The University of Tokyo Guideline for Strengthening COVID-19 Infection Control Measures

Novel Coronavirus Task Force

The University of Tokyo (UTokyo) is taking steps toward normalization of university activities during this period of living with the Coronavirus, for example, by lowering its activity restrictions index from level 1 to 0.5 on July 13. On the other hand, the rapid increase in the number of COVID-19 infections in Tokyo as well as throughout Japan is an enormous concern in terms of university activities. Thus, to make the university campus a safe place where research and educational activities can be conducted during this period of “with Corona,” it is necessary to take strict measures to control COVID-19 infections by utilizing the wisdom of the University. Although the “Checklist for Relaxation of Laboratory Activity Restrictions” has already been issued on basic measures against COVID-19 infection, the University of Tokyo sets guidelines to further strengthen them. One of the features of COVID-19 appears to be the large number of asymptomatic and mild cases, and it is therefore inadequate to simply take measures based on the idea of preventing infected people from entering the campus. The guidelines below include precautions for daily life, monitoring infection status, and prompt responses in case of infection, in order to minimize impact even if an infected person enters the campus.

I. New Procedure for Entering the Campus

UTokyo strictly requests that those who plan to enter the campus (both UTokyo members and non-members) manage their physical condition properly. It has already been established that COVID-19 infection can spread from infected persons before symptom onset. There is also a report indicating that specific symptoms of COVID-19 can be identified in asymptomatic infected people by monitoring their physical condition. Based on these facts, UTokyo has formulated a new procedure for entering the campus (refer to Appendix 1), which each department will make known to its members.

1. Procedure for UTokyo members to enter the campus (through the Health Management Report Form)

(1) UTokyo members are requested to take their own body temperature and report the results as well as the presence or absence of cold symptoms such as difficulty breathing (dyspnea), cough, drowsiness (malaise), and loss of sense of smell or taste on the Health Management Report Form (to be implemented from July 27).

* Reporting the aforementioned data every day is desirable for health management. For the purpose of campus entrance management, UTokyo members are required to report their body temperature and physical condition on all days when they come to the campus.

* Even if each department already controls its members’ entry in a different way, it will be asked to use the Health Management Report Form stated above for the purpose of campus-wide entrance management.
(2) If no physical problem is found in the report on the day of coming to the campus, an email stating “Entry OK” will be sent to the email address entered in the Form. Each member entering the campus is requested to show this email to the guards at the campus gate or the entrance of each facility. If for some reason members are unable to submit the Health Management Report Form, they are required to fill it out at the gate. If they receive an email stating “Stay Home,” they will not be permitted to enter the campus.

* The notification and trial period for this procedure will last from July 27 through August 16. During this period, UTokyo members will still be allowed to enter the campus by showing their student/staff ID card. After August 17, showing the “Entry OK” email will be strictly enforced as a prerequisite for entering the campus.

* If a fever exceeding 37.5 degrees or several symptoms are confirmed in the report, an email stating “Stay Home” will be sent.

* Mask-wearing and hand disinfection is necessary and will be strictly enforced before entry to the campus is permitted.

(3) Members receiving a “Stay Home” email should report to the contact point of their department promptly. The department instructs the member not to come to the campus.

* If a staff member is instructed to stay home but his/her symptoms are mild, the department can order telecommuting based on his/her application. The department can provide the staff member with special leave if he/she doesn’t apply for telecommuting.

2. Procedure for non-members to enter the campus

(1) Departments allowing a guest to enter the campus ask the guest to fill out the “Registration of Campus Entry” form, which can be downloaded from the UTokyo homepage, and show it at the campus gate or the entrance of each facility.

* Each department shall ask guests to wear a mask and disinfect their hands.

(2) For business people and others who regularly enter the campus, each department issues a “Special Entry Permit” and asks the organization to which they belong to monitor their physical condition according to the UTokyo health management report and have them show the report and the “Special Entry Permit” to the guards at the campus gate or at the entrance of each facility.

(3) If business people and others who regularly enter the campus do so by car after checking their physical condition, the department facilitating their entry asks them to display a sign on the dashboard stating “Permitted to enter the campus, and physical condition checked.” (「入構許可証有・健康管理確認済」 in Japanese)

(4) Each department asks each person or vendor to retain the “Registration of Campus Entry” form or health management report that they filled out for 1 month, and to provide the information to UTokyo should they become infected by COVID-19.

(5) Though UTokyo controls the entry of non-members as stated above, in principle, each department can establish its own entry procedure according to the specific situation of each campus.
II. Measures to be taken by each department

(What each department should inform its members of)

1. Promoting autonomous actions to prevent infection

Each department takes the following measures so that each member can have the correct information and behave autonomously and with responsibility to prevent themselves from getting infected and spreading the infection.


(2) Inform all members of the “Guidelines to Prevent the Spread of COVID-19 – for all UTokyo students, faculty and staff –” (Appendix 2).

(3) Ask members who have a compatible smartphone or tablet device to install the Ministry of Health, Labour and Welfare’s COVID-19 Contact Confirming Application (COCOA) in order to obtain information on contact with infected people (including non-members).

https://www.mhlw.go.jp/content/10900000/000647649.pdf

(4) Tell all members to check the Health Service Center website (http://www.hc.u-tokyo.ac.jp/covid-19/ [only in Japanese]) to obtain the latest information on COVID-19.

(5) Inform students that UTokyo is further developing a consultation system with regard to anxiety related to physical condition and COVID-19.

* UTokyo Health Service Center http://www.hc.u-tokyo.ac.jp/en/

* UTokyo Center for Research on Counseling and Support Services https://dcs.adm.u-tokyo.ac.jp/en/

(6) Instruct all members to wear a mask or other face cover to observe “Cough Etiquette” when entering the campus.

2. Recording activities on campus

(1) Members record their activities on campus (examples: places they visited [classrooms, laboratories, meeting rooms, offices, etc.] and people with whom they had close contact [generally, within 1 meter for at least 15 minutes]) in various ways, such as online calendar, diary, notebook, or other measures implemented by each department, on days when they come to the campus.

(2) Each department instructs its members to retain their activity record for the past 2 weeks and submit it when necessary.

(What to do in management)

3. Ventilation of classrooms, meeting rooms, etc., and display of the capacity of each room

Each department takes the following measures.

(1) Survey the ventilation capacity of classrooms, meeting rooms, etc. in the buildings managed by the department, and reinforce the ventilation equipment if necessary.
(2) At a location that is easy to notice such as the entrance of the room, indicate the number of people that can be accommodated in the room in a state where a suitable distance from adjacent people is secured and ventilation is maximized.

(3) Specify the flow line and seat layout to avoid the 3Cs (crowded places, close contact settings and closed spaces) in places where many people gather such as classrooms, meeting rooms, and libraries.

4. Other measures

(1) Each department can take stricter measures based on the characteristics and applicable situation.

(2) When starting experiments, training classes, and fieldwork, each department takes thorough measures to prevent infection.

(3) Each department supports a reduction in the frequency of on-campus attendance of students, faculty and staff members with a higher risk for severe illness from COVID-19.

(4) Each department requests restaurant and cafeteria vendors on campus to take measures to avoid the 3Cs such as seat assignment and admission control.
III. Measures taken by the University Headquarters

1. Development of a system of consultation and PCR testing at the Health Service Center

The following system by the Health Service Center will be further developed so that the center can take prompt measures against COVID-19.

(1) Consultation by phone or online

(2) Monitoring of the health management report

* Information submitted from the Health Management Report Form is directly sent to the Health Service Center, where it is strictly controlled according to laws and regulations. The health management report data will be used by doctors and public health nurses to analyze university-wide (not on an individual basis) infection risk and crisis management.

* The Health Service Center handles personal information based on its privacy policy.


(3) PCR testing for members suspected of being infected (when deemed necessary by doctors from the Health Service Center)

(4) PCR testing for members who are not infected but that are judged to require testing for reasons pertaining to research and education

* For a certain period, the Health Service Center will perform PCR testing for a fee. As for PCR testing that is necessary for education, the university is now considering conducting it free of charge.

* The target members of (4) will be notified separately.

2. Monitoring and alerting the departments

As UTokyo lowered its activity restrictions index to level 0.5, there is concern over the increased risk of infection spread if an infected person enters the campus. For this reason, the following university-wide measures will be taken.

(1) The Novel Coronavirus Task Force will monitor the following items. Monitoring items will be added if necessary.

   a) Number of infected cases and “close contacts” among UTokyo members
   b) Number of PCR tests performed by the Health Service Center
   c) Population density on campus
   d) Health management report (The data will be strictly managed by the Health Service Center.)

(2) The monitoring results will be anonymized and shared regularly with UTokyo members.

(3) If the Novel Coronavirus Task Force judges that infection risk is increasing in any department based on the monitoring results, it will alert the department.
IV. Measures to be taken when UTokyo members become infected or are determined to be a "close contact"

(Refer to Appendix 3)

I. Establishment of a consultation system for those with physical problems

(1) Each department establishes contact points (one for students and one for faculty and staff members) that its members, if they are suspected of being infected by COVID-19, can consult. Suspected members are instructed to report to the contact point promptly when they or those living together with them are suspected of becoming infected by COVID-19.

(2) When a member reports to the contact point, the department guides him/her to consult the Health Service Center (or a local government consulting center if the Health Service Center is closed, for example, at night or during holidays) by phone on the need for testing and treatment.

The University of Tokyo Health Service Center  http://www.hc.u-tokyo.ac.jp/en/
[Hongo] TEL: 03-5841-2579
[Komaba] (Students) TEL: 03-5454-6180, (Faculty and Staff) TEL: 03-5454-6166
[Kashiwa] TEL: 04-7136-3040

● COVID-19 consultation centers

TOKYO:  Tokyo Coronavirus Support Center for Foreign Residents (TOCOS)
[Weekdays (10:00 – 17:00)] TEL: 0120-296-004 (toll free)

CHIBA:  AMDA Medical Information Center (https://www.amdamedicalcenter.com/activities)
[Weekdays (10:00 – 15:00)] TEL: 03-6233-9266

[24 hours including weekends and holidays] TEL: 048-711-3025

KANAGAWA:  Phone Counseling Services
(https://www.pref.kanagawa.jp/docs/k2w/covid19/en_call.html)
[Seven days a week (around the clock)] TEL: 045-285-1015
* Residents of Yokohama City, Kawasaki City, Sagamihara City, Yokosuka City, Fujisawa City and Chigasaki City and Samukawa Town are advised to visit the website of the respective municipal offices.

Call Center for Foreign Travelers:  (https://www.mlit.go.jp/kankocho/news08_000311.html)
[24 hours, 365 days] Japan Visitor Hotline  TEL: 050-3816-2787

● Their nearest medical institution, primary care doctor

(3) If the member consults a medical institution or a counseling center for returnees/close contact persons, as directed by the Health Service Center or other consultation center, the department tells him/her to report the results and instructions received from the institution/center.

(4) If the member is instructed to take a PCR test by the Health Service Center or a medical institution, the department confirms with those concerned and their supervisors the date of the PCR test result and their
contact information. The department reports the member’s situation (and his/her PCR test results) to the headquarters (Environment, Health and Safety Department).

2. When a member reports that he/she has been infected with the novel coronavirus

A positive result for the PCR test or antigen test indicates confirmation of an infection. Those mildly infected will be quarantined in a designated facility (such as a hotel) or instructed to stay home, while those more seriously infected will be hospitalized. According to the School Health and Safety Act, students who are infected are suspended until the attending doctor concludes that the infection has been cured.

The department to which the infected member belongs takes the following measures.

a) Gathering information necessary to cope with the infected member

(1) When a member reports to the department that he/she has become infected, the department confirms with the member the instructions and information given by the public health center as well as the information of the center’s staff in charge of the infected member (name, contact information).

(2) If a public health center reports to the department that one of its members has become infected by COVID-19, the department observes the instructions given by the public health center, and confirms the information given by the public health center and the staff in charge of the infected member (name, contact information).

(3) The department asks the infected member to report the timing of onset, symptoms, cause of infection, circumstances, record of his/her activities on campus for the 2 weeks prior to when the sample that tested positive for coronavirus was collected (places he/she visited, people with whom he/she had contact).

(4) The department lists “close contact” candidates and gathers their information such as affiliation, name, contact information, whether or not they wore a mask, position when they talked with the infected member, etc., and shares the information with the public health center if requested.

(5) To obtain information from the infected member, the department should refer to the manual issued on March 24, 2020. The department promptly reports the information obtained from the infected member to the headquarters (Environment, Health and Safety Department).

(6) Check the member’s situation until he/she returns to normal, and report such to the headquarters (Environment, Health and Safety Department).

b) Temporary prohibition from entering facilities, and requirement for disinfection

(1) To control the risk of infection, the department temporarily prohibits entry to the laboratory of the infected member and to the buildings and rooms where the infected member was present for a long period of time.

(2) Regarding the necessity, scope and method of disinfection, the department should follow the public health center’s instructions (if any).

* The extent of temporary entrance prohibition and requirement for disinfection will be specified according to whether or not the infected member wore a mask, how frequent the infected member stayed in the area, and how much time passed after the infected person left the area.

(3) Even if the public health center provides no instructions concerning disinfection, the department
considers the necessity of disinfection, consulting the public health center as necessary.

(4) The department disinfects its facilities mainly by wiping them with alcohol. In order to prevent secondary infection, the building manager may outsource this to a professional vendor.

(5) If the department temporarily prohibits entry to or disinfects its facilities, it promptly reports the situation to the headquarters (Environment, Health and Safety Department).

c) Understanding the situation regarding “close contacts”

(1) Based on the activity record of an infected member, the department lists “close contact” candidates (broader than the definition stated below), and instructs the candidates to self-quarantine at home until the department determines whether or not they are considered as a close contact.

(2) The department asks the public health center whether or not each candidate is considered as a close contact and reports the results to the headquarters (Environment, Health and Safety Department).

<table>
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<tr>
<th>Definition of “close contact”</th>
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<td>(according to the National Institute of Infectious Diseases as of May 29, 2020)</td>
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<td>* Those who are living together or had close contact for a long period of time (including in a car, airplane etc.) with a patient (confirmed)</td>
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<td>* Those who examined, nursed, or cared for a patient (confirmed) without taking appropriate infection prevention measures</td>
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<tr>
<td>* Those who most likely directly touched contaminants such as airway secretions and body fluids of a patient (confirmed)</td>
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<td>* Others: those who were at a distance of one meter (within reach) from a patient (confirmed) for 15 minutes or more without taking necessary infection prevention measures (The possibility of infection will be judged comprehensively according to the individual situation [e.g., surrounding environment and details of the contact.])</td>
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<td>* The public health center narrows down “close contacts” based on the situation pertaining to contacts, for example, whether or not they wore a mask, and the distance from the patient, two days or more before the patient started to display symptoms.</td>
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3. If a member reports that he/she is considered to be a close contact

Depending on the situation, the department gives the member the following instructions, and reports the situation to the headquarters (Environment, Health and Safety Department).

a) If you (a member) is considered to be a “close contact”

(1) Quarantine at home until receiving instructions from the public health center. Make sure to follow the instructions given by the public health center (in principle, from the day on which you had contact with the infected person).

(2) During the stay home period, measure your body temperature every morning and night, monitor your health carefully, and consult the Health Service Center before going to a medical institution if you have any severe symptoms such as difficulty breathing (dyspnea), fatigue (malaise), high fever, etc.

If you first contact an off-campus consultation center, such as during the night or on a holiday, report
the results to the department’s contact point.

(3) For the purpose of risk control, submit a record of your activities (places you visited, people with whom you had close contact) on campus after the date of the last contact with the infected person.

b) If your (a member’s) household member is determined to be a “close contact”

(1) Continue to monitor your own health and stay home if you do not need to come to the campus

(2) If any symptoms appear in the household member exposed to the coronavirus, stay home and consult the public health center about measures to take.

(3) If you are deemed to be a “close contact” by the public health center, report it to the department promptly. (In this case, the department takes measures following a))

(4) If you are not considered to be a close contact, keep monitoring your health and carry on normally as long as you do not show any warning signs.

c) If a member receives a notification from the Ministry of Health, Labour and Welfare’s COVID-19 Contact Confirming Application (COCOA)

(1) Consult through the application or by phone, following the application guides, take measures as instructed, and report to the department’s contact point.

(Reference)

* Those with symptoms or who have an infected person in their immediate vicinity are recommended to promptly consult the Outpatient Services for Returnees and Contact Persons (varies by prefecture). Those who have tested positive will be treated as patients, while those who have tested negative but have an infected person in their immediate vicinity will be treated as “close contacts.”

* Those with no symptoms or with no infected person in their immediate vicinity will be instructed to take care of their own physical condition for 14 days.