

Meeting of CRC with President Morehead, MOTF, and PMAB Leadership 14 December 2020

The meeting was convened at 11 a.m.

In Attendance

President Morehead

Medical Oversight Task Force (MOTF)

- Dr. Garth Russo, Executive Director, University Health Center
- Dr. Marsha Davis, Dean, College of Public Health
- Dr. Lisa Nolan, Dean, College of Vet Med
- Dr. Shelley Nuss, Dean, AU/UGA Medical Partnership

Preventative Measures Advisory Board (PMAB) Chairs

- Dr. Lisa Nolan, Dean, College of Vet Med
- Mr. John McCollum, Associate Vice President for Environmental Safety

Vice-President of Instruction Rahul Shrivastav

Assistant to the President Kyle Tschepikow

COVID-19 Response Committee (CRC)

Co-Chair Janette Hill, Professor, Learning, Design, & Technology, MFE COE	Co-Chair Annette Poulsen, Professor, Sterne Chair of Banking & Finance, Terry COB
Secretary Stuart Ivy, Senior IT Manager	Asim Ahmed, President, UGA Student Government Association
Don DeMaria, Director, Washington Semester Program	Paula Krimer, Professor, College of Veterinary Medicine
Bill Lanzilotta, Associate Professor, Biochemistry & Molecular Biology, Franklin Arts & Sciences	Christine Scartz, Clinical Assistant Professor, School of Law
Cynthia Tope, Graduate University Representative, Graduate Student Association	Kari K Turner, Associate Professor, Animal & Dairy Science, College of Agricultural & Environmental Science
Janet Westpheling, Professor, Genetics, Franklin Arts & Sciences (unable to attend meeting)	Beth Woods, Executive Director for IT, Franklin Arts & Sciences

Co-Chair Janette Hill welcomed all to the meeting and thanked President Morehead and Task Force Leaders for meeting with the CRC. She reminded everyone that as last time, we will record the meeting and that the recording will be deleted once notes have been taken and reports

prepared from the meeting. She also provided a brief recap of CRC activities since the last meeting, including:

- We have met weekly to discuss concerns that we have heard from UGA constituents.
- Dr. Mark Ebell joined us as a guest speaker to inform us on COVID-19 and UGA activities related to the virus.
- We prepared a report of our last meeting and shared it with University Council members and the larger UGA community as well last week (12/10).
- We have analyzed data from a Qualtrics survey that has been circulated to University Council members and the full university community. To date, we have received more than 1000 responses. We are continuing to collect responses and have used and will continue to use the responses to inform our discussions with you about issues that the faculty, staff, and students would like addressed.

We have a few questions to focus our discussion today. Before we begin that, are there any updates that you would like to present?

President Morehead: Thank you. Let me make just a few brief remarks to get us started. And then I'd like to turn things over to Dr. Russo because he does have a report he'd like to give on behalf of the Medical Oversight Task Force. As I stated in my message joint with the Provost, sent last week, this has been a long and difficult semester, but also a successful semester in many ways despite the pandemic. The University community has demonstrated tremendous resilience and perseverance in the face of extraordinary circumstances. I am proud of what we have been able to accomplish and of the people across campus who have played a leadership role in the response to the pandemic.

Testing cannot be mandated according to USG policy, but I am very pleased by the strong response to our testing program on campus this fall. And I think Dr. Russo would agree that we have exceeded expectations.

We are eagerly awaiting developments in the vaccine area. UGA will participate in the federal and state coordinated plans on the administration of the vaccine when it becomes available. At this time, there are no specifics on the roll-out, but we do not expect to receive a large volume of the vaccine until later in spring semester. Stay tuned on that front.

Finally, the University has updated the training modules for faculty, staff and students and those will be available in early January. The University is also providing new face coverings to faculty, staff and students. Overall, there has been a high level of compliance with our mask policy. We expect to continue the mask policy, along with social distancing and emphasis on sanitation, in spring semester.

Dr. Russo: I appreciate being here and being able to share this information with you.

COVID in the state of Georgia is on the uptick now. It is disproportionately so in the communities around Clarke County; more so than within Clarke County. But it seems to be leveling off and flattening somewhat now. There is no question that the latter part of fall with Thanksgiving had an impact. We experienced an uptick on campus but that seems to be flattening out and may be even diminishing, which is a very positive sign. I hope that we can convince folks to stay within their nuclear unit to minimize commingling through winter break so there won't be an uptick after break.

Right now, surveillance testing is exceeding what we thought it would be. We are at a steady 450 tests per day. This week we were going to add some pop-up saliva-based testing but there weren't really any good locations since so many people are off campus. Thus, we're running the saliva-based tests in parallel with the surveillance testing at Legion. Individuals can choose saliva-based testing if they prefer.

There are not as many people on campus to test now but we're prepared to ramp up volume if needed. Going into break, we will do testing on the 22nd and 23rd at Legion Field. On the 24th, testing will be at the Health Center with same day turnaround as possible. Hopefully, folks will get their test results before Christmas Day.

We are leaving DawgCheck on through the holiday. It's a good reminder for folks to check for symptoms that would suggest they should be tested. The Department of Public Health is doing testing around the state with excess capacity at the moment. It's a free resource that can be accessed no matter where we are in the state.

The CDC changed the definition of when quarantine should be followed, and we are in the process of implementing that into our messaging. The sense is that 14 days is onerous, even though it might be the most appropriate period of time to be sure that you're not contagious. So, the CDC is recommending a 10-day quarantine with careful monitoring of potential symptoms. Individuals are still encouraged to be super cautious in the next four days. In addition, they shortened the quarantine window to 7 days when you have a negative COVID test on day five or after. Again, they recommend taking precautions in a super aggressive manner if quarantined.

Because there is some subtlety in the application of these quarantine measures, we're having a difficult time figuring out how to operationalize the definition in our communications, in DawgCheck and in our FAQs. In addition, USG is working with HR to determine correct employee protocols. By the beginning of spring semester, we will want to have this information in all of our materials.

Faculty, staff and student refresher modules for training have been updated. In addition, training modules with the full gamut of information will be available for transfer and new students and new employees.

On the vaccine, we are a part of the strategic national stockpile. We are a closed pod, and the University Health Center is the interface with DPH in acquiring, storing and administering the vaccine. We are ready to go whenever we get the vaccine. Vaccine distribution will be prioritized according to guidelines from federal and state agencies. Health care workers on campus, for example, will have lower priority than those currently in nursing homes or acute care hospitals. We need to let the [larger] system [outside of UGA] work through those people who are at greatest risk before we would expect to get the vaccine. And that's just going to be a function of how rapidly they can ramp up production.

We are transitioning to saliva-based testing; the nasal swabs will go away as we use up supplies. The saliva tests require less saliva than in the past and there will be no need to fast. Saliva-based testing is a smoother system with less need for PPE. It is more portable, allowing popup locations closer to where students congregate.

The plan for January is to start at maximum capacity [for testing]. Popups will be close to the dorms. We also are investigating putting popup locations close to student apartments. We want to put ourselves in the proximity of students and be very encouraging for students to be tested. The University Health Center website will publicize popup locations. Legion Field, however, will remain the core location. When we have the vaccine, it will probably be distributed at Legion Field as well.

Dean Nolan: The Preventative Measures Advisory Board has continued to work with colleges, departments, programs, individuals, and the administration in planning for the resumption of classes and other campus activities. For example, recently we have worked with campus housing, auxiliary services, athletics, rec sports, researchers and the public service and outreach organizations.

Currently, we're working with the Office of Emergency Preparedness, Training and Development, Student Affairs and Human Resources to develop the updated COVID-19 training modules for new students, faculty and staff. We're also working with the groups to develop the refresher course for the rest of us.

We are developing campus-wide communication on areas of concern related to large gatherings. We hope that these will prove very useful to units as they plan their activities.

Dr. Shrivastav: I would highlight a couple of things. We continue to work with HR and the Provost's office to make the necessary adjustments for faculty who have ADA accommodations for teaching. Most of these adjustments are done but a few are still trickling in. For the most part, that process has worked out well.

Late last week, our team made available a widget on ELC that is designed to help you manage class rolls and attendance for hybrid classes. So, if you log into ELC, you'll see it right there on the top. We'll be broadcasting that early in spring.

We are watching registration and obviously New Student Orientation and registration. There'll be freshmen and transfer students coming in the spring, so we are paying detailed attention to registration patterns.

Last, I wanted to highlight that we've been working with the Educational Affairs Committee on a couple of things related to the spring semester. Attendance policy was one, and the big discussion we had was around what can and cannot be, or should or should not be, done during the instructional break days. We had a healthy discussion on that and the campus wide email that was sent Thursday last week included the recommendations.

Questions from the CRC

Co-Chair Dr. Hill: The latest COVID numbers are, frankly, frightening. CDC Director Dr. Robert Redfield predicts that the US will experience more deaths from COVID-19 per day than from 9/11 or Pearl Harbor for the next 60 -90 days and that there will be more than 300,000 American deaths soon. The situation is more dire than Spring 2020 when campus was shut down. How does the current situation change the conversations you are having about UGA activities this coming spring? Are you actively discussing alternative plans for spring from those laid out earlier this semester? What alternative strategies are you considering?

President Morehead: I can start and then turn things over to Dr. Russo and anyone else who wants to respond. We sort of got ahead of much of this by deciding that we would delay spring semester by a few days and eliminating spring break. Coupled with our plan to substantially increase testing, beginning on January 4, we hope we've addressed much of these concerns.

I do want to remind you of what Dr. Russo said in his report, though. What we saw here on campus was a tremendous spike right after Thanksgiving, the first two days as I recall the data, and then a leveling off, which has continued since that time. So, we're going to be messaging and urging our campus community not to do the things either on Christmas Day or New Year's Eve or Day that could lead to another spike, similar to what we saw at Thanksgiving.

We continue to see what we've seen from the beginning – the virus is not being transmitted in the classroom. Rather, it seems to be transmitted from everything that goes on outside of the classroom. So, if we can encourage our campus community to be smart about what they do outside of the classroom, we can positively impact what will happen on this campus.

Dr. Russo: There are factors that are constraints for us, including economic constraints, and federal and state guidelines. For me, I look to a different federal message going forward and that will help us respond to these concerns. I think that we'll be in an environment that's more interactive and sensitive to the experience of the population at large than we have had thus far. I think that sets a backdrop for much more cogent conversation going forward. And I think it allows us the ability to look at some of these things that we do not have control over and seek out ways to do things differently.

Individuals need to follow the measures that control the virus. If the citizenry takes that seriously, it will really make a difference. And within that backdrop, any haven that we can create within that context is helpful. I still am convinced that the campus community at large is one of those havens; it's something that we have to consider quite precious and do everything we can to preserve.

My intent going forward is to be absolutely positive that we retain, and double down, on all the efforts that we know make a big difference. We've learned one thing that we didn't know last spring, and that is, if we behave properly, we can be safe. That I think is something that I have great confidence in and has been repeatedly demonstrated to me. What it means is that we have to be safer with people with whom we feel safe. And that I think is really a hard part. And that's what Thanksgiving says to me – we went home, we know these people, they're familiar to us. And so, we relaxed some of our vigilance and we really need to not do that. I see us basically getting even stronger in our results if we persist in doing the things that we know are right.

When you bring the healthcare infrastructure into the mix, our voices will not matter. If the health care infrastructure becomes saturated, we will be told what to do. I have strong confidence in that. All decision making will be taken out of our hands when there are no ICU beds available.

I would add that these difficult conversations allow us to understand that we're all subjected to the same stressors, we just respond to them differently. But now's the time for us to find those ways in each of our own hearts to have grace for one another. And that includes being safe. The more we can keep that conversation going, the more we can focus on being able to contribute to getting out of the other side of this pandemic.

Co-Chair Dr. Poulsen: We know that you are asked this question in every setting, President Morehead, but because it is asked of us many times also, we would again like to bring up the mandatory testing question. We understand that USG has set down a mandate that we must follow. Is there any way to bring the concerns of campus to the Board of Regents to talk more fully about mandatory testing, or at least to require a test, or a required quarantine if there is no test, for students returning to campus spring semester?

President Morehead: We've gone as far we can on this. I discussed this issue with the Chancellor late last week who reminded me how ineffective the mandatory testing programs were at the University of Alabama in the fall. He notes that UGA has gone far beyond what all the other system schools, with the possible exception of Georgia Tech, have done. As you know, Georgia State isn't doing nearly what we're doing, nor is Kennesaw, nor is Georgia Southern. We have expended a lot of financial resources to do the level of testing we have done and that we are planning to do in the spring.

I am going to again use private funding from some of the discretionary funds that are donated to the President's office to try to create incentive packages that will lead to a lot of students doing testing again this spring as they did in the fall.

Dean Davis: We are beginning a study with Professors Mark Ebell and Ted Ross around antibody testing. They are planning a research study that will test a random sample of 500 to 1000 students to get the prevalence of the virus on campus. They just started planning this week, but I can give you more details as the study comes along.

Dr. Russo: We started to prepare the surveillance data to work with this study this past week so they could learn from the data we have already seen. It seems easy on the surface but it's kind of hard to do, especially when you don't have a truly random sample. The willingness to participate in surveillance testing can introduce bias. But in general, I think with the data that they have from us plus additional testing, they'll be able to put together a study that actually does a pretty good job of getting an idea of what the antibody footprint is. It could be that there's a fair number of people who already have antibody positivity.

Co-Chair Dr. Hill: Various groups on campus are advocating for a delay to in-person instruction for two weeks, basically allowing students to quarantine on campus while receiving on-line instruction. Is this being considered as an alternative for the start of spring semester?

Relatedly, are we overconfident in the "success" of classroom interactions not leading to more cases? The success of in-classroom interaction has been at least partially attributed to the low classroom density as most students are choosing on-line learning. If more students choose to come to class for face-to-face learning, the classroom density increases. We are hearing from many that increased emphasis on in-class instruction in spring needs to be further evaluated.

President Morehead: The Chancellor's response has been that there is no evidence that the virus has spread in the classroom where social distancing is maintained, and people are masked.

VP Shrivastav: With respect to the impact of classroom density, we'll have to wait and watch to some degree. But the lack of spread in classrooms is not just here. It's what I'm reading from universities around the country. I think it was Dean Nolan who shared an article from the [Chronicle of Higher Education <https://www.chronicle.com/article/the-5-biggest-lessons-weve-learned-about-how-coronavirus-spreads-on-campus>] which reinforced that pattern with reports across multiple universities. I feel better about it now than I did even a few weeks ago. We will learn more as spring semester comes around.

The teaching continuity fund has released about \$450,000 for spring semester for improving online and classroom instruction. The requests were routed through and prioritized by the deans and then sent to us. If there are additional needs, I'm happy to entertain those requests as we try our best to fund things that help with instruction. There is not unlimited amount of funding obviously but wherever possible we try our best to support those kinds of initiatives.

Co-Chair Dr. Hill: So, a follow up question about watching the density in the classrooms and how that might be impacting spread. Is there a metric by which we will pivot to online instruction?

President Morehead: No, the Chancellor has been emphatic on this point that he will consult with Dr. Toomey, the head of the Georgia Department of Public Health, if there is significant concern. But as he said before the fall semester began, he isn't going to agree in advance to certain criteria that would lead to an automatic pivot to online learning. Although we will still have obviously a lot of online learning in the spring. And in the summer, I imagine.

Dr. Nolan: There is one study that has shown that the greater the face-to-face instruction, the safer students were. I think that was Indiana University. Cornell University reported similar observations. [<https://news.iu.edu/stories/2020/11/iu/releases/20-analysis-supports-safety-of-in-person-courses.html>]; <https://www.insidehighered.com/news/2020/07/01/cornell-researchers-say-person-semester-university-safer-online-one>]. It just covered students, not faculty and staff.

Dr. Nuss: As we switch to saliva-based testing, I think you're going to see a way better uptake in terms of people wanting to get surveillance testing. With pooled specimens, we can increase our capacity even more and have more testing done. I think people will get more testing once we move to saliva-based testing.

Co-Chair Dr. Poulsen: We continue to get many questions related to the safety and well-being for staff, particularly as we see infection rates growing on campus as well as in the larger Athens community. We have heard anecdotal reports where staff or faculty are being asked to perform their job duties off-campus in situations that do not meet CDC criteria for safety. If an event is sponsored by UGA, and run by UGA faculty and staff, but not held on UGA property, can mask and social distancing guidelines be enforced?

Similarly, you may have seen the video from a UGA bus downtown in the evening full of students without masks. This is a situation that puts the student bus driver at risk where he or she have little ability to enforce required masking. Other student workers have commented that they are asked to enforce the mask policy, but their requests are not respected by fellow students. What additional enforcement mechanisms can be brought to bear on this?

President Morehead: I have no tolerance for people that are not wearing masks on campus, or on our buses, or engaged in any activities on campus so those are issues that I think we need to further explore and consider how we can tighten enforcement efforts. I think we all agree that social distancing and mask wearing are the ways to avoid the transmission of the disease, until we have a critical mass of people that have obtained the vaccine. I appreciate you bringing these situations to light. It certainly will be a topic of discussion in my senior staff meeting later this afternoon. I will further explore what we can do to address these issues.

Co-Chair Dr. Hill: We're hearing not just from student workers but also from staff members or non-tenured faculty that feel that they may be in situations where they cannot ask other people to follow the rules and guidelines. Is there a way to encourage better enforcement of the

guidelines, whether on campus or off? We did want to bring the issue to you because people have shared this information with us, that they feel like they're in untenable positions where they are working on behalf of UGA and they're placed in an environment, whether on or off campus, where people aren't masking and they're not social distancing,

President Morehead: This requires the supervisor being aware of the situation and then taking that issue forward. It's hard to address a situation unless the situation has been brought forward. For example, Vice President for Public Service and Outreach Jennifer Frum reached out to me last week about an issue she addressed when she found out about it. I think it depends on being aware of the situation so that it can be appropriately addressed. Dr. Frum does not want her staff exposed to situations that put them at risk.

Co-Chair Dr. Poulsen: We also have heard from staff asking for additional recognition of support for continuing to lower the density of campus in line with HR policies. In addition, you mentioned at our last meetings that there are procedures that could be followed if staff were not able to come to agreement with their supervisors. We were asked if we could help clarify that procedure.

President Morehead: There are certain jobs where you do have to be on campus. If fact, if we don't have the campus operating, we put at risk a number of jobs so we have to balance those constraints but no one should be required to take a risk in terms of being around unmasked individuals or lack of social distancing to do their jobs on campus.

Co-Chair Dr. Hill: This gets to the concerns of staff and non-tenured faculty. It can be frightening to speak out because they're worried about what that might mean and what could happen with their jobs. They find themselves in a public situation and they feel like they may not have direct recourse to enforce the guidelines.

President Morehead: You know, I do get frustrated with the notion that people feel frightened to speak out because no one yet has brought forward to me a single instance of someone being fired from this institution because they were trying to protect the public health and safety of the institution. And if that has happened, I need to know about it. Because I'm absolutely committed to protecting the public health and safety of our employees.

Co-Chair Dr. Poulsen: Perhaps it would be possible to provide a statement re-emphasizing that point for staff and faculty – that UGA should be an environment where we want communication, we want to be able to talk to administrators, whether it's at the top or at the college level or at the department level. To provide the sense that those discussions are welcome, as opposed to those discussions are something to be afraid of. Unfortunately, we do see the word “afraid” in our surveys.

President Morehead: Okay.

Co-Chair Dr. Hill: We want to note that we also heard from more than 400 graduate students in our recent survey, expressing concerns about safety on campus, mental health, testing and vaccinations. What would you suggest [can be done] to address these concerns?

President Morehead: As I understand it, Dean of the Graduate School Walcott has met with graduate students on multiple occasions, including as recently as the week before last if I recall. So, I don't think the dean is ignoring these inquiries at all. But the dean is not going to excuse a graduate teaching assistant from teaching in the classroom if he determines that it is safe and appropriate.

Co-Chair Dr. Poulsen: There are websites that rank university dashboards reporting COVID data. On one of these, UGA is 217 out of 349 colleges and universities. Ohio State University, for example, received an "A+" while UGA is a "B-." Have you evaluated whether there is room to upgrade our dashboard and provide some of the information that is available on these other sites?

Dr. Russo: I'll first have to apologize that I'm not familiar with Ohio State's dashboard, although I do appreciate the quality of the institution. I'm not averse to any kind of idea that would make the dashboard better. It has improved a lot since it started. At first, it was me and my Excel graphs. We have converted the data to Tableau, have provided more data and improved the usability of the site. I think it's pretty good.

The most common difference between dashboards across institutions is whether data are reported "real time" or summarized over a period like a week. Real-time data resonates with some people because it feels like they're getting steady information. But the reality is that they are getting a lot of variability from day to day. Both presentations have merit; neither is perfect.

We believe having data that we can report that's been sorted by the date of the test or diagnosis itself as opposed to the day of the report is a better strategy. Trends over a period of seven days or even more are probably more important than day-to-day trends. Smoothing out the data and controlling for the variability in reporting is just a principle that we started off with. It would be difficult to change that.

But outside of that, I'm not averse to providing any data we have. We've not purposely excluded any data that we know that we have access to, but we don't want the dashboard to be too noisy either. So, in some cases we use textual information to describe some data when we could include a graph. But I'm open to any kind of observations as to what specifically would make it better.

Co-Chair Dr. Hill: We did have a question that came up in terms of how the university is working with the local community where there's a high percentage of residents who are in a CDC-defined vulnerable population. We understand that we have some control over our bubble, that is, the University of Georgia, but we do interact with the community in a large way. We wondered if you could talk to us a little bit about that today.

Dr. Russo: Well, I will say that we're working in conjunction with the community as part of the emergency preparedness. So, when we say we're going to get vaccine, it's not like we're working on an open market for that. The distribution of vaccine is based on statewide demographic data. The community is going to receive far more vaccine than we will, because of the hospitals, and the infrastructure for frontline workers, and all those people it takes to support the health care system. Piedmont has a pretty large base of employees that live in this area, as does St. Mary's and Landmark. A lot of their people will be the first recipients of the vaccine. When it comes to the next tier, where many of us will fall, we would follow DPH guidelines.

Vaccine distribution at UGA will be determined by the same logic as that applied to the region. Just because we're a university doesn't change the distribution guidelines. It just changes the logistics of administering it.

One thing I can say is that there is going to be more parity in the vaccine distribution process than anything we've seen so far. There is a huge disparity in health care delivery, but this is a public health measure. Thus, we will have a public health response. I will be hugely disappointed if it turns out that there are any business or economic or cultural biases that come through. I don't think that's going to be the case.

Dean Nolan: We're also going to be a repository for about 20 northeast Georgia counties to help the Department of Public Health in storing and distributing vaccine. And that's true in South Georgia as well, where the University of Georgia facility at the Tifton Veterinary Diagnostic lab which will be a storage site for vaccine. So, we will be a major part of the vaccine team in our state. This is a point of pride for our university community.

Co-Chair Dr. Poulsen: I want to say once again how much we appreciate the efforts of President Morehead and the Task Force Leaders. Thank you so much. We know that this is not a situation that any of us want to be in, and we appreciate all the thought and care that goes into all your messaging and all your actions about the situation.

Co-Chair Dr. Hill: Indeed, it's tireless and thankless work. Often, we don't hear those thank yous. So, on behalf of the CRC, we want to say thank you to all of you. And thank you so much for the opportunity to meet with you.