



Guide to Arc Re-Entry

version 1.2 ——— October 2020



Arc Re-Entry Guide

Summary

Arc Re-Entry supports a safe, confident return to work, school, and play. Re-Entry builds on Arc's long-standing performance categories with new capabilities to assess facility management, evaluate occupant experience, and measure indoor quality. Critically, Arc Re-Entry is not a certification, stamp, or similar affirmation. Rather, Arc Re-Entry powers an iterative management process and provides scores that can be tracked, benchmarked, and communicated to stakeholders.

Arc Re-Entry enables:

- Any project to collect, manage, and score infectious disease-related information about facility management, occupant experience, and indoor air quality.
- Arc Essentials subscribers to analyze performance and create customized reports for projects and portfolios.

Consistent with Arc's broader mission, Re-Entry works best as a repeated performance assessment. Arc allows anyone to get started collecting and managing information. The resulting scores can inform management and, over time, improve real world outcomes. As always, Arc Re-Entry scores, reports, and communication products help recognize leadership and celebrate projects that deliver superior performance.

Arc Re-Entry:

- Supports the iterative assessment of facility management and occupant experience -- *not the health of individual occupants or infection risk.*
- Aggregates and interprets information reported by facility managers and occupants -- *the information provided is only as useful as the quality of the incoming data and the underlying scientific literature used to interpret it.*
- Data are subject to automated quality tests -- *not document review.*

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Contents

Summary	2
Quick Start	4
Changes from Re-Entry v1.1	4
Introduction	5
From Performance to Re-Entry (and Back)	6
Re-Entry Comprehensiveness Score	9
Facility Management	11
Referencing LEED, WELL, and RESET	15
Sample Facility Management Response	16
Examples of Relevant Public Health Authorities	17
Facility Management Comprehensiveness Score	19
Occupant Observations	20
Sample Occupant Observation Responses	21
Occupant Observations Comprehensiveness Score	22
Indoor Air Quality	24
Sample IAQ Measurements	25
IAQ Comprehensiveness Score	26
Tips for Entering Spatial Data Coverage	27
Tips for Entering Temporal Data Coverage	28
Analysis	31
Safety First Pilot Credit	35
LEED Requirements	35
Conclusion	36
Contact	36
About Arc	36



Quick Start

Getting started with [Arc Re-Entry](#) is easy:

1. [Login to Arc](#), access an existing project or create a new one. Users must have a LEED Online or USGBC.org site user account. New users can [create one for free](#).
2. After logging in, select a project and find the Leadership tab on the left side. Select the Re-Entry category. The tab provides three options:
 - Send Facility Manager survey
 - Send Occupant Observation survey
 - Add Indoor Air Quality (IAQ) data
3. After sending surveys or adding data, users can review information about each category in the Performance section. This includes a total Comprehensiveness Score and sub-scores for facility management, occupant observations, and IAQ. Arc Essentials subscribers will see additional charts to benchmark and compare performance.

If you need support, please reach out to the [Arc team](#) for help.

Changes from Re-Entry v1.1

This document describes Arc Re-Entry version 1.2. This is a modest, incremental development from v1.1. Notable changes include new:

- Facility management indicators for leadership and accountability, personal protective equipment (PPE), and air system assessment.
- Occupant observations for facility management contacts and PPE compliance.
- Indoor air quality weights and interpretations, including a greater priority on measured CO₂ and wider bands of “acceptable” performance for CO₂, RH, TVOC, and PM.

Current projects will not see an immediate change in their Facility Management or Occupant Observations scores. Effectively, these new criteria will be considered “not applicable”. These changes will apply immediately to the interpretation of IAQ data.



Introduction

The COVID-19 pandemic has had a sweeping impact on the global property industry. Many authorities and academic researchers predicted a global pandemic and described its potential consequences. However, it remained difficult to fully envision the scope of its impact on our everyday lives. It has changed almost every aspect of how we live, work, and play. After months of disruption, many communities are ready to try to establish a new normal. This means supporting a safe, confident return to workplaces, schools, and places of recreation, public assembly, and worship.

We have learned a lot about how to keep ourselves safe from COVID-19, enough to know that it will require a thoughtful, coordinated, and sustained effort. Short of a highly effective vaccine, there is no magic bullet or technology that will keep everyone safe. Rather, we must create layered "[defense in depth](#)" to break the chain of infection: social distance, personal protective equipment, cleaning and disinfection, and, critically, ventilation.

The good news is that we only need one break in the chain of infection to stop the spread of disease. The bad news is that we need to break the chain everywhere all the time. This is a challenge of professionals who design, build, and operate our built environment. We are very good at creating exceptional projects that, at times, deliver exceptional performance. However, we are not so good at delivering consistent performance everywhere, all the time. This reflects the reality of managing buildings and places. These are complex engineered systems, often unique in design, and subject to all manner of operating conditions and occupant behavior.

While we cannot expect to be perfect, we can create systems that provide: situational awareness, offer transparency for stakeholders, and use information to improve performance over time. This is our aspiration for Arc Re-Entry: a set of tools that help facility and portfolio managers organize and communicate their infection control plans and learn from occupant observations and measured indoor air quality. We envision that these tools will be used repeatedly to improve performance over time as we learn more about what works to control the spread of infectious disease.

Arc Re-Entry provides tools for a marathon, not a sprint. To that end, we have worked to get started quickly with simple, practical features that we believe can provide value over time. We are also committed to improving these tools in the months ahead to meet this important moment and help us safely and confidently re-enter the places where we live, work, and play.



From Performance to Re-Entry (and Back)

Arc measures and scores the operational performance of spaces, buildings and places. Arc scores distinguish leaders and help make real world performance measurement a ubiquitous part of green building practice.

The **Arc Performance Score** provides a weighted combination of information about five performance categories:

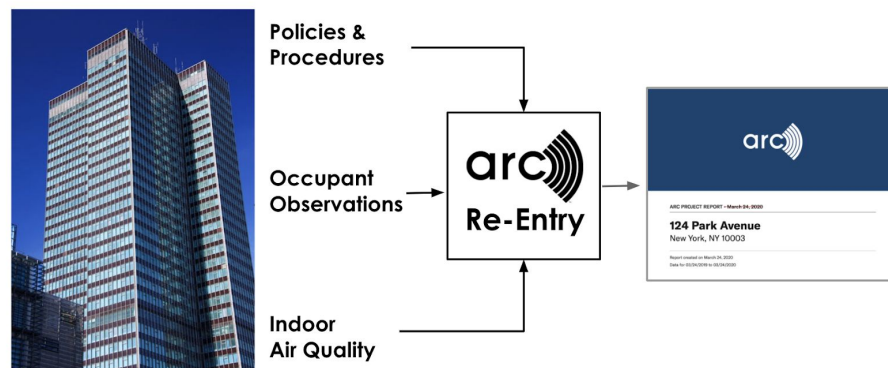
- Energy and Emissions
- Water
- Waste
- Transportation
- Human Experience

The Arc Performance Score powers [LEED for Operations and Maintenance v4.1](#) and [LEED Recertification](#).

The **Arc Human Experience** category collects and scores information on two equally weighted sub-categories:

- Perceived occupant satisfaction
- Measured indoor air quality, including CO2 and TVOC

Figure 1. Illustration of Arc Re-Entry support components, including data collection for facility management policies and procedures, occupant observations, and measured indoor air quality.





Arc Re-Entry expands and adapts Arc's Human Experience tools and metrics to support the management of infectious disease transmission¹. Arc Re-Entry can complement existing building rating systems or be used as a stand-alone tool. Many early-adopting users view Re-Entry as a starting point for a long-term sustainability strategy -- an opportunity to get projects started measuring and tracking operational performance.

Figure 2. Arc Re-Entry can provide a starting point for health and green building rating systems, including the WELL Health-Safety Rating and LEED v4.1 O+M.

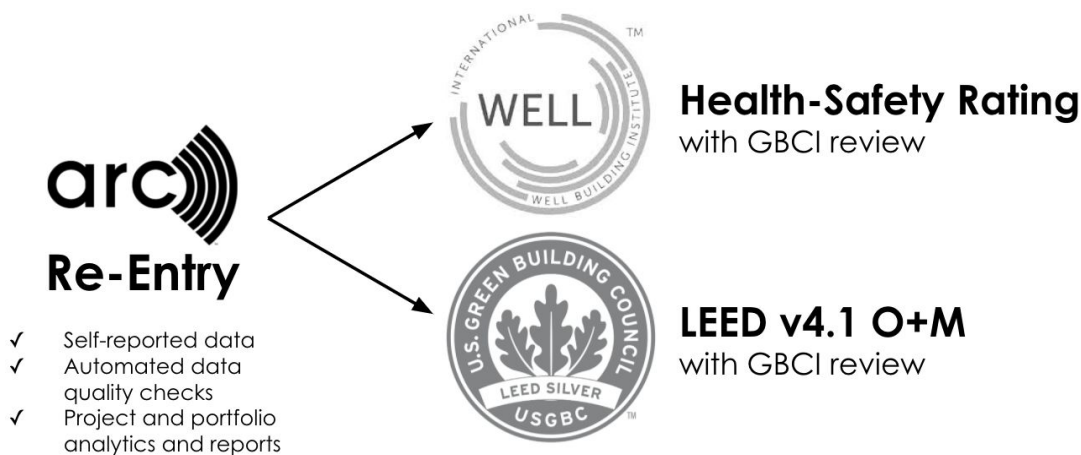
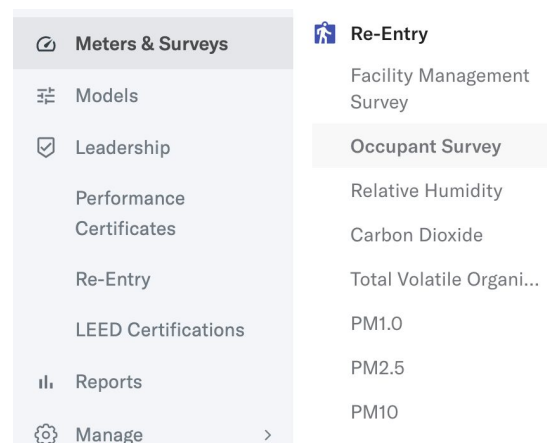


Figure 3. Arc Re-Entry data are entered in a new category under the Meters & Surveys tab.

Arc Re-Entry leverages existing capabilities, including Arc's long-standing occupant satisfaction survey and requirements for indoor air quality measurement. These are supplemented by new surveys and an expanded set of indoor air quality metrics with new interpretations. With two exceptions, Re-Entry metrics and scores are independent from LEED.



¹Arc Re-Entry is focused on the management of infectious disease, specifically COVID-19. Management recommendation would be significantly different for other aspects of health and well-being. Relevant resources for other issues include the [International WELL Building Institute](#), the [Green Health Partnership](#), and peer reviewed literature (e.g., [Worden et al. 2020](#)).



Consequently, Re-Entry performance does not change a project's standing with respect to LEED certification.

The two exceptions to this general rule are:

1. The Occupant Satisfaction indicator is shared between Human Experience and Re-Entry. Re-Entry surveys contribute directly to survey responses for Human Experience.
2. The Arc Re-Entry Pilot Credit for LEED O+M. More information about the LEED Pilot Credit is provided below.

Arc Re-Entry includes three core components:

- **Facility management survey:** The facility manager survey requests information about infection control policies and procedures and alignment with relevant authorities (e.g., the World Health Organization, etc.).

NEW in v1.2: Facility management indicators for leadership, accountability, personal protective equipment (PPE), and air system assessment (a.k.a., IAQ commissioning).

- **Occupant observation survey:** The occupant observation survey includes the long-standing question about occupant satisfaction, as well as new opportunities to share experiences about disease control-related features, such as signage or access to disinfecting products.

NEW in v1.2: Occupant observation indicators for facility contacts and PPE compliance.

- **Indoor air quality metrics:** The indoor air quality metrics expand on Arc's existing set of measurements and change interpretations to align with disease control objectives. This means that CO₂ and TVOC are found in both the long-standing Human Experience category, as well as Re-Entry. However, the metrics have changed from concentrations of pollutants to the fraction of time above a threshold. Additionally, the new section requests information about relative humidity and particulate matter; aspects of air quality linked to disease transmission or susceptibility. All of these IAQ factors can be measured with either portable instruments or sensor networks (e.g., [Arc partners arbnco](#) and [QLEAR](#)).

NEW in v1.2: Increased weight on CO₂ performance and measurements. Removed PM1 and PM10 indicators. The PM metrics are still available for data entry, but they are not included in the Comprehensiveness Score.



Acceptable and Good performance levels now count equally toward the Comprehensiveness Score.

All together, the Re-Entry v1.2 has more than 150 data elements, including simple binary responses, measurements, and supporting documentation. Information about each variable is available through [Arc Re-Entry Meters spreadsheet](#).

Figure 4. Arc Re-Entry supports the repeated evaluation of infection control strategies. The bold elements are explicitly addressed in the tool. The gray elements, Implementation and Analysis, are taken outside of the tool.



Continuous Improvement

Arc Re-Entry is not a “one time” assessment. Arc Re-Entry is designed as an iterative evaluation of the comprehensiveness of infection control practices. It is designed to provide transparency about management intent and support a comparison between intentions and occupant experiences and measured outcomes. Fundamentally, the power of the tool is in its repeated use. This means that it does not have a clearly defined stopping or end-point. Rather, it should be used as long as it is needed to improve management and build confidence for re-entry and on-going operations.

Re-Entry Comprehensiveness Score

[Arc uses scores to interpret and integrate performance measurements](#). Arc scores for energy, water, and waste are benchmarked using a Reference Set. Arc scores for transportation and human experience are based on mathematical functions. Neither of these approaches is appropriate to interpret re-entry-related information. Benchmarks do not exist. Research to establish quantitative guidelines is still preliminary and, in some cases, conflicting. However, there is still a need to aggregate and interpret information for facility managers and stakeholders. Consequently, Arc calculates a Re-Entry Comprehensiveness Score (“Comp Score”).

The Comp Score is a 0 to 100% measure of the fraction of positive responses compared to the total number of potential positive responses. The Comp Score is average of three components: facility management, occupant observations, and indoor air quality.



The Comp Score should be interpreted as a composite index of the number of self-reported actions implemented by the facility and scope of occupant or measured indoor quality data describing conditions in a facility:

- *Comp Score = 0*: The facility reports no disease control practices and procedures, occupants uniformly observe no disease control activities, and no indoor air quality data are collected.
- *Comp Score = 100*: The facility reports on all requested disease control practices and procedures. Facility managers provide supporting documentation for each element. Occupants uniformly observe disease control activities. Indoor air quality information is consistently collected throughout the facility.

Comp Scores between 0 and 100 indicate a simple proportion of potential affirmative responses, occupant agreement, and IAQ performance. Facility management, occupant observations, and indoor air quality sub-scores contribute equally to the total Comp Score.

Re-Entry version 1.2 introduces modest changes to weights *within* the IAQ category, including:

- CO₂ now contributes 50% of the IAQ sub-score -- an increase from 20% in version 1.1.
- The other metrics -- relative humidity, particulate matter, TVOC -- each contribute approximately 17% to the IAQ sub-score.
- The interpretation of each metric has changed modestly. In version 1.2, Acceptable and Good levels both contribute to the Comp Score. "Investigate" does not.

These changes directly reflect new [research and policy guidance](#) about the importance of airborne transmission and the opportunity to mitigate risk through enhanced ventilation. CO₂ concentration is the best, practical proxy for crowding and ventilation ([Peng and Jimenez 2020](#)). Research has affirmed the need to enhance cleaning practices, control relative humidity, and, when possible, improve filtration.

Recent research also suggests a role for air temperature in viral transmission. However, it is not yet clear to what degree temperatures capable of significantly modifying transmission overlap with the range of actual temperatures experienced occupants in commercial property. We will monitor this research.



Finally, version 1.2 does not change or add guidance related to active disinfection technology, such as UV or bipolar ionization. Research clearly indicates that these technologies can play a role in risk mitigation. They can be reported in part of policies, plans, and procedures in Facility Management.

In some cases, a response may not be applicable to a given facility. When a user selects “not applicable”, the question is removed from both the numerator and the denominator of the Comp Score equation. For example, a question about increasing outdoor air supply might be not applicable for an open air venue. The absence of this response does not “count against” the Comp Score.

Note: There is no way for Arc to independently verify the applicability of responses at this time, and users should consider this when evaluating Comp Scores. Third-parties, including the [International WELL Building Institute](#) and [RESET](#) may provide third-party verification, such as on-site or data audits.

It is also important to note that Comp Scores are *not* a direct indicator of health or the risk of disease transmission. They are exactly what the name implies, an indicator of the relative comprehensiveness of management practices, occupant observations, and indoor air quality measurements.

Over time, it may be possible to use Comp Scores to evaluate the effectiveness of different combinations of facility management to disease transmission. However, this will necessarily be a retrospective analysis, possible only after re-entry has taken place (e.g., does a higher Comp Score result in a lower risk of infection). It is not possible to conduct this type of analysis until people have returned to different types of spaces, and we have a distribution of responses (i.e., some have or have not gotten sick). Until then, we can attempt to consistently implement Best Practices and measure results.

Facility Management

Facility managers cannot stop the spread of infectious disease on their own. They do play an important role in creating conditions that may reduce the rate or likelihood of disease transmission. They can use management interventions to break the chain of infection. This means limiting the introduction of virus-carrying occupants, reducing the likelihood of spread through the air and on surfaces, and facilitating the use of barriers and personal protective equipment to prevent exposure.



Arc Re-Entry uses a survey to ask facility managers about:

1. Infection control policies and procedures.
2. Public health authorities used to inform or align the facility's policies and procedures.
3. Specific elements included in the facility's policies and procedures.

Each element includes a yes or no question and the opportunity to provide supporting information as a hyperlink or file. The facility managers survey asks facility managers to identify a number of specific strategies recommended by some authorities, including:

- **Infection control policy or procedure:** This is a written plan applicable to the facility guiding effort to reduce the spread of infectious disease (e.g., the [Hines Return to Occupancy Plan](#), [BXP Health Security Plan](#), or [US CDC workplace health and safety plan](#)).
- **Alignment with public health authorities:** This question documents references or alignment with published guidance from government, academic, or non-profit sources, such as U.S. Centers for Disease Control [Interim Guidance for Businesses and Employers Responding to Coronavirus Disease 2019](#), ASHRAE [Guidance for Building Operations during the COVID-19 Pandemic](#), BOMA [Getting Back to Work: Preparing Buildings for Re-Entry](#), USGBC [LEED Safety First: Re-Enter Your Workspace Pilot Credit](#), or [IWBI's WELL Health-Safety Rating](#). Alignment is interpreted as the intent for building management to substantially reflect material aspects of the referenced authority.
- **NEW Leadership and accountability:** These questions request information about infection control leadership and processes to provide accountability for outcomes. The idea is simple: Who is in charge? What are their qualifications? What processes are in place to ensure accountability over time? The [World Health Organization](#) and [US CDC](#) both offer free training for non-healthcare professionals. [PwC and other consultancies](#) have also provided guidance for supervision by Boards of Directors and similar oversight bodies. This question is aligned with new guidance, such as the [State of California's General Checklist for Office Workplaces](#).
- **NEW Management team or group:** This question requests information about any team or group supporting the implementation of COVID-19 management practices. This reflects guidance to create and maintain a dedicated ["return to work" team](#).



- **Communications and signage:** This question addresses signage and other communications intended to reduce disease transmission, such as advice regarding hand washing or social distancing. The US CDC provides sample informational signage available for [free download from its webpage](#). The City of Los Angeles, California also provides free resources, including [signage designed for offices, retail, grocery stores, and restaurants](#). The design and architecture firm HOK has also shared examples of [clear, high-quality signage](#).
- **Cleaning and disinfection:** This question addresses action to clean and disinfect spaces to reduce disease transmission. Project teams can get more information about IAQ risks associated with cleaning products from the [US EPA](#), and get recommendations for action from sources such as the LEED [Safety First: Clean and Disinfect Your Space](#) and Global Biorisk Advisory Council [STAR standard](#).
- **NEW Personal protective equipment (PPE):** This question addresses policies and procedures that require or encourage the use of personal protective equipment, such as masks, gloves, and face shields. The US CDC provides extensive guidance on PPE, including [instructions for use](#) and [recommendations for non-healthcare facilities](#).
- **Occupant screening:** This question addresses policies, procedures, or practices intended to prevent disease carrying people from entering the facility. This may take the form of health checks, temperature screening, or other measures, such as recommendations in the U.S. Centers for Disease Control [COVID-19 Employer Information for Office Buildings](#).
- **Sick leave:** This question addresses potential incentives or disincentives for facility management staff and contractors to work while sick. Paid sick leave has been shown to reduce the likelihood of working while sick and, in turn, spreading disease (e.g., [Castrucci and Auerbach \(2002\) in Health Affairs](#)).
- **Social distancing:** This question addresses interventions to promote social distancing, including physical barriers, seating, workstation design, and other strategies. Relevant guidance varies by facility type, such as the United Kingdom Department of Digital, Culture, Media, and Sport, [Guidance for providers of outdoor facilities on the phased return of sport and recreation in England](#) (June 2020) and the US Occupation Health and Safety Administration [Guidance on Social Distancing at Work](#).



- **Ventilation and outdoor air supply:** Some authorities have recommended increasing ventilation rates and the supply of outdoor air. Strategies to increase outdoor air supply vary, and they could be interpreted as increasing daily supply through 24/7 operations or increasing average air flow.

Some facilities may also increase fresh air supply by encouraging the use of operable windows. If selected, supporting documentation should explain specific strategies applied to this facility. Relevant research includes findings such as [Li et al. \(2020\)](#) and guidance such as ASHRAE's [Position Document on Infectious Aerosols](#), the [RESET standard](#) (e.g., requirements for real time tracking), and new LEED Safety First Pilot Credits (e.g., [Managing Air Quality during COVID-19](#)).

- **Air filtration:** Some authorities have recommended enhancing HVAC filtration to remove smaller particles. Under some circumstances, this may reduce disease transmission. Guidance varies for the type and level of filtration recommended. If selected, supporting documentation should explain the type of filtration used by the facility and relative contextual information about HVAC design or operations. Relevant research includes [Bolashikov and Melikov \(2009\)](#) and guidance includes CIBSE [Guidance on Ventilation during COVID-19](#) and the [National Air Filtration Association](#). Projects may consider [RESET](#) Core & Shell or Commercial Interior guidance for the measurement and management of indoor and outdoor airborne particulates.

Note: Project teams using active IAQ technologies, such as UV disinfection and bipolar ionization are encouraged to document these strategies in this indicator. More information about these technologies is available from [ASHRAE Epidemic Task Force](#).

- **Elevator operations:** Some authorities have identified elevators as a potential high risk area. Consequently, they have provided guidance for rider density, waiting, and cleaning. Relevant research includes [Kandel et al \(2014\)](#) and [COVID-19 Precautions for Multi-unit Residential Buildings \(2020\)](#) published by the Canadian National Collaborating Centre for Environmental Health.
- **Potable water systems:** Some authorities have emphasized the need to address waterborne illnesses associated with stagnant water during re-entry of facilities after unoccupied periods (e.g., Legionella). This potential scope of this problem reflects facility-specific operating conditions and mechanical system design.



If selected, documentation should describe specific practices in the context of facility systems or circumstances. Relevant guidance includes U.S. Centers for Disease Control [Guidance for Reopening Buildings After Prolonged Shutdown or Reduced Operation](#), the Washington State Department of Health [COVID-19 Guidance for Legionella and Building Water System Closures](#), and the LEED [Safety First Pilot Credit: Building Water System Recommissioning](#).

- **NEW Air system assessment (i.e., IAQ commissioning):** Recent research provides strong evidence that COVID-19 can spread through the air in droplets and aerosols. As a result, public health authorities have [revised and strengthened recommendations](#) to enhance ventilation and ensure the supply of fresh air. Facility management professionals can address this in two ways: (1) ensuring that existing air handling systems are operating as effectively as possible and (2) measuring real world conditions. The new question focuses on the first action. Managers should describe how they physically assess the condition and function of air handling systems, including fans, motors, filters, ductwork, diffusions, dampers, and other components. They should verify the operation of controls and check for common failures, such as air bypass around filtration systems. Guidance, training, and professional services are available from many providers, such as ASHRAE's [Indoor Air Quality Guide](#), the [US EPA](#), and [Building Reoccupancy Indoor Environmental Quality Inspections](#) from Underwriters Laboratories.

Referencing LEED, WELL, and RESET

Facility and venue managers may elect to use elements of the LEED or WELL rating systems to inform their policies and procedures. They can reference rating systems or individual credits as authorities. This reflects that these credits are based on a specific interpretation of underlying research and guidance. These and other rating systems are providing timely, best practice-based guidance for facility managers and occupants. Examples of relevant authorities include:

- **U.S. Green Building Council:** LEED credits, including [Safety First: Re-Enter Your Workspace](#) and [Safety First: Cleaning and Disinfecting Your Space](#)
- **International WELL Building Institute:** Strategies referenced in the forthcoming [WELL Health-Safety Rating](#)
- **RESET:** Strategies related to indoor and outdoor air quality measurement and management in the [RESET Air Standard 2.0](#).



Sample Facility Management Response

A facility management might respond to the survey with the following:

- Does the facility have a **specific individual responsible** for the development and implementation of infectious disease control policies, plans, and procedures for this facility?
 - Yes, file upload including name, contact, information AND hyperlink to John.Smith@linked.com
- Are there processes or mechanisms used by the individual or group to ensure **accountability** for implementation and **effectiveness** of infection control strategies?
 - Yes, file upload: 123_Main_St_QA_Process.pdf
- Does the facility have an infection control **policy or procedure**?
 - Yes, file upload: 123_Main_St_Infection_Control_Plan_Section2.pdf
- Is the policy or procedure aligned with one or more **authorities**?
 - Yes, file uploads: U.S. Centers for Disease Control Guidelines, LEED [Safety First: Re-Enter Your Workspace Pilot Credit](#)
- Does the policy or procedures include **specific strategies** for:
 - Disease control **communication and signage**
 - Yes, file upload: 23_Main_St_signage_photo.jpg
 - **Clean and disinfection** to address disease transmission
 - Yes, hyperlink: LEED [Safety First: Clean and Disinfect Your Space](#)
 - **PPE use by facility management staff and contractors**
 - Yes, file upload: 123_Main_St_Infection_Control_Plan_Section1.pdf
 - **Occupant screening**
 - Yes, file upload: 123_Main_St_occupant_screening_policy.pdf
 - **Sick leave** for staff and contractors
 - Yes, file upload: 123_Main_St_employee_policy.pdf
 - **Social distancing** (e.g., floor markers, barriers)?
 - Yes, file upload: Photos_of_common_areas.jpeg
 - **Outdoor air supply**
 - Yes, file upload: 123_Main_St_Infection_Control_Plan_Section2.pdf
 - **Ventilation rates**
 - Yes, file upload: 123_Main_St_Infection_Control_Plan_Section3.pdf



- **HVAC filtration**
 - Yes, file upload: 123_Main_St_Infection_Control_Plan_Section4.pdf
- **Elevator management** (e.g., limiting occupancy, targeted cleaning)
 - Yes, file upload: 123_Main_St_Infection_Control_Plan_Section5.pdf
- **Potable water management systems** to reduce waterborne disease transmission, such as legionella?
 - Yes, file upload: 123_Main_St_Infection_Control_Plan_Section6.pdf
- **Air system assessment** to ensure fresh air supply?
 - Yes, file upload: Inspection_Report_ACME_Contractor.pdf

Examples of Relevant Public Health Authorities

Facility managers may be required or elect to align their infection control practices with any number of authorities. This may include government agencies, academic institutions, or non-governmental organizations. At this time, the specific combination of applicable authorities is likely to vary by location, type of facility, and special designations (e.g., essential vs. non-essential activities). This means that Arc cannot recommend a specific set of authorities for any given facility. It will maintain examples of authorities, and, when possible, it will share lists of authorities reported by Re-Entry users.

Examples of authorities that may be referenced by facility managers include:

- Schools for Health: Risk Reduction Strategies for Reopening Schools, June 2020 (Harvard School of Public Health) [\[Link\]](#)
- Resources to prevent COVID-19 in the workplace (Ministry of Labour, Training and Skills Development, Ontario, Canada) [\[Link\]](#)
- COVID-19: Guidance for Businesses and Schools (New York City Department of Public Health) [\[Link\]](#)
- Safer LA: Toolkits for Businesses (City of Los Angeles, California) [\[Link\]](#)
- Scientific Brief: SARS-CoV-2 and Potential Airborne Transmission (U.S. Centers for Disease Control) [\[Link\]](#)
- 5 Ways to Optimize Buildings for COVID-19 Prevention (Center for Active Design) [\[Link\]](#)
- COVID-19 Disinfectant List (US Environmental Protection Agency) [\[Link\]](#)
- Position Paper on Airborne Infectious Disease (ASHRAE) [\[Link\]](#)
- Interim Guidance for Businesses and Employers to Plan and Respond to Coronavirus Disease 2019 (U.S. Centers for Disease Control) [\[Link\]](#)
- Getting your workplace ready for COVID-19 (World Health Organization) [\[Link\]](#)



- Coronavirus Resource Center (BOMA International) [\[Link\]](#)
- Coronavirus Resources (BOMA Canada) [\[Link\]](#)
- REHVA COVID-19 guidance document, updated on August 3, 2020 (Federal of European Heating Ventilation and Air Conditioning Associations) [\[Link\]](#)
- Coronavirus (COVID-19) Advice (CIBSE) [\[Link\]](#)

Note: *Guidance is under development from many sources, including academic institutions, trade associations, and government. At the moment, these resources may be incomplete and, at times, contradictory. These references will necessarily evolve quickly in the month ahead.*

Arc can deliver these surveys and track responses within a specified time period. Users may select the interval that surveys are repeated. The default recommendation is *monthly or upon a significant change in operations*. All new meters are available as API end-points for Arc partners. Review the [Arc Integration Guide](#) for more information.

Time

Arc does not have a “native” time step. In other words, it can and does accept data on any interval. For LEED applications, this typically means a 365-day reporting period and monthly measurements for energy and water, annual surveys for transportation, human experience, and waste.

Re-Entry is different. Infection-control requires more frequent data collection and faster feedback loops. Consequently, Re-Entry is based on a 90-day reporting period. Specific time limits include:

- *Facility management:* no expiration, recommendation to review plans and policies every 90-days
- *Occupant observations:* survey results expire after 90-days
- *Indoor air quality:* data expire after 90-days

Data remain on the platform after they expire. However, they no longer count toward the Comp Score or sub-scores.



Facility Management Comprehensiveness Score

Arc will generate a Facility Management Comprehensiveness Score ("Comp Score"). The Comp Score will reflect a 0 to 100% measure of the fraction of positive responses compared to the total number of potential positive responses.

The Facility Management component has 41 data elements, including boolean responses (i.e., yes, no) and opportunities to provide a supporting link or file.

A Facility Management Comp Score of 100% indicates that a facility manager provided a "yes" answer for each question, along with a supporting link or file. Multiple file uploads or links are allowed, but they do not increase the Comp Score.

By default, the Facility Management Comp Score is based on the most recent response to the Facility Management Survey. The most recent response supersedes all previous responses for the purposes of the Comp Score. Arc maintains a record of previous responses to each applicable question.

In contrast to other components, responses to the Facility Management Survey are considered valid for an indefinite period of time (i.e., no time limit or moving window is applied to these data).

Table 1. Comparison of the existing Arc survey with the Re-Entry Facility Manager Survey.

Existing Arc Facility Management Survey	Re-Entry Facility Manager Survey
None	Leadership and accountability Operating plans, policies, and procedures Alignment with public health authorities Plan or policies includes strategies for: • Occupant communication and signage • Personal protection equipment • Cleaning and disinfection • Occupant screening • Social distancing • HVAC management • Elevator management • Potable water management • Air system assessment



Occupant Observations

Arc has long-standing tools to understand occupant satisfaction. This includes an email-based survey asking occupants about their experience. The survey dynamically

expands to ask for more information about reasons for satisfaction or dissatisfaction. This simple occupant satisfaction instrument provides the foundation for an expanded set of occupant observations to support re-entry.

The goal is to support an iterative feedback loop between the intentions of facility management and the experience of occupants. To this end, occupant observations become a source of “ground truth” to confirm expectations or identify needs for management action.

Re-entry-specific elements include:

- Observations about the presence of disease control signage
- Observations about occupant screening, such as temperature checks
- Perceived access to disinfecting products
- Perception of social distance

Users are asked to evaluate each on a 5-point Likert scale:

- Never
- Rarely
- Sometimes
- Usually
- Always

Each element is associated with a free text box which provides opportunities to suggest opportunities for improvement if the response is less than “always”.

Users can select one of three types of surveys to fit their situation:

- Common areas (“base building” only)
- Tenant space only
- Whole building



Note, these categories can be interpreted to meet the needs of specific circumstances. They are not explicitly used in benchmarking between users or across portfolios. Consequently, users could, say, use "tenant space" to indicate "vendor space" in a sporting venue or other permutations.

This selection changes the introduction to the survey to request observations from the selected scope. Each option asks the respondent to reflect on a different area, such as only common areas (base building) or their organization's workspace (tenant space).

The selected survey can be targeted at specific groups, including:

- Facility management team or crew
- Tenants or other habitual occupants
- Visitors

Again, users can adapt the interpretation of these categories to fit their needs. They simply designate different groups of respondents.

Information about scope and groups is stored with responses to support follow up analysis. Individual survey responses are anonymous with no identifiable information (i.e., an Arc user can see the scope and group, but not the identity of individuals).

Arc will deliver these occupant observation surveys and track responses within a specified time period. Users may select the interval that surveys are repeated. The default recommendation is weekly. Arc can also provide project-specific links that can be distributed through other email or social media platforms.

The occupant survey end-points can also be directly populated by Arc's integration partners during the [Arc API](#).

Sample Occupant Observation Responses

The project manager makes two selections to control the framing and distribution of the occupant survey. First, the manager selects the scope of the response (base building, tenant space, or whole building). Second, the manager selects the group (facility management team/crew, tenants/vendors, or visitors).



An occupant might respond to the survey with (bold, highlighted items selected from the lists):

1. Occupant satisfaction
 - a. Extremely dissatisfied, very unsatisfied, unsatisfied, neither satisfied nor unsatisfied, satisfied, **very satisfied**, extremely satisfied
 - b. If satisfied, select the options that significant enhance your satisfaction: **thermal comfort**, cleanliness, views, sound, light, **daylight**, **air quality**, privacy
 - c. If dissatisfied, select the options that significant reduce your satisfaction: dirty, smelly, stuffy, acoustics, hot, cold, dark, glare, privacy, humid, drafty, bright, views, sound
2. Occupants know who to contact for information or to provide feedback about infection control practices.
 - a. Select **yes** or no.
3. Observations about the presence of disease control signage
 - a. Select never, rarely, sometimes, **usually**, always
 - If not always, where is disease control signage missing?
 - **7th floor kitchen**
4. Observations about PPE compliance *by staff*.
 - a. Select never, rarely, sometimes, usually, **always**
5. Observations about occupant screening, such as temperature checks
 - a. Select never, rarely, sometimes, usually, **always**
6. Do you have access to handwashing and disinfection?
 - a. Select never, rarely, sometimes, usually, **always**
7. Does the facility support social distancing?
 - a. Select never, rarely, **sometimes**, usually, always
8. Do people maintain social distance?
 - a. Select never, rarely, sometimes, usually, always
 - If not always, where is social distance not maintained?
 - a. **Elevator lobby**

Occupant Observations Comprehensiveness Score

Arc will generate an Occupant Observations Comprehensiveness Score ("Comp Score"). The Comp Score will reflect a 0 to 100 measure of the fraction of positive responses compared to the total number of responses.

For Facility Management, this means that there are six scored data elements (questions), each with a maximum value of 4 on a 5-point 0-to-4 scale.



This means that the most comprehensive possible is an average of “always” (a value of 4) for all six items -- a total potential value of 28. As a default, survey responses are aggregated over a rolling 31-day window and compared to this maximum value on a scale of 0 to 100%.

This means that a facility with uniformly positive responses for all six indicators will receive a score of 100% for a 30 day period. Data older than 90 days are retained in the system; however, they do not contribute to the Occupant Observations Comp Score.

Note: The occupant observation survey also contains a seventh question, “Do you feel protected from infectious disease in this facility?”. Responses to this high level question can inform management. However, they are not directly related to comprehensiveness, and they are not scored.

Table 2. Comparison of the existing Arc occupant survey with the Re-entry occupant observation survey.

Existing Arc Occupant Survey	Re-Entry Occupant Survey
Occupant satisfaction plus: • If satisfied, source of satisfaction • If dissatisfied, source of dissatisfaction	Existing Arc occupant survey plus additional criteria: Facility management • Aware of contact information/process Disease control signage • Present in the common areas • Present in my workspace Presence of occupant screening • Present in the common areas • Present in my workspace Access to handwashing and disinfection • Access in common areas • Access in my workspace PPE use • Appropriate, consistent use by staff



Indoor Air Quality

Measurements of indoor air quality provide proxy measures for factors believed to be associated with disease transmission. It is important to note that none of the measurements identified below provide direct information about infectious agents. Rather, they describe proxies for conditions identified by scientific literature ([Rastogi et al. 2020](#)).

Measurements and interpretations include:

- **CO₂:** High indoor CO₂ concentrations indicate inadequate ventilation or crowding. Building standards (e.g., ASHRAE 62, EN 16798-1) have consistently sought to encourage greater ventilation to dilute indoor pollutants and pathogens. High CO₂ concentration levels have also been correlated with reduced cognitive performance and alertness. Recent reviews such as [Azuma et al. \(2018\)](#) summarize the literature. *CO₂ contributes 50% of the IAQ sub-score.*
- **Relative humidity:** Relative humidity between approximately 40 and 60% has been correlated with reduced disease transmission. Recent reviews such as [Lowen and Steel \(2014\)](#) and [Marr et al. \(2019\)](#) summarize the literature. *Relative humidity contributes approximately 17% of the IAQ sub-score.*
- **TVOC concentration:** TVOC concentrations are not directly related to disease transmission. They are included here, because they may provide information about excessive applications of cleaning products and/or inadequate ventilation. Reviews by the [US Environmental Protection Agency](#) and [Lawrence Berkeley National Laboratory](#) provide more information. *TVOC contributes approximately 17% of the IAQ sub-score.*
- **Particulate matter concentration:** The presence of relatively high concentrations of particulates may indicate inadequate ventilation or filtration. There is limited evidence that particulate matter concentrations may be related to the rate of viral spread under specific circumstances (e.g., [Setti et al. 2020](#)) based on data from Northern Italy). High ambient particulate concentrations have been linked to greater incidence of chronic respiratory diseases such as COPD and asthma, and a host of other health issues. The respiratory conditions may in turn exacerbate the susceptibility to, and impact of, COVID-19 on individuals. *PM_{2.5} contributes approximately 17% of the IAQ sub-score.*



Each metric will be assessed to determine the fraction of occupied space and time covered by measurements. In turn, these data are interpreted to estimate the fraction of occupied hours when conditions are in the good, acceptable, or investigate range. Values in the good or acceptable ranges count toward the Comp Score and IAQ sub-score.

Sample IAQ Measurements

Projects may have any combination of IAQ measurements. The following example illustrates information that may be provided for a project with relative humidity (RH) and total volatile organic compounds (TVOC).

Relative humidity

Spatial coverage

- RH is measured by stationary, in situ sensors for each HVAC zone.
- The spatial coverage is estimated at 100% for the period.

Temporal coverage

- RH is measured by in situ sensors for each HVAC zone at 5 min intervals.
- The facility HVAC service operates 60 hours.
- There is at least one RH measurement per zone for all 60 hours.
- The temporal coverage is estimated at 100% for the period.

Performance

- RH data ranged from 41% to 58% across all zones and all measurements during operating hours.
- The performance value is 100% in “good” status, 0% in “warning”, and 0% in “investigate.”

Carbon dioxide

Spatial coverage

- CO₂ is measured by hand-held sensors in 10 out of 100 rooms or enclosed spaces.
- The spatial coverage is estimated at 10%.

Temporal coverage

- CO₂ measurements occurred over 2 hours during the period.
- The facility operates 60 hours.
- The temporal coverage is estimated at 3% for the period.



Performance

- CO₂ measurements ranged from 500 ppm to 1,300 ppm.
- The performance value is 50% “good” (≤ 750 ppm), 30% in “warning” (750-1000 ppm), and 20% in “investigate” ($> 1,000$ ppm).

The other variables follow a similar pattern.

IAQ Comprehensiveness Score

Arc will generate an IAQ Comprehensiveness Score (“Comp Score”). The Comp Score will reflect a 0 to 100% measure based on spatial coverage (floor area, rooms, or HVAC zones), temporal coverage (operating hours), and performance (time in “good” range). Each of these factors has a maximum value of 100, so the maximum value per measurement is 300. This is repeated across all six measurements (relative humidity, CO₂, TVOC, PM₁, PM_{2.5}, and PM₁₀).

A few details about how this is computed:

Spatial coverage indicates the fraction of the project covered by each type of sensor. Users should assume that an individual sensor covers approximately 500 square meters (5,280 square feet) ([RESET Air Standard for Commercial Interiors](#)) or following guidance from their vendor or product manufacturer (e.g., [arbnco Best Practice Guide](#)). While sensor coverage will differ based on building layouts and installation practicalities, projects should aim for the smallest effective coverage area of a sensor, and the coverage area of a single sensor should not exceed 500 m². For example, at least one sensor in each HVAC zone or enclosed room could suffice for adequate coverage, provided those zones or enclosed rooms are smaller than 500 m² each. .

As examples:

- Measurements from one relative humidity sensor covering 500 m² in a 5,000 square meter open space would be presumed and documented to provide a coverage of 10% (500 m² / 5000 m²).
- Estimate an effective radius around each sensor and derive the covered area based on manufacturer or vendor guidance (e.g., arbnco [Best Practice Guide](#)).
- Follow and reference guidance from a third-party standard, such the RESET Air Standard 2.0 for the design and operation of monitoring networks.



Another strategy would be to use in-duct or air distribution system-based measurements. These may provide an efficient way to cover large fractions of a facility. In this case, coverage is based on the floor area covered by the air distribution system:

- Air quality can be monitored within the mechanical system, communicating the quality of the air being delivered by landlords and operators to occupants. An in-duct strategy should ensure that sensors are installed on supply air ducts and cover a combined floor area equivalent to no less than **30%** of the building area ([RESET Air Standard for Core & Shell](#)).

Arc assumes that coverage continues from the last reported value through the present unless this value is changed due to reorganisation of space or sensor layouts. Arc combines values as an average of daily values to provide an estimate for a given time period.

Tips for Entering Spatial Data Coverage

Some users may not be able to provide a quantitative estimate of spatial data coverage. We know that there are many potentially confounding factors and unknowns (e.g., the area covered by any given sensor). It is important to remember that the purpose is to provide a rough estimate of the fraction occupied space associated with each measurement (i.e., are you covering a small fraction of the area, most of the space, or all of the space).

If a quantitative estimate is not possible, users may estimate coverage and enter the following values:

- **Low Coverage:** <25% of occupied space is associated with measurements
 - *Enter 25% for the applicable date range*
- **Medium Coverage:** 25%-75% of occupied space is associated with measurements
 - *Enter 50% for the applicable date range*
- **High Coverage:** >75% of occupied space is associated with measurements
 - *Enter 100% for the applicable date range*

Describe your estimate with a piece of document. This can be a simple note explaining your rationale.



Temporal coverage indicates the fraction of time covered by IAQ measurements during the last 30 days. For Arc, a time period is “covered” if at least one measurement is taken during the period in a project. For the purpose of infection control, we are assuming 24/7 operations and 1 hour as a fundamental unit of temporal coverage (a.k.a., freshness period for measurements). Consequently, temporal coverage is defined as the percentage of hours within a period that have one or more readings for a given parameter. Additional measurements during a given period do not increase coverage (i.e., temporal coverage has a maximum value of 100% which is satisfied by at least one reading each hour). This means that 1 day has a maximum of 24 readings that will count towards temporal coverage.

As an example, one measurement taken during a 1-year period would provide a coverage of 0.01% (1/8760); presuming 24/7 operations. Considerations for the calculation include measurement rate (interval between observations) and reporting interval (period over which measurements are aggregated and sent to Arc).

A high measurement rate, e.g., those recommended by standards such as WELL and RESET, are better for a richer, more representative characterisation of IEQ. To keep this metric simple, Arc requires a report only every hour (i.e., the reporting interval). Arc assumes that coverage continues from the last reported value through the present unless this value is changed with new value. Arc combines values as an average of daily values to provide an estimate for a given time period.

Tips for Entering Temporal Data Coverage

Some users may not be able to provide a quantitative estimate of temporal data coverage. We know that there are many potentially confounding factors and unknowns. It is important to remember that the purpose is to provide a rough estimate of the fraction occupied hours associated with each measurement (i.e., are you covering a small fraction, most hours, or all of them).

If a quantitative estimate is not possible, users may estimate coverage and enter the following values:

- **Low Coverage:** <25% of occupied hours are associated with a measurement
 - *Enter 25% for the applicable date range.*
- **Medium Coverage:** 25%-75% of occupied hours are associated with a measurement
 - *Enter 50% for the applicable date range.*



- **High Coverage:** >75% of occupied hours are associated with a measurement
 - Enter 100% for the applicable date range.

Describe your estimate in supporting documentation. This can be a simple note explaining the rationale.

In providing these estimates, please note the intent: a good-faith estimate of the fraction of occupied hours covered by measurements. The purpose is to characterize this aspect of data coverage within real world constraints on measurement and estimation.

Performance is divided by thresholds into three categories: good, acceptable, and investigate. Each period is assigned to one of the three categories.

Performance is typically integrated over some period of time, most often hours or days. These periods may contain any number of sensor readings. The intent is to communicate the percentage of time in each category. For example:

- If hourly (for sub-hourly) data are available, Performance would be calculated as the average of hourly values. Missing values would be excluded from Performance, because they are already accounted for in the preceding metrics.
- If daily data are available, Performance would be calculated as the average of daily values. Again, missing values would be excluded.

The result would be the average fraction of periods in each of the three categories over the last 30 days. Data older than 30 days do not contribute to the IAQ Comprehensiveness Comp Score.

The IAQ Comp Score combines the three equal elements:

- Spatial Coverage
- Temporal Coverage
- Performance (as the fraction of time in the “good” condition)

The result is that a project has a maximum score of 300 reflecting the comprehensiveness of data and measured performance. The same structure is used for each of the sub-components (i.e., relative humidity, CO₂, TVOC, and PM).



Table 3. Draft thresholds used to assign time in each condition: good, warning, investigate. These thresholds are subject to further review and adjustment based on sensor uncertainty. Source: Parag Rastogi, arbnco.

Parameter	Investigate	Low Warning (Acceptable)	Good	High Warning (Acceptable)	Investigate	Units	Included in Comp Score	Source
CO ₂	350	n/a	350-750	1,000	>1000	ppm	Yes	CIBSE Guide A 2018 (Table 4.1, 4.5) LEED v4.1 O+M Beta Guide
RH	30	30-40	40-60	60-70	>70	%	Yes	CIBSE Guide A 2018
TVOC ²	0	n/a	0-175	175-200	>200	µg/m ³	Yes	RESET v2 2018
PM ₁	0	n/a	0-12	12-15	>15	µg/m ³	No	TBD
PM _{2.5}	0	n/a	0-12	12-15	>15	µg/m ³	Yes	RESET v2 2018 WELL v2 2020, Optimization 1
PM ₁₀	0	n/a	0-30	30-35	>35	µg/m ³	No	WELL v2 2020, Optimization 1

² TVOC measurements in ppb should be converted to µg/m³ using a conversion factor of 3.767.



Note on Data Quality

Objective measures of data quality are not currently part of the IAQ Comp Score. However, the quality of IAQ measurements is a significant management issue, and it varies significantly based on a variety of factors, including sampling design, sensor placement, sensor capabilities, sensor maintenance, data processing, and more ([RESET Standard](#)). An extensive peer-review literature is emerging in this area with publications such as [Sun et al. 2019](#) and [Chojer et al. 2020](#), and the [U.S. Environmental Protection Agency Air Sensor Toolbox](#). Arc Re-Entry users may consider the benefits of third-party accredited hardware as one element of a comprehensive strategy to promote data quality.

Table 4. Comparison of the existing Arc indoor air quality with the new re-entry enhanced indoor air quality.

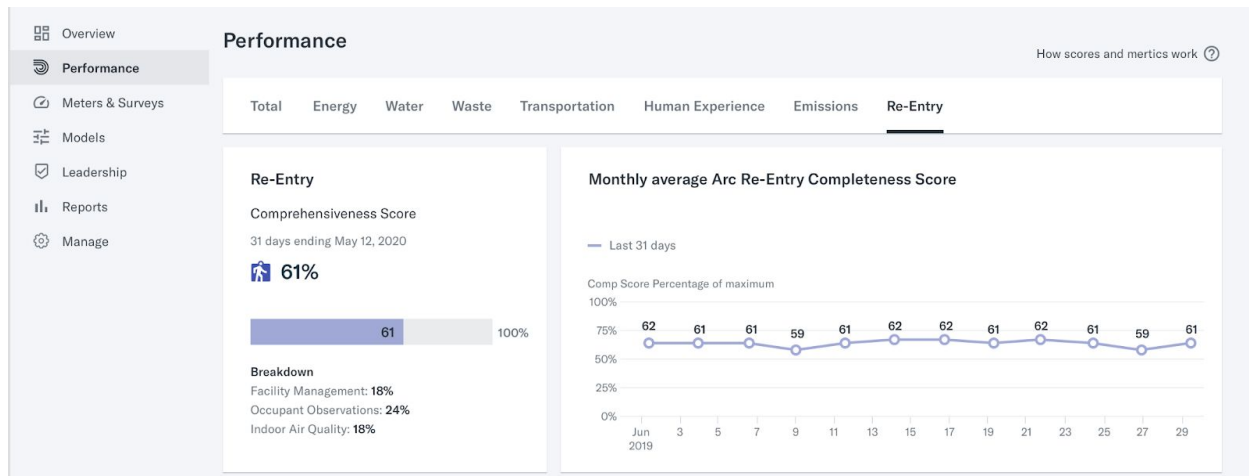
Existing Arc Indoor Air Quality	Re-Entry Enhanced Indoor Air Quality
Annual measurement of: 95th percentile CO2 concentration - Maximum TVOC concentration	Existing Arc occupant survey plus additional criteria: Data coverage - Fraction of occupied space and time covered by sensing Relative humidity - Fraction of occupied hours within optimal RH range Particulate matter - Fraction of occupied hours below threshold

Analysis

Arc provides all users information through the Re-Entry under the Performance tab. This provides a summary of the overall Comp Score, along with sub-scores for Facility Management, Occupant Observations, and Indoor Air Quality. This allows users to track the comprehensiveness of re-entry efforts day-by-day. Note that this contrasts with other Arc reporting, which provides month-by-month trends. Users can view occupant experiences for specific scopes and groups with the selection tool.



Figure 5. The Arc Re-Entry dashboard provides a day-by-day overview of the comprehensiveness of infection control practices, along with sub-scores for facility management, occupant observations, and indoor air quality.



Arc Essential users can also create and customize a Re-Entry Report. This is available through the Report tab. Users can select the default Arc logo or upload their own image.

The project Re-Entry Report provides all the information in the Performance tab, plus a comparison between the project and all other Re-Entry participants. Over time, Arc expects to allow users to refine the comparison, such as comparing a project to a specific portfolio or group. This capability will be more valuable as more data becomes available.

The Re-Entry Report provides a one-page overview of activities, described as “scorecard”. The scorecard can be distributed separately from the report as an “at-a-glance” summary of infection-control efforts. The check marks indicate a positive response, the presence of occupant feedback, and the availability of at least some measured IAQ data in each category. There are no minimums for these elements at this time; the presence of any data is sufficient to receive a check mark.



Figure 6. The Arc Re-Entry dashboard for Arc Essentials users provides histograms comparing project performance to all other participants.



The following sections provide more detailed information about each category, including details about the relationship between management expectations (plans and policies) and occupant observations.



Figure 7. The Arc Re-Entry Report (available to Arc Essentials subscribers) provides a one-page overview of policy elements and the presence of data from occupants and IAQ measurements.



Arc Re-Entry Scorecard

Arc Scoring Demonstration Project

2099 Pennsylvania Avenue, Washington, DC, 20006



Facility Management

Last response: Sep 22, 2020

Measure	Response	Documentation
Disease control plans, policies and procedures	✓ Yes	NA
Policies, plans, and procedures aligned with authorities	✓ Yes	✗ No
Disease control communication and signage	✗ No	✗ No
Hand washing and disinfection	✗ No	✗ No
Occupant screening	✗ No	✗ No
Sick leave for staff and contractors	✗ No	✗ No
Employee health insurance	✗ No	✗ No
Social distancing	✗ No	✗ No
HVAC system operation	✗ No	✗ No
HVAC - increase outdoor air supply	✓ Yes	✗ No
HVAC - increase ventilation rates	✓ Yes	✗ No
HVAC - filtration	✓ Yes	✗ No
Elevator management	✗ No	✗ No
Potable water system operation	✗ No	✗ No



Occupant Observations

Aug 23, 2020 through Sep 22, 2020

Measure	Response	Total Responses
Building systems operation strategy	✓ Yes	1



Indoor Air Quality

Aug 23, 2020 through Sep 22, 2020

Meter	IAQ Comprehensiveness Score	Response
Relative Humidity	Included	✓ Yes
Indoor Carbon Dioxide	Included	✓ Yes
Indoor TVOC	Included	✓ Yes
Indoor PM 1.0	Excluded	✗ No
Indoor PM 2.5	Included	✓ Yes
Indoor PM 10	Excluded	✗ No



Safety First Pilot Credit

Projects pursuing LEED certification may be eligible to use Arc Re-Entry to achieve a Safety First Pilot Credit. Projects can earn 1 point toward a new certification in the [v2009, v4, and v4.1 rating systems](#).

LEED Requirements



LEED O+M: Existing Buildings • v4.1 - LEED v4.1

Safety First: Arc Re-Entry

Pilot credits

INpc142 | Possible 1 Points

- 1) Use the Arc Re-Entry tool to describe the facility's infection control process, including:
 - a) Facility management plans, policies, and procedures;
 - b) Connections between plans, policies, and procedures and relevant public health authorities;
 - c) Collection and management of occupant feedback; and
 - d) Measurement of key indoor air quality metrics.

Determine the Arc Re-Entry Comprehensiveness Score ("Comp Score") from the tool, and associated sub-scores for Facility Management, Occupant Observations, and Indoor Air Quality. The calculation of the Comp Score is described in the Arc Guide to Re-Entry.

2. Create and submit an Arc Re-Entry report. Arc will provide free, temporary access to Arc Re-Entry reports for LEED project teams registered for this pilot credit. The project's Arc Re-Entry report must show sub-scores equal to or greater than:
 - a. 50 points for Facility Management
 - b. 25 points for Occupant Observations
 - c. 25 points for Indoor Air Quality

These minimums can be met with any combination of responses, documentation, or measurements. There are no specific prerequisites in these categories.

In addition to this Pilot Credit, projects achieving these sub-scores are also eligible for the "Managing for a Safer Re-Entry" designation. This is available from the Arc team by emailing contact@arcskoru.com.



3. Establish a process for continuous improvement via the Arc Re-Entry tool. Outline a plan for how frequently the project plans to continue to use the Arc Re-Entry tool. Include when facility management survey information will be updated, when occupant survey data collections will be completed ("campaigns"), and when additional IAQ measurements may be collected. Recommended frequencies are outlined in the Arc Guide to Re-Entry [this document] and the article, [Managing for Re-Entry with Arc](#), provides a practical example.

Conclusion

The Arc Re-Entry provides practical tools to collect, manage, and interpret information about facility management, occupant experience, and indoor environmental conditions. These tools can help inform and improve facility management and support effectiveness communications with occupants.

Arc Re-Entry does not stand alone. Ideally, it should be deployed as part of a comprehensive infection control management system which includes input from public health and industrial hygiene specialists. This type of comprehensive system recognizes that protection comes from the consistent, end-to-end operation of the management process, not any single strategy or technology. Arc can support this process, but it cannot guarantee outcomes.

As part of the right management system, Arc Re-Entry can help build the knowledge and confidence needed to safely occupy the places where we live, work, and play.

Contact

Contact Chris Pyke (cpyke@arcskoru.com) to provide feedback or get more information.

About Arc

ArcSkoru (Arc) is a wholly-owned subsidiary of the Green Business Certification, Inc. Based in Washington, DC, Arc is dedicated to making real world performance measurement an integral and ubiquitous part of green building practice. Learn more at www.arcskoru.com/about