



TEXAS
The University of Texas at Austin

MAY • 2020
VICE PRESIDENT FOR RESEARCH

PRINCIPAL INVESTIGATOR RESEARCH RESTART TOOLKIT

This toolkit is a set of policies and best practices that outline how to resume research activities safely on campus at The University of Texas at Austin.

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The University of Texas at Austin is committed to reducing the spread of COVID-19 to protect the health and safety of our community. The PI Research Restart Toolkit is a set of policies and best practices that outline how to resume research activities safely on campus and is based on our current knowledge of the COVID-19 pandemic as of the date of issue. University executive leadership will continually reassess conditions on campus and in our community, which may result in changes to these policies and practices. As more becomes known about COVID-19, and as we gain experience with increased on-campus activity during the pandemic, policy and practice details may evolve over time. We will communicate changes in policy in a timely fashion to allow researchers to plan accordingly. Colleges, schools, and units may request approval from the Executive Vice President and Provost, in consultation with the Vice President for Research, to enforce stricter policies; the policies here represent the minimum level of compliance.

SOCIAL DISTANCING

Social distancing may require significant revision of normal procedures.

REQUIRED POLICIES FOR SOCIAL DISTANCING IN RESEARCH

- Stay at least 6 feet (about 2 arms' length) from other people.
- No more than one individual per 200 sq. ft. of laboratory or office space.
- Offices smaller than 300 sq. ft. should be considered single occupancy.
- Researchers working on The University of Texas at Austin campus are required to wear a face covering at all times while in any campus building. The only exception is if a person is working or eating/drinking alone in a single-occupancy office.
- Sign-in/out logs are required for any research space in case contact tracing becomes necessary. This can be paper-based or digital. Each person who works in your research space should keep this record current with days/times they were in the research area.
- Research spaces cannot operate 24/7. They must be closed from 10 p.m. – 6 a.m. daily to allow custodial services to work uninterrupted. All researchers must vacate both labs and offices during these hours.
- PIs may use shift work as a way to increase social distancing among their researchers, but they must adhere to the following overarching policies:
 - The sum of researchers working across all shifts cannot exceed the target Workforce Number for a given Research Phase. For instance, the target Workforce Number during Research Phase 3 is 30% – 40% of the total research workforce. College/school leadership may adjust these percentages further for individual PIs in order to balance Workforce Number across the entire college/school portfolio.
 - Time must be built into work schedules to allow researchers to disinfect high-touch surfaces in the research space before, during, and after their work shifts

SUGGESTED BEST PRACTICES FOR SOCIAL DISTANCING IN RESEARCH

Duties and Schedules

- Continue to work remotely to the extent possible for activities such as literature reviews, data analysis, and writing.
- Continue to meet remotely (e.g., using Zoom or Teams) even for meetings with only two (2) people.
- UT recommends dividing workers into two cohorts that work on rotating, two-week schedules. Cohort A works on site for 14 days, then works from home for 14 days while Cohort B works on site. This remote work period slows the spread of the virus by allowing each cohort to self-isolate while monitoring themselves for COVID-19 symptoms. Again, the sum of researchers working across all cohorts cannot exceed the target Workforce Number for a given Research Phase.
- Researchers should be present in buildings only as long as necessary to complete the experiment or maintenance tasks required for that day.

- Create a list of duties to be performed by critical personnel, including locations and how long the work will take. Designate the time of day the work should be performed.
- Create a scheduling calendar so everyone will know who is present in the lab at any given time.
- Post schedules for each laboratory space and/or piece of shared equipment, including names and contact information for all users. This includes facilities that are shared by multiple research groups.
- Build time into your work schedule for cleaning and wiping down surfaces before and after your work shift.

Lab Space

- Post a map at the lab entryway with the maximum allowable occupancy of each area to maintain physical distancing.
- Wash hands before entering and before leaving any lab.
- Wash hands before and after putting on or removing any face covering.
- Wash hands before and after handling any shared devices (like lab phones).
- Always wear a cloth face covering unless your research procedures require the use of heightened personal protective equipment (PPE), such as N95 masks.
- Use tape to mark out 6-foot spaces in high traffic areas and bottlenecks in the lab, such as near sinks or entry/exit doors.
- Consider developing one-way traffic patterns in labs to minimize interactions.
- Maintain social distancing and density policies in all shared offices.

Equipment

- If possible, rearrange equipment to create a 6-foot distance (minimum) between users, or schedule equipment use time in advance to maintain social distancing.
- Change gloves (remove gloves, wash hands, put new gloves on) before and after using any shared equipment.
- Wipe down equipment before and after each use.
- Do not share items such as pens, notebooks, reagent bottles or pipets, if possible. For such frequently used items, each researcher should have their own set of lab tools.

Shared Spaces

- While walking between buildings, entering or exiting a building, or using elevators, stairwells, or bathrooms, avoid or minimize social interactions. Touch as few surfaces as possible to minimize surface contamination.
- Treat all restrooms as single-occupancy. Call out when entering a restroom to assess occupancy. If someone else is in the restroom, wait outside the restroom for them to exit before you enter. Use a paper towel to touch door handles and faucets, and wash your hands upon entering and leaving.
- Avoid using the elevator. If possible, use the stairs. If you must use the elevator, limit elevator occupancy to no more than two people per elevator car, standing in opposite corners and wearing face coverings.
- Designate one-way entry/exit doors and hallways for high traffic areas.

Eating/Drinking

- People should not congregate in rooms to eat, nor should they be eating/drinking in a lab or at a research workstation.
- Most on-campus dining options remain closed at this time. Some restaurants near campus (e.g., on Guadalupe) are offering take-out options.
- To minimize contact with others, you can bring your own food from home and eat in your own private office, if you have one. If not, find a location outdoors or indoors, and be sure to maintain distance from others.

HAVE A QUESTION?

Contact your Associate Dean for Research (ADR) for more information.

Look up your ADR [here](#).

The PI Research Restart Toolkit was prepared by the Office of the Vice President for Research.

Online:
[Research Restart Website](#)

Phone: 512-471-2877
Monday – Friday
8 a.m. – 5 p.m.

Email:
vp-research-sr@austin.utexas.edu

FOR MORE INFORMATION:

[UT COVID-19 Website](#)



ILLNESS IN RESEARCH PERSONNEL

GENERAL GUIDELINES FOR RESEARCH PERSONNEL HEALTH

- Check to see if your department or college, school, or unit (CSU) requires specific procedures for affirming your health each day before coming to campus.
- If you feel ill, if you are experiencing new or worsening symptoms from the list below, or if you suspect you may have been exposed to COVID-19, **stay home**. Inform your doctor or healthcare provider as well as your principal investigator (PI) or supervisor. If you are the PI or supervisor, notify your associate dean for research (ADR).
 - Fever (above 99.6° Fahrenheit)
 - Cough
 - Difficulty breathing or shortness of breath
 - Chills or repeated shaking with chills
 - Muscle pain
 - Headache
 - Sore throat
 - New loss of taste or smell
- If you are diagnosed with COVID-19, or if you have someone at home with confirmed COVID-19, **stay home**. Notify your PI or supervisor.
- If you begin showing any possible symptoms of illness while on campus, leave the lab or research space and inform your PI or supervisor.
- Assume everyone you see is infected — including yourself — and use appropriate precautions. Remember that transmission from asymptomatic people is possible.

IF A RESEARCHER IS SYMPTOMATIC

Individuals experiencing symptoms should immediately do the following:

- Students call University Health Services' (UHS) Nurse Advice Line: 512-475-6877.
- Staff (including graduate students with staff appointments) and faculty may contact the 24/7 nurse line provided by Blue Cross Blue Shield at 888-315-9473, UT Health at 1-833-UT-CARES, or their personal healthcare provider.
- Inform your PI and/or supervisor.
- PIs should ensure that a quarantine notice is placed on the door of the lab, notifying others not to enter.
- Individuals experiencing symptoms should also notify [Kimberly Craig](#), RN, in UT Occupational Health.
- PIs should call Environmental Health and Safety (EHS) at 512-471-3511 and let them know the lab is being quarantined. EHS will create a re-entry plan with you and provide any necessary supplies and assistance to help you decontaminate the space.

- To the extent that you are able, please respect the confidentiality of (potentially) infected individual(s).

IF SOMEONE IN YOUR LAB OR OFFICE TESTS POSITIVE FOR COVID-19

- Follow all of the above steps.
- Notify your PI or supervisor that the suspected case is now confirmed positive.
- PIs should provide the sign-in records for their research space to [UT Occupational Health](#) for contact tracing purposes. Contact them at 512-471-4647 or healthpoint.ohp@austin.utexas.edu.

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[UT Health Austin Website](#)



PARKING & TRANSPORTATION

BEST PRACTICES

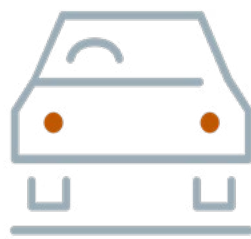
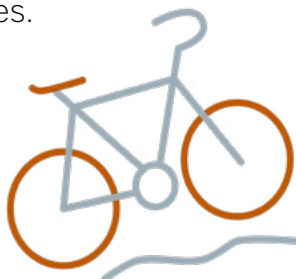
- If possible, avoid using public transportation and use your own car or bike or walk instead.
- If you must use public transportation to come to campus:
 - Avoid social interactions and touch as few surfaces as possible to minimize contamination during commutes.
 - Wear a cloth face cover.
 - Wash your hands before going into your workspace or wear disposable gloves that you remove as soon as you get to campus.

PARKING PERMITS AND BIKES

Parking: Permit holders are not expected to pay for campus parking at this time, and UT garage parking will remain free through May 31, 2020. Parking & Transportation Service (PTS) will provide further guidance for the summer, and this document will be updated as soon as new information is available.

Bikes: PTS is not impounding bicycles or scheduling a summer campus bike clean up. However, they may relocate racks to accommodate construction projects.

The Kickstand and Orange Bike Project are no longer in operation. You can still register your bike online for free anytime and use bike pumps and Fix-It stations located around campus. For any of these services or to get information about protecting your bike, returning a bike rental, or receiving a bike locker reimbursement at this time, see PTS' [Bicycle Information for University's Online Model](#) page and visit the [PTS website](#) for additional coronavirus information and operational status updates.



HAVE A QUESTION?

Contact Parking and Transportation Services.

Online:
parking.utexas.edu

Email:
parking@utexas.edu

The PI Research Restart Toolkit was prepared by the Office of the Vice President for Research.

FOR MORE INFORMATION:

[UT Parking & Transportation](#)



FACE COVERINGS FOR GENERAL USE

Researchers working on The University of Texas at Austin campus are required to wear a face covering at all times while in any campus building. The only exception is if a person is working or eating/drinking alone in a single-occupancy office.

NOTE: Personal cloth face coverings should not replace appropriate personal protective equipment (PPE) that may be called for in laboratory standard operating procedures, particularly for work involving bio-hazards, chemical hazards, or animals. See the PI Research Restart Toolkit section on research-specific PPE for guidance on how to procure this kind of PPE.

HOW TO MAKE YOUR OWN FACE COVER: Directions for making personal cloth face covers are available on the [CDC website](#) and from the [Surgeon General](#).

TYPES OF FACE COVERINGS

- **Procedure, surgical, or hospital masks:** a mask intended for patient care that meets infection prevention and control standards set by the CDC.
- **Cloth face cover or personal mask:** a self-made or purchased “mask” that has not been evaluated by infection prevention and control.
- **Face shield:** a reusable plastic shield that covers the entire face.

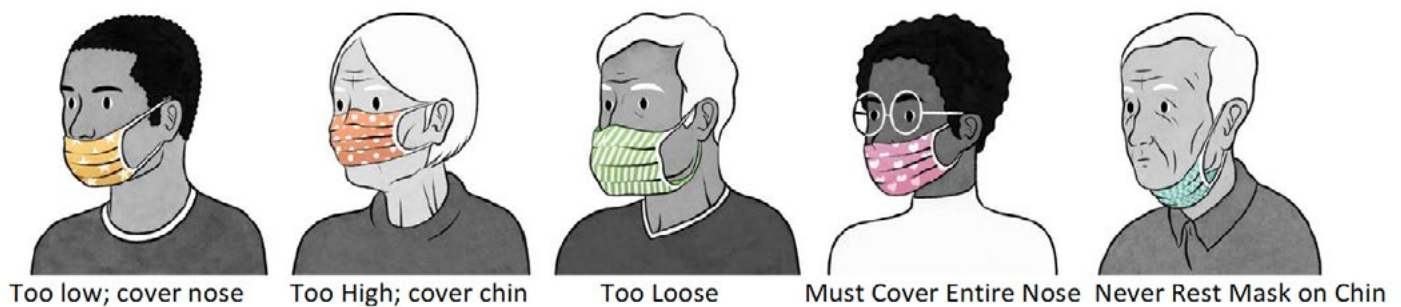


HOW TO PUT YOUR FACE COVERING ON

- Wash your hands with soap and water for at least 20 seconds. Dry your hands with a clean paper towel and throw the paper towel away.
- Check the face covering for any defects such as a tear or missing tie or ear loop. If a face covering is damaged or defective, throw it away.

- Make sure the exterior side of the cloth covering is facing out, away from your face. If the covering includes a stiff, bendable edge to protect the nose, be sure that side is facing up. Face coverings may have ear loops or fabric or elastic strips that tie behind the head. If the face covering has ear loops, put one loop around each ear. If the face covering has ties, pick up the face covering by the ties and secure the upper ties behind your head with a bow.
- Once the cover is in place, use your index finger and thumb to pinch the bendable top edge of the face covering around the bridge of your nose, if yours includes this feature.
- If the face covering has a lower tie, then once the face covering is fitted to the bridge of your nose, secure the lower ties behind your head with a bow.
- Make sure it is completely secure and that it covers your nose and mouth completely. The bottom edge should be under your chin, and the top should completely cover your nose.

HOW NOT TO WEAR A FACE COVERING



REMOVING YOUR FACE COVERING

- Wash your hands before removing the cover.
- Do not touch the inside of the face covering (the part that comes into contact with your nose and mouth). It may be contaminated from your breathing, coughing, or sneezing.
- Untie the straps or remove the ear loops and remove the face covering by the straps.
- If you plan to reuse the face covering soon (e.g., if you are taking a break to eat), place the face covering in a paper bag until you are ready to put it on again.
- Wash your hands.

CLEANING CLOTH FACE COVERINGS

The CDC has [general guidelines](#) about properly cleaning most cloth and fabric face coverings. They should be routinely washed depending on the frequency of use.

- Most cloth face coverings can be cleaned in a washing machine, but homemade face coverings may need to be washed by hand. In that case, lather the covering with soap and scrub for at least 20 seconds with hot water before tossing in the dryer or allowing to air dry.
- Iron the coverings on the cotton or linen setting to kill any remaining germs.

CLEANING FACE SHIELDS

If manufacturer instructions for cleaning and disinfection are unavailable, follow these guidelines:

- While wearing gloves, use a clean cloth saturated with neutral detergent or EPA-registered hospital disinfectant solution to carefully wipe the inside of the shield first, followed by the outside.
- Dry the face shield completely (use a clean, disposable towel or allow to air dry).
- Dispose of gloves and thoroughly wash hands for 20 seconds with soap and water. Dry hands with a disposable towel.

HAVE A QUESTION?

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SYMPTOM TRACKING & SELF-MONITORING

To help protect the public and our community against the spread of COVID-19, The University of Texas at Austin recommends that all researchers perform a daily symptom assessment before coming to campus. Follow the best practices below.

DAILY SYMPTOM ASSESSMENT

- Before reporting to work:
 - Take your temperature with a thermometer each day. If your temperature is 99.6° Fahrenheit or higher, **stay home**.
 - Monitor for coughing and respiratory complications and stay home if they occur. Call a doctor or use [UT's telehealth](#) options if your symptoms concern you.
- You can return to work when you meet ALL THREE of the following:
 - NO fever for at least three (3) days without taking medication to reduce fever during that time.
 - Improvement in respiratory symptoms (cough and shortness of breath) for three (3) days.
 - At least seven (7) days have passed since symptoms began.
- If a doctor confirms the cause of a fever or illness is not COVID-19 and approves a return to work, then the researcher should notify their PI or supervisor.

TAKING YOUR TEMPERATURE

- When possible, it is best to use a touchless thermometer (e.g., forehead or temporal artery thermometer). However, if you must use another type of thermometer (e.g., oral), make sure to clean it thoroughly between each use.
- Follow the manufacturer's directions to disinfect the thermometer. If no directions are available, rinse the tip of the thermometer in cold water, clean it with alcohol or alcohol swabs, and then rinse it again.
- If your temperature is 99.6° Fahrenheit or higher, sit quietly for 10 to 15 minutes without eating, drinking, or engaging in other activity, then take your temperature again. If it is lower than 99.6° Fahrenheit, you may report to work. If it is still 99.6° Fahrenheit or higher, stay home and call a doctor or use UT's telehealth options if you have other symptoms that concern you.

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KEEPING YOUR RESEARCH SPACE CLEAN

HOW TO MAINTAIN A CLEAN RESEARCH SPACE

- Spray or wipe door handles and high-touch areas frequently with 70% ethanol or other EPA-registered disinfectant. Be sure to clean surfaces with soap and water first, because disinfectant will not work on dirty surfaces.
- Wear eye protection and disposable gloves when cleaning and disinfecting surfaces. Remove and discard gloves properly to avoid contamination. Wash hands before removing eye protection. Sanitize eye protection and wash hands again.
- Take special care to frequently clean surfaces that contact skin directly, such as microscope eyepieces. Carefully wipe to clean, then wipe with ethanol disinfectant before and after each use. Allow to air dry. Use caution not to damage equipment with too much moisture.
- Place wipeable covers on electronic equipment between users. If this is not possible, contact the manufacturer for guidance on appropriate cleaning or consider using wipes with at least 70% ethanol on touch points.
- Gloves or disposable towels must be used when handling common reagent bottles, lab equipment, or cabinet handles. These surfaces should also be frequently disinfected.
- Change gloves (remove gloves, wash hands, put on new gloves) before and after using any shared equipment and disinfect all touch points of the equipment before and after use. If touch points cannot be disinfected and gloves are not available, then use tissue or disposable towels to touch these surfaces, and notices should be posted with this direction.
- Note that in machine shops, gloves are not appropriate for some equipment due to safety concerns. When gloves cannot be worn, it is even more important to disinfect touch points between users.
- Some cleaning supplies, such as hand sanitizer, disinfecting wipes and spray bottles for making your own 70% ethanol solutions, are available for purchase through the [Center for Biomedical Research Support's STEM Stockroom](#) in the Norman Hackerman Building. PIs from any college or school may purchase supplies from the CBRS Stockroom.
- If you have concerns about how to manage lab processes within the COVID-19 safety guidelines, please contact your principal investigator (PI) or associate dean for research (ADR).

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FOR MORE INFORMATION:

[CDC Coronavirus Website](#)



CONTACT TRACING

WHAT IS CONTACT TRACING?

Contact tracing is routinely used to control the spread of infectious diseases. It starts with a known or suspected case, known as the “index case.” Trained community workers interview the index case to trace back to each person they may have had recent contact with, including family, friends, coworkers, neighbors, and more. Then, those people who may have been exposed are contacted, interviewed about their symptomatic status, provided testing recommendations, and — depending on the disease — are encouraged to self-isolate or seek treatment to prevent further spread. If there is a new confirmed case of the virus among those contacts tested, the process of contact tracing continues.

WHY IS CONTACT TRACING IMPORTANT?

Contact Tracing is a very important component of resuming research operations safely. In the event that you contract COVID-19, health authorities must be able to reach out to those you came in close contact with and advise them to self-isolate to avoid spreading the virus. In agreeing to return to campus to conduct research, you also need to assume the personal responsibility of keeping records of your contacts with other people.

HOW DOES CONTACT TRACING WORK TO SLOW THE SPREAD OF DISEASE?

Contact tracing helps catch and control new outbreaks before they are able to grow, effectively stopping the disease in its tracks. When deployed early enough, contact tracing can often make a difference in the dynamics of an outbreak.

Data gathered from contact tracing also helps epidemiologists learn more about a disease and its transmission within a particular population, which is used to track impact regionally, nationally, and globally.

BEST PRACTICES FOR CONTACT TRACING

- Maintain a sign-in/sign-out log for your research space. This log can be paper-based or digital. Each person who works in your research space should keep this record current with days/times they were in the research space. These records need to be stored for at least 30 days from the date of contact.
- Researchers should also keep personal records of others that they interact with face-to-face for 5 minutes or longer. You can be proactive by keeping a personal record of your daily activity and the individuals you have been in contact with by filling out this [self-tracing sheet](#). The easiest way to minimize this burden of personal record-keeping is to minimize your face-to-face contact with others as much as possible.

- Continue to hold all meetings remotely even if you're on campus, no matter how few people are in the meeting (e.g., using Zoom, Teams, or phone calls).

IF A HEALTH PROVIDER NOTIFIES YOU THAT YOU'VE BEEN IN CONTACT WITH SOMEONE WHO HAS TESTED POSITIVE FOR COVID-19:

- A primary contact is someone who comes in direct contact with a person who has tested positive for COVID-19. If you are a primary contact, the CDC recommendation is self-isolation for 14 days.
- A secondary contact is someone who has come in direct contact with a primary contact. In this case, the CDC recommendation is self-monitoring for 14 days.
- Review the PI Research Restart Toolkit: Illness in Research Personnel.

As always, please continue to follow the latest CDC recommendations, wash your hands frequently, and seek medical attention if you start experiencing symptoms of COVID-19. For the latest COVID-19 updates, visit [UT Health Austin](#).

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RESEARCH-SPECIFIC PPE

Principal investigators (PIs) are responsible for ensuring that necessary personal protective equipment (PPE) is provided to their researchers to resume research operations safely. Personal cloth face coverings, though required by The University of Texas at Austin for all persons moving or working inside campus buildings, should not replace appropriate PPE that may be called for in laboratory standard operating procedures, particularly for work involving bio-hazards, chemical hazards, or animals.

PROCURING RESEARCH-SPECIFIC PPE FOR YOUR RESEARCH GROUP

- PIs should plan to budget for procuring PPE that is required for experiments, including N95 or KN95 respirators, surgical gowns or chemical-resistant gloves. In contrast, individual researchers are responsible for supplying their own cloth or other face covering for general movement within campus buildings (e.g., in hallways, stairwells and restrooms).
- To navigate supply-chain issues, the [Center for Biomedical Research Support's STEM Stockroom](#) is working with the UT Purchasing Office to procure some of this PPE centrally. The STEM Stockroom will strive to keep the following items in stock and available for purchase for investigators in all UT colleges, schools and units:
 - Face masks for research experiments (not for general use)
 - Single-use surgical masks (level II)
 - Face shields (plexiglass/reusable)
 - Disposable gloves
 - Nitrile (XS, S, M, L)
 - Eye protection/goggles
 - Select cleaning supplies:
 - Hand sanitizer (5ml bottles)
 - Disinfecting wipes (alcohol, bleach)
 - Tissue paper
 - Spray bottles (empty; for use with lab-supplied disinfectant, e.g., 70% alcohol)
 - Duct tape/painters' tape for marking off 6-ft spaces in high-traffic areas

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FOR MORE INFORMATION:

[Center for Biomedical Research Support's STEM Stockroom](#)



- PIs or lab managers (not individual lab members) can request PPE by email (stockroom@utexas.edu). Please specify the type of PPE, amount, and include an account number. The stockroom will reply when the PPE order is ready for pickup in the NHB mailroom (NHB 1.512, see map below). Pickup hours are Mon-Fri, 9 a.m – 4 p.m.

