School of Medicine Preclinical Research | Activity Area Plan

Introduction
As part of the Pitt Resilience Framework, individual activity areas are asked to develop and submit plans that are consistent with the relevant university-wide standards and guidelines for each operational posture. Each plan should address all details necessary for those within a particular activity area to understand their responsibilities and fulfill their functions, while ensuring alignment with the relevant common elements of the Pitt Resilience Framework.

Operating Postures
The University’s Operating Postures are:

<table>
<thead>
<tr>
<th>High-Risk Posture</th>
<th>Elevated Risk Posture</th>
<th>Guarded Risk Posture</th>
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</thead>
<tbody>
<tr>
<td>Meets the minimum standards of Pennsylvania’s red phase. In the High Risk Posture, the University is open, but activity is heavily restricted to help stop the spread of the virus.</td>
<td>Meets the minimum standards of Pennsylvania’s yellow phase. Under this posture, life on campus resumes at a minimal level, prioritizing activities that have high value but lower risk, such as certain research activities.</td>
<td>Meets the minimum standards of Pennsylvania’s green phase. Here, fewer restrictions are in place, while many mitigation measures remain. The activities taking place will account for chronic risk of operating during a pandemic, while continuing to prioritize health and safety.</td>
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Standards and Guidelines
The University is developing a series of Standards and Guidelines that govern its operations during the COVID-19 pandemic. Activity Areas will be required to remain compliant with all applicable university standards and guidelines. Several of these requirements apply to all University’s operations and personnel, regardless of the University’s operating posture. These include:

**Healthcare Standards and Guidelines**

These rules govern behavior while on Pitt’s campuses and include such requirements as:

- Face coverings should be used in campus buildings, except when eating or in an enclosed private single-occupancy space such as a personal office.
- Ensure physical distancing of at least six feet between University members
  - Chairs and desks in shared spaces should be removed or marked as not for use to ensure proper physical distancing.
- Limits on gathering sizes and defaulting to remote gatherings when possible
  - In High Risk posture: no gatherings of more than 10 people
  - In Elevated Risk posture: no gatherings of more than 25 people
  - In Guarded Risk posture: no gatherings of more than 250 people
These rules are established to help reduce the number of people on campus, while maintaining support for students’ living and learning, and include such requirements as:

- All personnel should work from home, to the maximum extent possible, for the duration of the COVID-19 pandemic.
- Every attempt should be made to minimize the number of individuals required to be on campus to support authorized activities.
- Faculty and staff who are returning to on-campus work will be required to complete a mandatory training.
- Supervisors should follow Office of Human Resources guidance when making accommodations for personnel.

I. Overview

1. Name of Activity Area
   School of Medicine preclinical research
2. Name of Activity Area Lead
   Jeremy M. Berg, Associate Senior Vice Chancellor for Science Strategy and Planning, Health Sciences
3. Name of individual submitting Activity Area Plan
   Jeremy M. Berg
4. Date of submission
   August 14, 2020
5. Revision of a previously approved Activity Area Plan? (Yes or no)
   No
6. A brief summary of the most critical pieces of your plan (a few bullet points).
   a. In order to be conducting preclinical research, each research team must have a restart plan reviewed by the School of Medicine facilities staff and the Associate Senior Vice Chancellor for Science Strategy and Planning, Health Sciences, and approved by the School of Medicine Dean.
   b. These plans commit to complying with University policies and guidance and articulate space utilization that allow appropriate social distancing.
   c. The major adjustable parameter affecting preclinical research is the percentage of the research teams who can participate in on-site research activities at a given time.
7. A confirmation that the activity area will commit to following the Healthcare Standards and Guidelines and the Personnel Standards and Guidelines
   a. All School of Medicine preclinical research activities will comply with the Healthcare Standards and Guidelines and the Personnel Standards and Guidelines.
II. Functions in Each Operational Posture

1. High Risk Posture  
Priority Research Activities, previously approved under Research Restart, will continue as will other research as necessary to avoid loss of key resources, particularly research animals or other materials that may have time-sensitive characteristics. Research will be conducted with careful adherence to social distancing and personal protective equipment guidelines. Research will involve not more that 1/3 of all research personnel conducting on-site research at any given time. All buildings that have been certified as having approved plans with access to adequate cleaning supplies.

2. Elevated Risk Posture  
All approved preclinical research will continue. Research will involve not more that 2/3 of all research personnel conducting on-site research at any given time. All buildings that have been certified as having approved plans with access to adequate cleaning supplies.

3. Guarded Risk Posture  
All approved preclinical research will continue. Research may involve all research personnel conducting on-site research as long as social distancing guidelines can be adhered to and adequate personal protective equipment is available. All buildings that have been certified as having approved plans with access to adequate cleaning supplies.

III. Transitions between Operational Postures  
As the environment shifts, the University’s Senior Leadership Team will make determinations about when the University’s operational posture must also shift to either more or less restricted.

As risk levels decline:
1. Shift from High Risk Posture to Elevated Risk Posture  
2. Shift from Elevated Risk Posture to Guarded Risk Posture

As risk levels increase:
3. Shift from Guarded Risk Posture to Elevated Risk Posture  
4. Shift from Elevated Risk Posture to High Risk Posture

In each case, the primary mode of communication will be through Department Chairs and Institute Directors as well as the associated Administrators. These individuals will have the responsibility for informing their principal investigators of the change in operative posture and the expected adjustments. These communications will primarily come from the Associate Senior Vice Chancellor for Science Strategy and Planning, Health Sciences who is in close contact with the Office of the Senior Vice Chancellor for Research and School of Medicine leadership teams.
Each PI will then be responsible for communicating the shift, and the associated operational changes for their particular lab/project, to their research teams and staff.

IV. Stakeholder Outreach

The primary stakeholders are the principal researchers and their research teams at the School of Medicine. Each principal investigator has received direct communication from the Associate Senior Vice Chancellor for Science Strategy and Planning, Health Sciences, regarding their research restart plans and similar communications will be utilized as necessary.

V. Monitoring and Amendment

The head of each activity area is responsible for monitoring compliance with their activity area plan. Any changes to this plan require the approval of the Senior Vice Chancellor for the Health Sciences.