

March 10, 2020

COVID-19 AND 'CORONAVIRUS' UPDATES

CARRIE L. BYINGTON, MD

Executive Vice President, UC Health



THE IMPACT ON OUR HEALTH SYSTEM

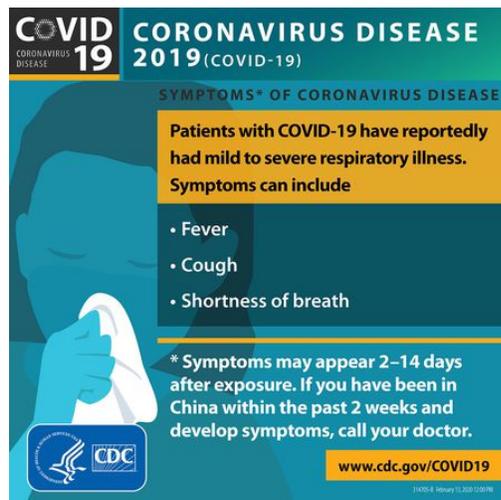
This is the fourth update for Regents regarding the SARS-CoV-2 virus (novel coronavirus), the COVID-19 illness it creates, and the impact on the University's health and academic enterprise.

As you've seen in news coverage, the SARS-CoV-2 virus continues to spread. Containment efforts are ongoing for current confirmed cases and Persons Under Investigation (PUIs), but increasingly, communities are moving from containment to mitigation strategies.

The World Health Organization's Director-General, Dr. Tedros Adhanom Ghebreyesus, stated on March 9 that, "Now that the virus has a foothold in so many countries, the threat of a pandemic has become very real."

THE GRAND PRINCESS DOCKS IN OAKLAND

Many of you are following the story about the Grand Princess cruise ship. I'm proud the City of Oakland is participating in the disembarkation of the Grand Princess, which began on March 9 and is expected to take 2-3 days. Although UC is not involved in the activities at the port, all of our hospitals are prepared to take people who may need inpatient care after arrival. As Oakland Mayor Libby Schaaf stated, Oakland is a safe harbor for all. Across our system, we may have to help each other if the census builds.



COVID 19
CORONAVIRUS DISEASE 2019 (COVID-19)

SYMPTOMS* OF CORONAVIRUS DISEASE

Patients with COVID-19 have reportedly had mild to severe respiratory illness. Symptoms can include

- Fever
- Cough
- Shortness of breath

* Symptoms may appear 2-14 days after exposure. If you have been in China within the past 2 weeks and develop symptoms, call your doctor.

www.cdc.gov/COVID19

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UNDERSTANDING THE VIRUS

It's been just over two months since the first outbreak of SARS-CoV-2 was reported. In the intervening weeks, we have learned a great deal more about this particular strain of coronavirus. Like SARS and MERS before it, this virus has its origins in bats and likely passed from animal to animal until it began spreading among people. It passes through respiratory droplets produced when an infected person coughs or sneezes and contaminates a surface or is inhaled.

People are thought to be the most contagious early in their symptomatic phase, although evidence is still being evaluated about asymptomatic spread.

UC MEDICAL CENTERS BEGIN TESTING

I'm pleased to update you that UC San Diego Health, UCSF Health and UCLA Health are now able to offer testing for SARS-CoV-2 virus in the hospital labs. We anticipate UCI Health and UC Davis Health will be operational very soon.

At times like these, it's important to recognize the hard work of individuals and teams who are making this progress possible, including Dr. Steve Gonias at UCSD.

UCLA

- Omai Garner, PhD, D(ABMM) Associate Clinical Professor, Section Chief, Clinical Microbiology Director, Point of Care Testing
- Dr. Shaun Yang, Assistant Director
- Brian Bowland, Senior Specialist in Virology
- Dr. Evann Hilt, Postdoctoral Fellow
- Stephanie Horiuchi, CLS Virology
- Janneal Lopez, CLS Virology

UCSF

- Charles Chiu, M.D., Ph.D., Professor of Laboratory Medicine and Medicine
- Melissa Hillberg, M(ASCP)CM, Senior Supervisor, Microbiology
- Steve Miller, MD PhD, Director, UCSF Clinical Microbiology Laboratory

UC San Diego

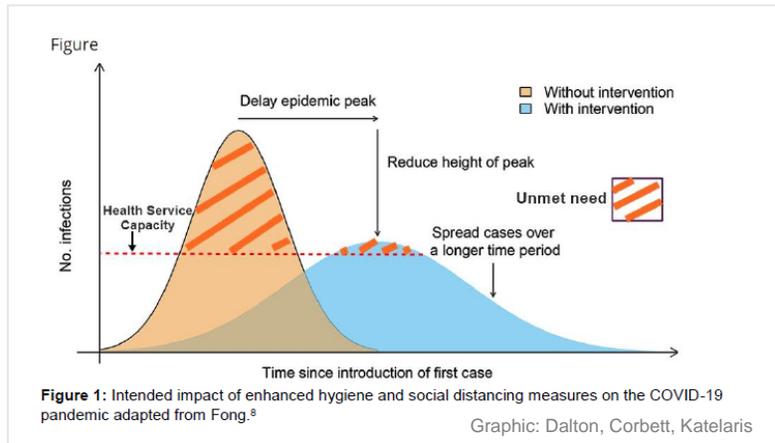
- Sharon L. Reed, M.D., MScCTM, D(ABMM), Professor of Pathology and Medicine Director, Microbiology and Virology Laboratories
- David Pride, MD, Ph.D, Associate Medical Director
- Ronald W. McLawhon, M.D., Ph.D., FCAP, FACB, Professor and Head, Division of Laboratory and Genomic Medicine Vice Chair, Business Development
- Steven L. Gonias, M.D., Ph.D., Distinguished Professor and Chair Department of Pathology Chief of Pathology
- Michele Jasura, MPH, CLS (ASCP)SM, Clinical Laboratory Manager
- Janet Stagnaro, CLS
- Nathan Kendrick, CLS Supervisor
- Zandro Perez, CLS
- Ryan McKinzie, CLS
- Rupal Patel, CLS
- Rachel Steinberger, CLS
- Reuben Barba, CLS
- Jessica Hudson, CLS Supervisor
- Elizabeth Perez- Ferrer, CLS
- Lara Martens, CLS

MOVING FROM CONTAINMENT TO MITIGATION

As more communities experience person-to-person transmission, the strategies for battling the virus are shifting from containment to mitigation. Thus, the health community is placing more emphasis on Social Distancing and Non-Pharmaceutical Interventions (**NPIs**), which are among the best way of controlling the spread of a virus before treatments and vaccines are available. Social distancing means decreasing our contact with others. This can include meeting virtually instead of in person, avoiding travel in congregate settings like planes and trains, and avoiding crowds. [UC Health and all of our campuses have issued guidance regarding meetings and large gatherings.](#) NPIs include good hygiene practices like washing your hands, avoiding touching your eyes, nose and mouth to reduce contact contamination from your fingers. Cleaning and disinfecting objects that are frequently touched by multiple people is also important. These routine hygienic practices can reduce the spread of this and other respiratory viruses.

EFFORTS TO FLATTEN THE CURVE – LESSONS FROM CHINA

Shortly after the outbreak, China implemented a quarantine of confirmed cases, regional closures of facilities and cancellation of large gatherings/events. These stringent efforts resulted in the steep decline in new confirmed cases in China but may not be possible to the same extent in the US and may only occur when wide-spread transmission is documented.



A [recent article](#) discusses lower-level pre-emptive measures that can be considered when transmission is suspected or anticipated. The purpose of pre-emptive interventions is to slow the transmission of disease and limit the impact on health services, particularly hospitals and intensive care units, to ensure access to high level care when needed.

In California, many of these techniques are being adopted by local authorities and the UC campuses. [See guidance for UC Campuses here.](#)

UC HEALTH FORMS PUBLIC HEALTH ADVISORY GROUP

At times like these, we are fortunate to have such significant public health expertise in-house. UC Health is leveraging this expertise by forming a public health advisory group that includes representatives across the system to provide guidance on our public response. The group has provided recommendations to me, campus chancellors and UC medical facilities. This resource will be tapped into to help UC's systemwide Emergency Operations Management Response Team (MRT) which is driving policy decision-making related to limiting the impact of SARS-CoV-2/COVID-19. I am grateful for their contributions during this public health emergency.

The group is chaired by Brad Pollock, PhD, MPH, Associate Dean & Chair of Public Health Sciences at UC Davis. Members of the Public Health Advisory Group are:

- Kirsten Bibbins-Domingo, PhD, MD, MAS, Professor of Epidemiology & Biostatistics, UCSF
- Nancy Binkin, MD, MPH, Adjunct Professor, Family Medicine and Public Health, UCSD
- Bernadette Boden-Albala, Director and Founding Dean, Program in Public Health, UCI
- Eric Goosby, MD, Professor of Medicine, UCSF
- Robert A. Gunn, MD, MPH, Adjunct Professor Emeritus, Family Medicine & Public Health, UCSD
- Robert J. Kim-Farley, Professor-In-Residence, Epidemiology & Community Health Sciences, UCLA
- Margot Kushel, MD, Professor of Medicine, UCSF
- Arthur Reingold, MD, Professor of Epidemiology, UC Berkeley
- George Rutherford, III, MD, Professor of Epidemiology & Biostatistics, UCSF
- Dorothy Wiley, MSN, RN, MPH, PhD, Associate Professor, School of Nursing, UCLA

UC POLICIES ADDRESS NON-CRITICAL TRAVEL, PAID LEAVE & REMOTE WORK

Last week, UCOP expanded its travel restrictions to include level 2 countries in addition to level 3 countries. The policy requires self-isolation and self-monitoring for travelers returning from Level 3 countries and places restrictions on non-critical travel to level 2 countries.

Although states in the U.S. do not carry travel health designations at this time, the number of confirmed cases and instances of community-based transmission in California indicate that non-critical travel within the state should also be curtailed. I will be the only member from UC Health's division office who will attend the upcoming Regents meeting and, rather than flying, I will drive to the meeting. These precautions are intended to reduce the risk of exposure and transmission and to model behavior that supports public health goals.

This week, [UCOP announced guidance on paid-leave and remote work provisions](#) to support the shift to social distancing by removing potential barriers to compliance. The policy update includes, but is not limited to:

- Employees unable to work due to their own or a family member's COVID-19 illness should use available leave balances (e.g. sick leave, PTO-sick, or other accrued leave), and if there are no available leave balances the University will provide up to 14 days paid administrative leave to cover the absence.
- Employees unable to come to work due to public health or University-required quarantine or self-isolation measures may work remotely if operationally feasible. If remote work is not operationally feasible, employees should use available leave balances, and if there are no available leave balances the University will provide up to 14 days paid administrative leave to cover the absence.
- Employees unable to come to work due to a COVID-19 day care or school closure that requires them to be home with their child may work remotely if operationally feasible. If remote work is not operationally feasible, employees may use available leave balances including sick leave.
- Locations may designate certain employees to work from home. If employees are designated to work from home, it will be considered paid work status. Employees in positions who are directed not to come to work by the University and are unable to work from home due to the nature of their work (as determined by the location) may be allowed up to 14 days of paid administrative leave. Locations may determine which positions to designate, provided that **all health care workers are considered exempt from this category of designation.**
- Academic appointees who do not accrue sick and/or vacation leave and who are not otherwise eligible for paid medical leave under applicable provisions of the Academic Personnel Manual will receive up to 14 days paid administrative leave to cover absences as described above.

SOME UC CAMPUSES SUSPEND IN-PERSON CLASSES

This far, no one at a UC campus has tested positive for the virus, however, some locations are choosing to move classes and exams to an online format to reduce the risk of transmission. The decision

to do so is made at the campus-level, in part with guidance from the [California Department of Public Health's \(CDPH\) guidance to colleges and universities](#).

MEDICAL CENTER	PUIs TO DATE	CONFIRMED TO DATE
UC Davis Health	6	2
UCSF Health*	33	6
UCI Health	1	0
UCLA Health	13	1
UC San Diego Health	9	2
UC Campuses	17	0
TOTAL	79	11

CDPH outlined four scenarios, including what campuses should do if there are cases of the virus spreading in surrounding communities. This week, [UC Berkeley](#) announced a shift to an online format effective today; [UC San Diego](#) announced that the last week of Winter Quarter will meet in person but without use of attendance-based points in grading, and will shift to an online format for all lecture and discussion courses beginning with the Spring Quarter; [UC Santa Cruz](#) is moving to an online format beginning March 11 and continuing through the first week of the spring quarter; and, [UCLA](#) is suspending in-person classes effective tomorrow to offer Winter Quarter final exams remotely and will remain on a virtual footing through April 10. Other campuses may enact similar guidance by the time of this publication.

IMPACT ON OUR ACADEMIC PROGRAMS

UCEAP continues to work with partner institutions to limit the academic credit impacts on students related to program suspensions in China (January 27), Korea (February 26), and Italy (February 28). For example, students who were enrolled in the suspended Rome and Florence winter quarter programs will receive partial credit for the coursework they already completed and have the option to complete an online extension course to fulfill 5 quarter units.

UCEAP is also mitigating the financial impact on students in suspended programs, where possible, by reimbursing students' visa fees (even though this was not covered by UCEAP insurance), covering the cost of shipping students' belongings back to the United States for those who needed it, and covering the cost of some housing deposits or fees for students. In Korea, UCEAP successfully negotiated with the student dormitory to eliminate housing cancellation fees so that students would not have to pay for more than the days they were actually residents in their dorm room.

Going forward: CDC Level 2: Japan

- At the present time, UCEAP intends to maintain its yearlong programs in Japan, allowing the students presently in-country to remain there and follow the instructions of our institutional partners and local public health officials.
- All 68 year-long students have the option of returning to the US prior to the start of the spring semester in Japan; should they choose to do so, they will be counseled to follow CDC, campus, and local health department requirements regarding self-quarantine or other monitoring measures.
- UCEAP students are well-supported in-country. In all locations, UCEAP trusts its institutional partners to provide support for UC students equal to their own students.

In Japan, UCEAP has its own Study Center in Tokyo, well-staffed by experienced professionals who have managed previous crises (earthquakes, tsunami, SARs) and are trained and prepared to assist students as needed.

Program changes in Spain

- As of March 9, all educational institutions in the city of Madrid are closed for 15 days. UCEAP is urging students currently in-country not to travel during this period as they may be subject to quarantine upon their return.
- UCEAP is suspending its multi-site European Transformations (Italy + Spain) program, effective immediately. There are 48 students enrolled. This decision has just been made to allow students from quarter campuses to enroll at their UC home campus this week in the hopes of securing classes and housing for the upcoming spring quarter.

More information on impacts to programs in Spain will be forthcoming in the next report.

GETTING THE MEDICAL ADVICE AND CARE YOU NEED – UC EMPLOYEES

UC employees who have health insurance coverage through the University, can access telehealth services (phone or video) for non-emergency care and advice. If you or a member of your family develops symptoms (fever, cough, trouble breathing) or you believe you’ve been exposed to COVID-19, it’s important to inform your doctor before going to a medical appointment, urgent care or emergency department.

Plan	Telehealth Contact Information
<p>CORE</p> <p>UC Health Savings Plan</p> <p>UC Care</p>	<p>LiveHealth Online: livehealthonline.com 1-855-603-7985</p> <p>Anthem 24/7 NurseLine 1-800-977-0027</p>
<p>UC Blue & Gold</p>	<p>Teladoc: teladoc.com/uc 1-800-TELADOC (1-800-835-2362)</p>
<p>Kaiser</p>	<p>Kaiser Permanente Get Care (for Northern and Southern California): kp.org/getcare</p> <p>24/7 Care Advice Northern California: 1-866-454-8855 Southern California: 1-833-574-2273</p>

UC SHIP TO WAIVE OUT-OF-POCKET COSTS FOR COVID-19 TESTING

Last week, the Department of Managed Health Care and the California Department of Insurance directed all commercial and Medi-Cal health plans under their regulation to reduce cost-sharing to zero for all medically necessary screening and testing for COVID-19. This week I’m pleased that UC SHIP will voluntarily do the same for any students who meet the criteria for testing.

GETTING THE MEDICAL CARE AND ADVICE YOU NEED – UC STUDENTS

Consistent with CDC and CDPH guidelines for Institutions of Higher Education, UC Student Health and Counseling centers are advising the following:

- All students should take everyday preventive actions that reduce the likelihood of transmitting respiratory illnesses:
 - Avoid close contact with others that are sick
 - Cover your mouth and nose and use proper cough etiquette when coughing/sneezing
 - Avoid touching area around your mouth, nose and eyes whenever possible
 - Wash hands frequently with soap and water for at least 20 seconds when available, or alcohol-based hand sanitizers when soap/water are not available
 - Stay home when sick - remain at home or in your dorm until fever has been gone for at least 24 hours without the use of fever-reducing medicines
 - Call you campus Student Health center if you have questions or concerns about your status
- Students who become ill should call their Student Health center, medical provider, or seek immediate medical care if symptoms become more severe, e.g., high fever or difficulty breathing.
- For after-hours care, each campus Student Health center website has information on how to access **Live Health Online**: <https://livehealthonline.com/> a telemedicine service available to students with UC SHIP or other insurance 24/7, every day.
- Students are encouraged to be alert for campus communications regarding the campus' COVID-19 status, and further advice or actions being taken such as alteration in class scheduling, event cancellation, facilities closure, or other actions. Each campus is working closely with public health authorities to make these determinations.

IF YOU GET SICK, STAY HOME AND DO THESE THINGS

Most people who become infected develop mild to moderate symptoms. If you are sick, remain at home unless your doctor advises you to be hospitalized. In all scenarios, you should avoid contact with others except for medical personnel who have been advised of your condition.

[Specific guidance from the CDC](#) includes:

- Staying home, separated from other people and pets.
- Not using public transportation.
- Not attending events.
- Alerting your doctor's office, urgent care or emergency room before going and following their instructions so you can get the care you need without exposing others. Telehealth options should also be considered.
- Wearing a facemask if you feel sick. Although facemasks will not prevent a healthy person from exposure, a facemask on an ill person will help keep others healthy by reducing the viral 'plume' produced by your coughing and sneezing.
- Cleaning your hands often, for at least 20 seconds with soap and water or use an alcohol-based hand sanitizer that has at least a 60% alcohol content.

- Using household disinfectants or diluted bleach to clean hard surfaces that you are touching such as tables, doorknobs, light switches, handles, desks, toilets, faucets, sinks.
 - Prepare a diluted bleach solution by mixing:
 - 5 tablespoons (1/3rd cup) bleach per gallon of water, **or**
 - 4 teaspoons bleach per quart of water
- Avoiding sharing of dishes, cups, towels or bedding with others.
- Washing items in the warmest setting and thoroughly dry before touching. You may also use one of the [disinfectants pre-approved by the U.S. Environmental Protection Agency \(EPA\) for use against emerging enveloped viral pathogens](#).
- Using trash can liners so contaminated tissues and other items can be removed without touching, and disinfecting any laundry hampers that come in contact with contaminated clothes, sheets or towels.

SENIORS AND THOSE WITH HEALTH CONDITIONS SHOULD LIMIT EXPOSURE

CDC officials are urging older adults and individuals with underlying health conditions (heart disease, lung disease, cancer, and diabetes) to [stay at home as much as possible to limit their risk of exposure to the virus](#). Additionally, the CDC recommends older adults and travelers with underlying health issues should avoid situations that put them at increased risk for more severe disease. This entails avoiding crowded places, avoiding non-essential travel such as long plane trips, and especially avoiding embarking on cruise ships.

KEEPING PEOPLE INFORMED THROUGH PUBLISHED MATERIALS

The situation is changing rapidly. UC campuses have been publishing extensive educational materials for the public, our students, and staff. UCOP is distributing guidance to facilitate smooth operations. Examples include:

- [Novel Coronavirus 2019 \(COVID-19\) Paid Leave and Remote Work Provisions](#) - **NEW**
- [President's Directive on Travel to Level 2/3 Countries: MRT Emergency Powers](#)
- [How UC is Responding to the Coronavirus \(COVID-19\)](#)
- [Guidance for UC Locations](#)
- [President's Directive on Travel to China](#)
- [President's Directive on Travel to Korea and other Warning - Level 3 Countries](#)
- [Information for Parents and Students](#)
- [A Summary of UC's System Involvement in COVID-19 Patient Care and Research](#)

You can also find the latest travel information on the CDC website - [Information for Travel](#).

LEGISLATIVE BRIEFING IN SACRAMENTO

On Wednesday at 1:30 pm, I will provide a legislative briefing about COVID-19 along with three other respected panelists, including:

- Dr. Sonia Y. Angell, Director of the California Department of Public Health and State Health Officer
- Dr. James Watt, Deputy Director of the Center for Infectious Diseases and Acting State Epidemiologist
- Dr. Peter Beilenson, Director of the Sacramento County Department of Health Services

The briefing will be simulcast on the Legislature's television and audio channels to make the information available throughout the Capitol community and to the district offices of all 120 legislators. You can watch a live stream on the [California Senate website](#).

IN CLOSING

Knowing the facts about the virus and what you can do to protect yourself is important. I am far less worried about the virus than the social disorder that can occur when people are misinformed and panic. I want to assure you that we will get through this by basing our decisions on science, by providing the best clinical care possible, and by working together with our community partners and patients.

I will be providing ongoing updates twice weekly as warranted. Please follow me on Twitter [@carrie_byington](#), where I provide links to important information in real-time. Together we can protect the health of our students, employees, and all Californians.

Sincerely,

Carrie L. Byington, MD
Executive Vice President
UC Health