID-19 public health protocols.

Objectives

1. We will build trust and unity with our audiences in the College of Health Sciences’ ability to safely reopen and deliver an exceptional educational experience through increased internal and external communication beginning in June 2020.

2. We will keep our audiences informed of UK and college policies, changes, and public health guidelines by implementing new communication methods, revising old methods, and developing a reopening microsite by July 31, 2020.

3. We will work closely and collaboratively with the UK communications team to distribute and support key university messages about COVID-19 and campus reopening during Fall 2020 and Spring 2021 (and during any future semesters impacted by the COVID-19 pandemic).

Tactics

1. The Creative Services team will develop a reopening microsite to catalogue communications and house all CHS and UK restart/COVID-19 information
   a. This website will be updated consistently as new information is released from the college and university. Timely messages will be pushed to inform appropriate audiences.

2. Partnering with the university, the Director of Communications will execute robust digital campaigns and messaging around public health policies and safety measures
   a. Protect, Respect, Do Your Part graphics and messages provided by UK PR or produced in-house
   b. Video messages
      i. Reopening message from Dean Lephart – distributed prior to Aug. 17
      ii. Refreshed #BetterTogetherCHS campaign with encouragement and advocacy from students, faculty, and staff
c. #MaskUpCHS social media campaign – encouraging CHS community to submit photos/videos wearing their masks along with quotes about why they respect and protect

d. Instagram takeover/virtual tour of reinvented normal: Select a student or student ambassador to take over the CHS Instagram and perform a virtual tour of Wethington explaining/showing the new safety measures that will be implemented upon returning to campus

3. We will send weekly updates from the Dean to inform and connect with internal and external audiences
   a. This began on June 5, 2020 and all messages are catalogued here.

4. In collaboration with UK PR, the Director of Communications will create guidelines and talking points for faculty, staff, student ambassadors, and peer mentors to advocate for and promote the reinvented campus experience and safety guidelines

5. The Creative Services team will develop graphics and signage to be placed in physical spaces on campus to communicate safety protocols, public health tips, and how to prevent the spread of COVID-19

6. We will initiate a feedback mechanism to assess our communication efforts using Qualtrics or another survey method
APPENDIX

QUICK TIPS FOR CONTINUITY OF LEARNING

When students quarantine or their attendance is interrupted

The fall semester will require flexible strategies for course design and delivery, especially if a student needs to quarantine or miss in-person activities for a period of time. As always, when a student is too ill to continue coursework, traditional options should be explored: for example, a personalized make-up plan, an incomplete, or withdrawal from the class. We offer the following strategies as starting points with the understanding that “one size does not fit all” across the disciplines. In addition to resources on the Teach Anywhere website, TLAI staff can consult on adapting general advice to your specific instructional context.

General Guidelines

We can proactively design our courses in a way that lessens the impact of an interruption due to quarantine or other reasons. We’ve learned that many students feel uncomfortable learning remotely and experience difficulties with motivation and organization while also feeling isolated and anxious. Adopting some of the following strategies in advance and giving students practice at establishing networks within your course will go a long way to help students stay on track if they need to quarantine.

- **Have a Plan.** If a student must quarantine, instructors should proactively establish a specific plan for participation and communication to avoid ambiguity and confusion later on. The plan can include expectations for how the student will participate in class meetings, complete activities and assignments, and stay in touch with the instructor and their peers (e.g., required office hours).

- **Stay in Touch.** Frequent, low-stakes feedback on progress and performance enhances student motivation. This may range from the personalized (e.g., instructor comments) to the automated (e.g., feedback on quiz results). In addition, students have expressed appreciation for the concern faculty showed about students’ wellbeing. Check in with a quarantined student and offer encouragement.

- **Repurpose Office Hours.** Faculty often express dismay that students never attend office hours. Consider using office hours to hold scheduled, informal chats or review sessions that focus on relevant topics of the unit. This strategy can encourage greater student engagement outside of class meetings, especially if a student needs to quarantine. You can record office hours on Zoom and post them to your Canvas shell.

- **Foster a Learning Community.** Opening a Q+A or “Class Lounge” discussion board on Canvas for students to share and respond to each other’s questions and
comments can strengthen the class community while clarifying points of confusion. Consider making note-taking a collective activity, using Google Docs or another collaborative platform, and posting student-generated notes to the Canvas shell.

- **Form Teams.** Sustained peer groups or teams that complete activities and communicate regularly (over virtual channels) provide students with a support network if they miss class or need help. Peer groups also provide a sense of social ties and belonging in the class community for students who must be remote.

- **Get (even more) Organized.** A clear course structure allows students to focus their cognitive energy on learning as opposed to figuring out what they are supposed to be doing. Sequencing course activities with Canvas modules, regardless of the delivery mode, will ensure that an instructor doesn’t have to face the unexpected and onerous task of “moving” material to a digital format when a student needs to quarantine. Make it a regular practice to archive class notes, outlines, slides, etc., so that students may seamlessly catch up on what they’ve missed or review when they need more practice. Be sure to explain expectations for participation, activities, assignments, and grading in easy-to-find, intuitive locations.

- **Encourage Students to Seek Out Support.** Quarantined or not, students can take advantage of the University’s free tutoring and academic support services. Consider adding the “Looking for help with your classes?” Canvas page (available on Canvas Commons) to all course shells. UK also maintains a web-based list of all academic student support resources. Many students are not aware of these services, and even if they are, they may be reluctant to seek them out if an instructor doesn’t encourage them to.

### Accommodating Student Absences

In addition to the proactive strategies above, we can adjust our instruction strategically when a student needs to miss class. Consider the activities a student will miss along with the approaches outlined below. It’s likely that a combination of strategies will be needed. In many cases, instructors will not need to adjust dramatically. For all options, it will be important to stay in touch with students and make sure they have what they need to succeed.

- **Self-paced activities require little adjustment on the instructor’s part.** So long as a student is healthy enough to continue coursework, and they stay in regular communication with their instructor, self-paced activities may continue as usual. This includes homework for in-person classes as well as structured activities for asynchronous online courses (or courses that include asynchronous online elements).
• **If in-person meetings already are streamed for remote learners, quarantined students may continue to participate remotely.** Beyond listening to lectures and presentations that are streamed live, remote students may also interact with the class via the video platform (e.g., video, chat, breakout rooms) or other apps (e.g., Google Suite or Office365, polling and surveys, Slack, blogs).

• **Classes without a remote audience may still be broadcast or recorded for remote students.** If live class meetings are critical to learning in the course, an instructor may broadcast via a laptop or in-class camera for the student(s) who cannot attend in person. Alternatively, instructors may record these class meetings for remote students to review. If quality interaction is not feasible remotely but remains essential to the course (e.g., a small discussion section), students may use office hours or submit reflections that respond to aspects of the class meeting.

• **Alternate activities and assignments can accommodate students who would miss in-person learning.** The instructor may designate an alternate activity sequence or module for the student to complete with appropriate guidance and feedback. Depending on the discipline and course goals, these activities may involve case study or project-based applications, independent research and reporting, digital production and design, or creative adaptations of course content.

• **Instructors may develop, ahead of time, one or more “packaged” modules that may be assigned to quarantined students at certain points during the semester.** For example, an instructor might design alternative modules for early semester, mid-semester, and late-semester. These modules would address significant learning goals of that particular moment of the term with a robust set of content and activities. While this represents more work up front, it also means less work when a student needs to go remote.
## APPENDIX

### COURSE DELIVERY DISTRIBUTION

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