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Sent: Thursday, December 9, 2021 11:25 AM
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Cc: Elizabeth Watkins <elizabeth.watkins@ucr.edu>
Subject: COVID process for instructor notifications

Hi Jason

Following the discussion at the last divisional meeting, we have been working to better understand the sources of delay and confusion in the process that is used to notify instructors of a positive COVID test in a classroom. Attached is a summary of how the process is designed to work, and potential sources of delay/confusion at each step. The COVID Management Team helped to produce this, and while they agree that these things can and do happen, they also want to emphasize that most people who test positive are trying to do what is expected of them but the circumstances can make it difficult – such as accurately recalling close contacts right after you’ve been diagnosed with a scary illness, aren’t feeling well, and are worried about the implications for yourself, your friends and family, your studies, etc.

We will post this to our CampusReturn site for Instructors, under the FAQ about “What will happen if a student in my class tests positive for COVID-19?” but we also request that the Senate distribute it to the divisional meeting attendees.

The COVID Coordinating Committee plans to discuss these issues further to identify ways to improve the notification process.

Best,
Ken

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UCR COVID-19 Process for Instructor Notifications: December 2021 Update

Instructors have reported delays and confusion regarding the process by which the campus notifies affected individuals of positive COVID-19 tests in instructional settings. For example, instructors report learning of positive cases from students long before a campus notification; receiving notifications long after they seem actionable; or receiving no campus notification at all. The table below outlines how the testing and notification process is designed to work, and factors at each step that can lead to delays or confusion in the process that might be difficult to avoid.

Process as Designed	Potential Sources of Delay or Confusion
1. Student feels sick on day 0.	
2. Student reports symptoms to Daily Wellness Survey (DWS) on day 0.	<ul style="list-style-type: none"> Students might not immediately report symptoms, or might not report symptoms at all, to the DWS.
3. DWS recommends isolation and testing. A COVID Awareness Letter which includes accurate information about the student's situation is generated by Student Health Services (SHS) for the student to share with their instructors.	<ul style="list-style-type: none"> Having been advised to isolate, students might reach out to instructors at this point requesting assistance to avoid falling behind in classes. Depending on what the student says, this might be interpreted as "having COVID" even though testing has not yet occurred. Students might not download/share their COVID Awareness Letter.
4. Student tests on day 0.	<ul style="list-style-type: none"> Students might not immediately test when eligible to do so.
5. Positive test received and reported to SHS / COVID Management Team (CMT) on day 1.	<ul style="list-style-type: none"> Students are encouraged to test on campus, and the campus lab has quick turnaround times and direct notification of results to SHS/CMT. But students might test off-campus, in which case the test result might be delayed and is not sent directly to SHS/CMT. Students who test off-campus might prioritize contacting their instructors first, rather than SHS/CMT, with news of a positive test. Students who test off-campus might not notify anyone about the positive result.
6. CMT conducts case investigation on day 1.	<ul style="list-style-type: none"> Students might be difficult to reach, requiring attempts over multiple days. Students might provide incomplete or inconsistent information to CMT, requiring CMT to take additional steps to verify.
7. CMT posts notices for affected buildings, notifies instructors teaching in affected rooms, and notifies close contacts on day 2.	<ul style="list-style-type: none"> CMT might determine that certain buildings, classes, and individuals were not exposed during the highly infectious period and therefore notifications will not be sent to them. CMT works very hard to process case investigations as fast as possible, but work might be slowed (though still compliant with public health requirements) if/when caseloads are high.