

# CCAC Recommendations: 2

## BACKGROUND

The Campus and Community Advisory Committee (CCAC) has convened four times and wishes to convey our second set of recommendations.

## TESTING

The committee was briefed by Dr. Amir Barzin (Family Medicine) on October 13 about testing options that the Roadmap Implementation Team (RIT) testing workgroup has been considering. The goal of CCAC is not to decide on the **details** of a testing protocol for the spring. Rather, our goal is to provide perspectives on the **acceptability** of different elements of testing and the degree to which we believe particular testing elements would support a safe, limited return to on-campus living and teaching. The January 19<sup>th</sup> start date that has been announced for the spring semester supports the development and implementation of much more comprehensive testing protocol as compared to what was in place in the fall. We also want to acknowledge that testing technology is rapidly changing. Our recommendations are structured to allow for the incorporation of new knowledge and testing technologies into spring plans. We are making preliminary recommendations now and have asked that specific proposed plans be brought back for our feedback when they are ready.

### Reentry Testing

Generally speaking, the committee **supports re-entry testing for students**, faculty, and staff returning to Chapel Hill and to the campus, either to live or study, at the start of the spring semester. This recommendation applies to students who live permanently in the Chapel Hill area as well as those who come from other home communities. We recommend that all re-entry testing plans be considered with equity in mind. First, we believe re-entry testing should be done free of charge. Next, if students are required to test in their home communities before coming back to Chapel Hill, there should be back-up plans for students who live in areas where testing is less accessible or otherwise challenging. In particular, the needs of international students who will be coming from abroad should be considered. There should also be considerations and accommodations for rural and out-of-state students who do not have testing as widely available as others. We believe re-entry testing must be mandatory.

### On-Going Prospective/Surveillance Testing

We are strongly in favor of an on-going testing program that is mandatory for members of the campus community in order to monitor asymptomatic infections and effectively prevent spread of COVID-19. Without a mandatory component to the testing, we are concerned that some in the campus community will seek to avoid it.

However, we want the testing to be as “user-friendly” as possible. Testing sites must be convenient to students living both on campus and off. The testing site hours need to include evening hours as well as daytime hours to accommodate employees working different shifts and students with complicated schedules. Plans for testing sites must include consideration of transportation, parking, and other such potential barriers. Less invasive testing strategies, such as saliva testing, may be more acceptable, but would have to be balanced with increased frequency of testing to mitigate the current lower levels of sensitivity found in saliva-based testing.

## USE OF AN “APP” TO SUPPORT TESTING AND/OR CONTACT TRACING

The CCAC was briefed by Vice Chancellor for IT and CIO Michael Barker on types of apps that might be used. There are three categories of apps: symptom trackers, testing schedule/ life cycle apps, and those that use a variety of strategies to facilitate contact tracing.

We are supportive of an app that would facilitate compliance with testing protocols, provide reminders to students, faculty, and staff about when they should be tested, tell them where they should be tested, and notify them about test results. We support the idea that such an app could display a badge demonstrating that a particular person was in compliance with the testing schedule and that professors, supervisors, or others could ask individuals to show that they were in compliance before that person entered a classroom or an office space. Several committee members noted enthusiasm for “ambassadors” at buildings that could check for compliance badges so that professors or supervisors were not expected to enforce compliance. We also recommend that, in addition to an app for this purpose, that a web option be available as well. Any app used must be thoroughly vetted by the UNC Information Technology Services. The campus community will need to understand that the vetting has been done to have confidence in tool.

Contact tracing is critically important. Although many committee members did not see that a contact tracing app would be acceptable to the community, some committee members felt strongly that a contact tracing app be used. Of those against the use of such an app, concerns centered on privacy and practicality. There is a sense that because of privacy and practical concerns individuals in our community would not download the required app, would not keep their Bluetooth connection active, or otherwise behave in ways that would thwart the app’s usefulness rendering the contact tracing possibilities of the app ineffective. Some committee members believe such an app should be mandatory because of the importance of contact tracing to the overall effort. On balance, we would like the RIT to consider other contact tracing approaches that would be more readily acceptable to the community. Trusted human contact tracers can provide health information, reassurance, and answer questions in the course of the contact tracing encounter. Whatever is done for contact tracing, there may need to be extensive work with community stakeholders – students, faculty, and staff – to obtain buy-in and address concerns that may thwart the effort.

**Finally, as the RIT moves forward with app consideration, we would like to be consulted again with the details of specific apps that are under consideration.**