The responses below were prepared specifically for Phase I (partial) resumption of activities at LLE, using the latest available information. During Phase I, on-site staff will be limited to those performing high-priority work that can't be done effectively remotely. Workplace practices must be redesigned to comply with regulatory guidelines for worker protection and social distancing. Worker's activities and time on-site must be managed by Group Leaders and Division Directors to ensure that they are prioritized and coordinated in a manner that is consistent with LLE’s COVID-19 Workplace Safety Policy.


1. FUNDING
   1.1. FY21 funding - any guidance on likely funding opportunities/issues? Or is it too soon and too uncertain?

   - No issues that we are aware of at this point. We will provide updates when new information becomes available.

   1.2. Do we have a picture of how to determine the effects of this on the cooperative agreement, or more specifically the security of our funding/near future?

   - No issues that we are aware of at this point.

   1.3. How does this affect the Lab’s long-term plans?

   - LLE is continuing to perform research in support of the current DOE Cooperative Agreement deliverables/milestones. LLE is also continuing to diversify its funding portfolio by going after sponsored research dollars from various sources.

   1.4. How does this affect the new building?

   - The current building plans are on hold. Initial estimates were 90 days, but that could be extended. Campus is soliciting suggestions for projects to include in anticipated stimulus funding proposals, including the new building.

   1.5. Is there any mention in the ICF community of how the government will handle traditional funding of the labs going forward given the massive amount of stimulus funds that were appropriated for COVID 19? Are shortfalls expected which will produce funding cuts?

   - LLE is not aware of any potential decreases in funding now. We are constantly monitoring the situation with our Laboratory Partners.
1.6. I am aware that Strong is running a big deficit (hundreds of millions of dollars) since the beginning of the pandemic and is being forced to take drastic measures to address this. I am wondering whether this is true of the university as well? I am also wondering if this will impact our current budget, and any speculations regarding next year's budget. It doesn't seem at all impossible that we will be forced to live within a $60M budget next year instead of $80M. What would that mean for the LLE? Has there been any discussion at NNSA about this?

- Strong is a part of the overall University. As such, Strong’s deficit is the University’s deficit. Our budget largely comes from the Government. At this time, LLE is unaware of any decreases in Government funding. We are constantly monitoring the situation with our Laboratory Partners and Government relations team. We have regular and frequent discussions with DOE.

1.7. Has our funding been impacted?

- LLE sponsored research funding has not been impacted to date. LLE is trying to do its part to save University dollars where possible from the Admin and O&M budgets.

1.8. Will parking fees be adjusted or refunded? Are 2021 parking rates frozen at current rates?

- Current indications are that there will be no refunds, prorating or changes to parking fees for those working from home. Parking rates for 2021 are not known.

2. Resumption of Phase I activities

2.1. Governor Cuomo has outlined a ‘Phased Plan’ to reopen businesses in New York, and I am just wondering where the Lab falls in the pecking order of businesses to reopen. The Governor has mentioned that construction and manufacturing will be the first in line, but I’m not quite sure what category we fit into.

- Gov. Cuomo’s rules are not clear with regards to University Research and LLE specifically. The University is working with NYS to gain approval to restart limited operations on May 15. LLE tentatively anticipates resuming Phase I operation on May 18th, contingent on approval from UR President Mangelsdorf and New York State. If there is any change all staff will be informed.

2.2. Will there be staggered return to work arrangements? Or will we all be allowed back to work on the same date?

- During Phase I, on-site staffing will be limited to 40-50% of the LLE workforce. Specific individuals will be authorized to work at LLE during Phase I, and their work
schedules must be coordinated by Group Leaders. All others will continue to work from home.

2.3. Is there a hard date for reopening LLE completely?

- Not at this time

2.4. What stages will be put into place for returning to work?

- LLE must have access to ~30 day supply of masks, hand sanitizer, cleaning supplies, etc. (ongoing)
- Release the LLE COVID-19 Workplace Safety Policy (completed 5/5/20)
- Prepare G_015 LLE COVID-19 Safety Training (LLE Safety Officers; training completed 5/8/20)
- Brief staff (Campbell) (complete 5/6/20)
- Complete Dr. Chat Bot implementation for LLE (URMC) (pending 5/18/20)
- Identify priority activities requiring on-site staffing (Div. Directors - ongoing)
- Evaluate known staffing limitations and plan shifts accordingly (Group Leaders - ongoing)
- Evaluate routine operations and maintenance activities for process/PPE changes, and update where needed (Group Leaders - ongoing)
- Establish weekly review process – What is and is not working? What needs improvement? Review supplies consumption vs. replenishment rate. (Fridays 4pm)
- Remind employees that questions and concerns may be submitted anonymously using the LLE Safety Suggestions and Questions form.

2.5. How does our connection to the URMC dictate what precautions will be in place when we go back?

- LLE has been developing its workplace procedures in conjunction with the River Campus COVID-19 Task Force. This group includes many representatives from URMC to assist in the planning process.

2.6. Is a UR committee overseeing the process and how does that connect to the Lab?

- Yes. Steven Stagnitto, Doug Jacobs-Perkins and Karen Cera are attending the UR COVID-19 River Campus Task Force daily meetings. Doug is LLE’s designated representative for safety-related issues in the Task Force (Org. Chart below).
2.7. Who are the people at the Lab coordinating with UR to reopen?

- LLE Director, Mike Campbell is responsible for obtaining authorization for the lab to reopen. He is in routine discussions with UR Government Affairs and UR senior leadership.

2.8. What do Strong epidemiologists' models predict for the evolution of COVID in the next 1-3 months in Monroe County? I have heard it said that it will be half a dozen weeks before we even level off, and that's assuming we don't spike due to a reopening of local businesses. I know this is a medical question, not an LLE administrative question. The reason I ask it is that as a university we have a world class medical center, which is a tremendous resource and one we should take advantage of--but it's also a resource more accessible to Mike than it is to a run-of-the-mill member of the LLE!

- We do not currently have published models to share from Strong. Useful links include:

  NYS Department of Health COVID-19 Tracker
  Monroe County NY COVID-19 Dashboard
3. **Staffing**

3.1. Has anyone in the LLE contracted COVID?

- One LLE employee has been confirmed positive for COVID-19, was hospitalized and intubated. As of 5/7, the individual was removed from the ventilator and is still hospitalized, but no longer in the ICU.
- One LLE employee is presumed to have been exposed to COVID-19 by a family member confirmed to have COVID-19. This was declared a confirmed case in the employee’s county of residence.
- One LLE employee is presumed to have had COVID-19 based on symptoms, but was not tested.

3.2. How will LLE accommodate employees who do not have childcare due to the pandemic?

- Inform your Group Leader or Division Director of your situation. They will work with individuals to address specific needs, which can include working from home and flexible work hours. Other options may be explored if needed. LLE leadership is sensitive to any such situation and will do our best to find a solution.

3.3. How will shot operations be managed if there are not enough qualified watch-standers?

- Inform your Group Leader as soon as a schedule conflict is known. LLE will not conduct shot operations if they can’t be done safely with available staff.

3.4. Will we have the same hours of operation? Or will we have staggered working hours?

- Shot Operations must run on a fixed schedule. Other groups will be scheduled to provide Operations support, but will have latitude to schedule on-site staff to minimize office sharing and other resource conflicts. Shot operations will remain on the two shift “extended ops” schedule.

3.5. Will we be permitted to take as much time as we need, especially when we depend on other locations than just LLE reopening, to prepare for shots, even if that may mean having unassigned days early on in the schedule (which may happen if many PI’s need a lot of time to get ready)?

- The LLE Facility Advisory and Scheduling Committee is constantly reviewing the schedule to make effective use of available experimental time within constraints of new work practices, campaign compatibility, available staffing, target and diagnostic availability, travel restrictions and more. Some delays are inevitable, and the shot rate may drop as a result.
4. OVERALL RETURN TO WORK PLANS/ILLNESS/TESTING/WHAT IF.../ETC

4.1. Can UR medical provide adequate COVID-19/antibody testing for LLE so that we can be safe and secure when we begin to work in the lab with a greater number of staff?

- Antibody testing is NOT part of the Phase I startup plan. There is insufficient testing capacity available, and it is not known for certain if immunity develops as a result of having had the illness. LLE will follow URMC recommendations as they evolve.

4.2. What if an individual is not / will not comply with the COVID-19 mitigation rules that LLE puts in place?

- Persons who intentionally disregard LLE’s COVID-19 Workplace Safety Policy will not be permitted to work in the building. Disciplinary measures will be determined by Division Directors and Human Resources.

4.3. How is LLE protecting its workers from the risk of contracting COVID-19?

- The spread of COVID-19 is attributed to three key mechanisms:
  - Droplets transmission (typically >5um) - generated from breathing, coughing, talking, sneezing etc.
  - Contact transmission - Touching your face (eyes, nose, mouth) with contaminated hands
  - Aerosols transmission (typically <5um) - also generated from breathing, coughing, talking, sneezing, medical procedures, etc.

- Two implicit assumptions underlie protection measures being recommended by regulatory bodies:
  - Assume everyone is contagious
  - Assume your hands are always filthy
  - Segregate persons who are known or suspected of being ill.
  - Apply social distancing (maximize distance, minimize duration, and wear a mask).
  - Require all persons to wear a mask when working within 6’ of each other; this ensures that each person is protected from a potentially undiagnosed contagious individual.
  - Surface decontamination and hand washing are also exactly the same strategy as used to manage the spread of tritium and chemical contamination. Clean contaminated surfaces to prevent the spread of pathogens to yourself or to other surfaces.

4.4. Do we need a daily list of approved entrants?
4.5. How will LLE determine that it is safe for an employee to come to work?

- All workers at LLE must complete the “Dr. Chat Bot” Health Status Survey daily \textit{before} coming to work.
- The survey consists of several questions:
  - In the past 24 hours, have you had a temperature higher than 100.4 F°?
  - Do you have a new cough?
  - Are you having a hard time breathing?
  - How about a sore throat?
  - Any body aches?
- A worker who answers ‘Yes’ to any question will be asked to verify that the response was intended before it is accepted. If ‘Yes’, the worker is prompted to call the UR University Health Service (UHS) for follow-up with a healthcare provider. If the worker does not call UHS, a UHS provider will contact the worker.
  --- DO NOT ENTER LLE UNTIL CLEARED BY UHS ---
- Verify that your contact information in the UR HRMS database is up to date so that UHS can reach you.

4.6. Will there be any testing for those who would return to on-site work?

- No. On advice of URMC, Dr. Chat Bot will be used to determine if it is safe for someone to come to work; temperature checks will NOT be performed on-site.

4.7. Symptoms & exposure guideline - what are guidelines for self-quarantine when the employee must stay home, and for how long? What is required if a family member is sick?

- Contact UHS to discuss specific situations.

4.8. When will Dr. Chat Bot be ready for LLE use?

- Dr. Chat Bot has been promised in time for May 18. Until Dr. Chat Bot is available, LLE will be using a similar electronic questionnaire, the “LLE COVID-19 Symptom Assessment Survey”, to perform this function, train personnel and to evaluate the survey’s effectiveness for guest workers (e.g., non-LLE employees, visiting PIs, etc.).
5. Notification

5.1. Notifications - what is the expected 'info flow' if a group member gets sick? I think it would be good to have a ‘report up’ approach (e.g., I tell Jon, etc.) and then ‘notify down’ so that these can come from a unified source (e.g., Stagnitto).

- LLE will get a daily report of LLE personnel who complete the Dr. Chat Bot survey.
- If a Dr. Chat Bot survey and follow-up conversation with UHS results in determination that you should not report to work, you are instructed to inform your supervisor that you will not be coming to work. You are not required to give medical details to your supervisor.
- LLE HR will coordinate with UHS to determine what information may be legally shared with LLE workers. Personnel may not be notified immediately, or at all.

5.2. What in addition to notification, would be done/expected if a group member is ill?
(a) ill worker to provide list of LLE contacts, (b) notification from unified source of these contacts, (c) group leader to arrange for work-area and office cleaning, (d) timeline and criteria set for eventual return-to-work.

- Do NOT attempt to do contact tracing. When a positive COVID-19 case is identified, the health care provider notifies the County Health Department (CHD) where the employee lives, and the CHD will initiate contact tracing. Monroe CHD has a memo of understanding with the UHS stating that UHS will conduct contact tracing for UR-related cases.
- UHS must give clearance before an infected individual may return to LLE.
- LLE asks that any employee experiencing COVID-19 symptoms or diagnosed with COVID-19 inform their Group Leader so that work areas can be disinfected. Please indicate if this information may be shared with other employees.
- UHS will advise the employee when s/he may return to work.

5.3. Work-area practices - my understanding, which I support, is that group leaders/work-area supervisors will set procedures for their areas. Is this the plan?

- Yes. All work areas must implement the guidelines in the LLE COVID-19 Workplace Safety Policy, but have flexibility to decide the best way to do so.

5.4. Will all supervisors have knowledge of who will be working on site or working from home?

- Supervisors may make recommendations, but Group Leader must ultimately approve who is working on-site and when.
5.5. At least for the near future, should/will each employee be funneled through the two main entrances and have their temperature (touchless, seconds to read) checked upon entering the lab? Shut off badge entry for all doors except east and west entrances? If so, will shipping and receiving be able to check delivery personnel upon entry also?

- No. Entries and exits will not be restricted or managed.
- Employees may enter/exit through any door having keycard access.
- Each person shall swipe their own badge to gain access; receptionists will not “buzz” people in.
- Maintain 6’ separation between all individuals until everyone has a mask on.
- Plans for distributing COVID-19 related supplies are still being developed. Tentative plans are to have supplies available in the East and West lobbies.

6. Masks
6.1. Will employees need masks for walking around the lab?

- Yes. Masks must be worn in all public areas (hallways, restrooms, break rooms, etc.). You never know if someone is around the corner.

6.2. What type of mask will LLE recommend wearing and will these be issued to personnel?

- UHS recommends surgical/procedure masks or cloth masks for non-medical personnel.
- LLE will issue surgical masks to employees.
- Surgical masks are required under cleanroom veils if cleanroom staff expect to be working within 6’ of each other for 5 minutes or more.
- Workers are permitted and encouraged to wear cloth masks if they have them (LLE is not currently supplying cloth masks). Cloth masks may not be used when working in areas subject to chemical contamination, or in clean rooms.

6.3. How often should a mask be changed?

- Surgical masks can be used if they are not wet or soiled. Estimate replacing them every 5 days.
- Wash cloth masks every 3-5 days, or when soiled.
- Store mask in an open paper bag or paper pouch when not in use.

6.4. Does facial hair need to be shaved off for surgical masks?

- No.

7. COVID-19 transmission
7.1. What is “Community Spread”?
7.2. Can the coronavirus be transmitted through the HVAC system?

- According to the CDC, it is unclear if aerosols contribute to COVID-19 transmission, and it is not considered a major factor in the Community Spread.

7.3. What is the exposure risk even with precautions in place? How can one prevent carrying the virus home to vulnerable persons in their household?

- COVID-19 will not be eliminated by these practices. No one can guarantee that the practices employed by LLE or elsewhere will be 100% effective in preventing the spread of the disease.
- The recommended practices will be most effective if everyone practices them conscientiously, while at LLE and away.
- If you have specific concerns about your situation, consider discussing them with your Group Leader or Division Director, Personal Healthcare Provider, and/or UHS.

7.4. If the virus peaks again will the lab have a plan in place to deal with this?

- Yes. LLE will conduct weekly Group Leader reviews of past week performance, opportunities for improvement and employee sick leave.
- LLE will follow UR, State and Local regulatory guidance as COVID-19 transmission rates are monitored throughout the community.
8. SOCIAL DISTANCING/TELECOMMUTING

8.1. How is IT going to work on individuals’ computers and in their offices? Many IT individuals need to perform hands-on repairs.

- IT should first assess/repair the issue using a remote connection if possible.
- IT can specify, as part of their revised work practices, that in-situ repairs will be scheduled for times when the office is vacant.
- When this is not possible, everyone in the office shall wear a mask, and the duration of occupancy by multiple persons shall be minimized.

8.2. Will there be a “planned” staging area for the return of computer equipment?

- Items that sit longer than 7 days, and those that the borrower personally returns to his/her work area, do not need to be disinfected.
- The COVID-19 virus can survive on hard surfaces for up to 7 days (CDC). If the equipment can be stored in a designated location for at least 7 days, no disinfecting is required.
- If temporary storage space is needed during “decon”, one of the meeting rooms can be designated for this purpose.

8.3. Office work - what are justified cases for LLE employees to work in their offices?

We’ve demonstrated, at least in the LTD group, that we can work effectively from home on almost all typical office activities. My expectation in ‘phase 1’ is that if a group member is not working in a lab, they will work from home. Is this consistent with other plans?

- Yes, it is consistent and strongly recommended. Only persons who have need to be working on-site should be coming to the building.

8.4. Historically, LLE has not entertained telecommuting other than in a few special cases. Given the projections for future stay home periods and the lack of office space, will LLE consider making some positions remote on an interim or possibly more permanent basis with itinerant office arrangements for on-site visits?

- Off-site work will be practiced to the extent practical during Phase I.
- The decision to continue this practice will be reevaluated by Group Leaders, Division Directors and Senior Management. Social distancing is likely to remain an important aspect of any long-term COVID-19 management plan.
8.5. Assuming that most LLE staff are working from home, it would be helpful and productive for most LLE staff to be as responsive to e-mail as they would be when working within the lab.

- Yes. Group Leaders and Division Directors should make performance expectations clear to their staff.

9. VISITORS

9.1. Visitors - how will they be approved and screened? Includes local and out-of-county.

- No visitors are allowed during Phase I reopening of LLE. Exceptions must be approved by the LLE Director.
- When visitors are permitted, they will be required to complete LLE COVID-19 safety training and abide by LLE’s COVID-19 Workplace Safety Policy.
- Details about visitor screening have not yet been established but will be equivalent to what LLE employees do.

9.2. How will LLE ensure visitors complete the COVID training?

- COVID safety training will be managed like Guest worker safety training; all future visitors will need to be entered into the LLE JHA database with G_015 as a mandatory requirement.

9.3. Will we use only one reception desk, (for example WEST Desk) to keep visitor traffic contained to one entry point?

- This will be considered at a later date.

9.4. Will we have a barrier installed around the reception area similar to those in the grocery stores that protect the cashiers?

- This will be considered at a later date.

9.5. Would there be a way to switch to disposable visitor badges to avoid contact and reuse of the plastic type?

- This will be considered at a later date.
10. PERSONAL TRAVEL.
   10.1. What will we require for LLE employees travel for personal reasons? Is there a
         range and/or notification requirement? Will there be travel restrictions to “hotspots”? What if somebody goes to see relatives in NYC on the weekend and goes through the airport and/or the subways and carries it?
         - The University (https://www.rochester.edu/coronavirus-update/faq/faculty-and-staff-travel-faqs/) strongly recommends against personal travel to areas affected by the pandemic. The most current information about restricted travel can be found on the CDC website. LLE will follow University and CDC guidelines for travel. LLE expects employees to employ the recommended protection measures outside the workplace as well as within.

11. MISC.
   11.1. Is there a way to make suggestions or file complaints? (for example, a suggestion box)
         - Questions and suggestions are always welcome. You can email Jean or Admin (Steve, David, Barb). All will be kept anonymous.
         - Anonymous questions and safety suggestions also may be submitted at any time using the LLE Safety Suggestion Box on the LLE Safety Zone

   11.2. Vacation requests - the current system (email notifications & spreadsheet) is working well. Will it be kept until everyone’s back (phase in)
         - Division Directors will decide how vacation requests are managed within their Division.

   11.3. Is any thought being given to restroom upgrades?
         - Restroom upgrades are being evaluated but can’t be implemented immediately.
         - Campus is reviewing the possibility of submitting a proposal for COVID-19 stimulus funding to apply for campus-wide restroom upgrades.

   11.4. Can UV lights be used for disinfecting?
         - Effective UVC disinfection requires a relatively high UV flux for specified dwell times, only effective for surfaces directly exposed without shadows. Specialized UV light sources in short supply and require PPE, Operator training. They are not being considered for LLE at this time.
11.5. Can foggers be used for disinfection?

- John Sawyer is evaluating a fogger to use in restrooms and high-traffic areas with hard surfaces. This looks promising, but the materials and equipment are currently hard to obtain.

11.6. How will LLE deal with shared use of refrigerator, microwave, coffee machines, drinking fountains? Is this a risk or any recommendation on this (ie. cleaning them or don’t share use)?

- Use these items at personal discretion. If you use them, wash your hands, clean up after yourself and demand that others to do the same.

11.7. Some printers and copiers are very close to desks and many people use them daily. For example, there is a copier directly in front of my desk which faces me.

- Situations like this will have to be addressed on case-by-case basis. Can the printer be relocated? Can furniture be rearranged? Is a barrier appropriate? Contact your Group Leader, Doug Jacobs-Perkins or Karen Cera with concerns.

11.8. Has LLE considered assigning work groups a 2-week rotation cycle?

- No, LLE has not considered this yet. Group Leaders may adopt this operating mode if its staff can perform their essential functions, if it implements the other aspects of LLE's policy. Some parts of our facility couldn't function safely that way. For example, Operations staff can't safely work 12-hour days 2 weeks at a time.