## WEBINAR AGENDA

1. Welcome
2. Louisiana Department of Health Update
3. Explanation of the Exercise Rules and Expectations
4. Facilitated Discussion:
   - **Scenario 1:** COVID-19 with Known Exposure
   - **Scenario 2:** Faculty/Staff Exposure
5. Observations and Outcomes of Participating Campuses
6. Closing Comments

WEBINAR INSTRUCTIONS

- **Submit questions via chat in Zoom.**

- **Please include your e-mail address.**
  Board of Regents staff will work to answer your questions during this webinar as well as follow up via e-mail if we are unable to answer during the webinar.

- **Presentation will be uploaded to https://regents.la.gov/higher-education-reopening-safely-guidance**
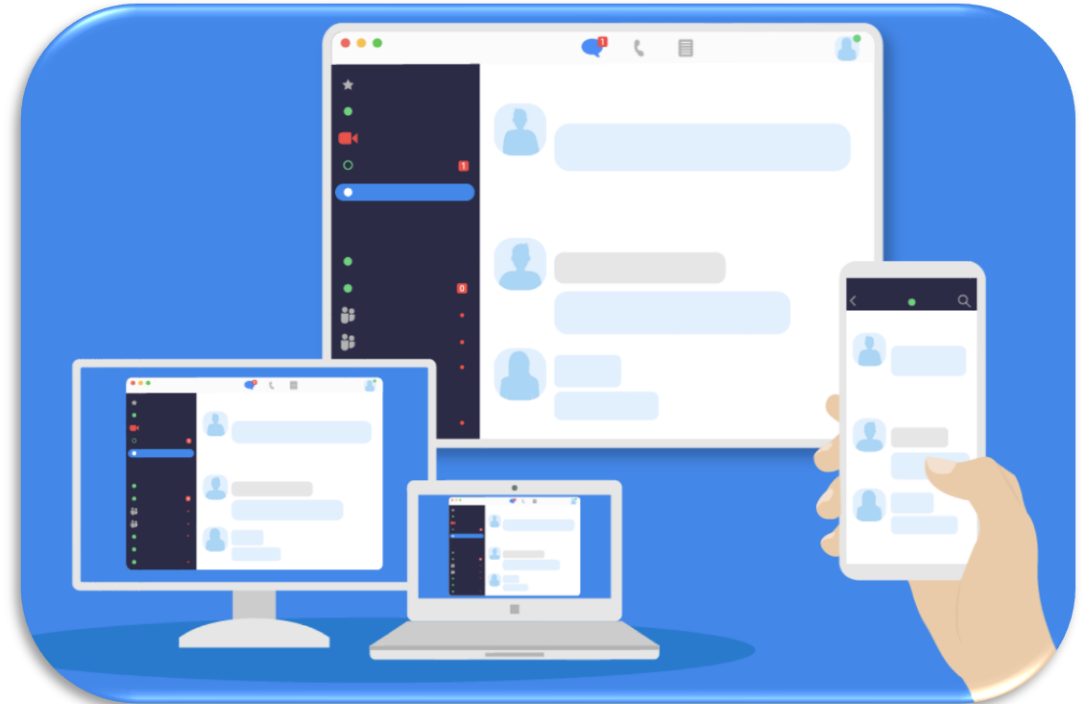
Webinar Facilitators & Speakers

Dr. Kim Hunter Reed,
*Commissioner of Higher
Education, BOR*

Dr. Alex Billioux,
*Assistant Secretary of
Health, LDH*

Dr. Frank Welch,
*Medical Director for Emergency
Preparedness, LDH*

Jerry Monier, Jr.,
*Associate Director,
Research and
Development,
LSU NCBRT*

Kelly Hamilton,
*Under-Secretary, New Mexico
Department of Homeland Security
and Emergency Management,
LSU NCBRT Instructor*

Todd Short,
*Lieutenant, University of
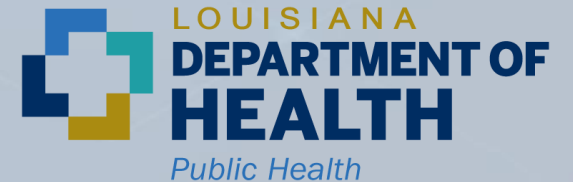Illinois Police
Department, LSU NCBRT
Instructor*

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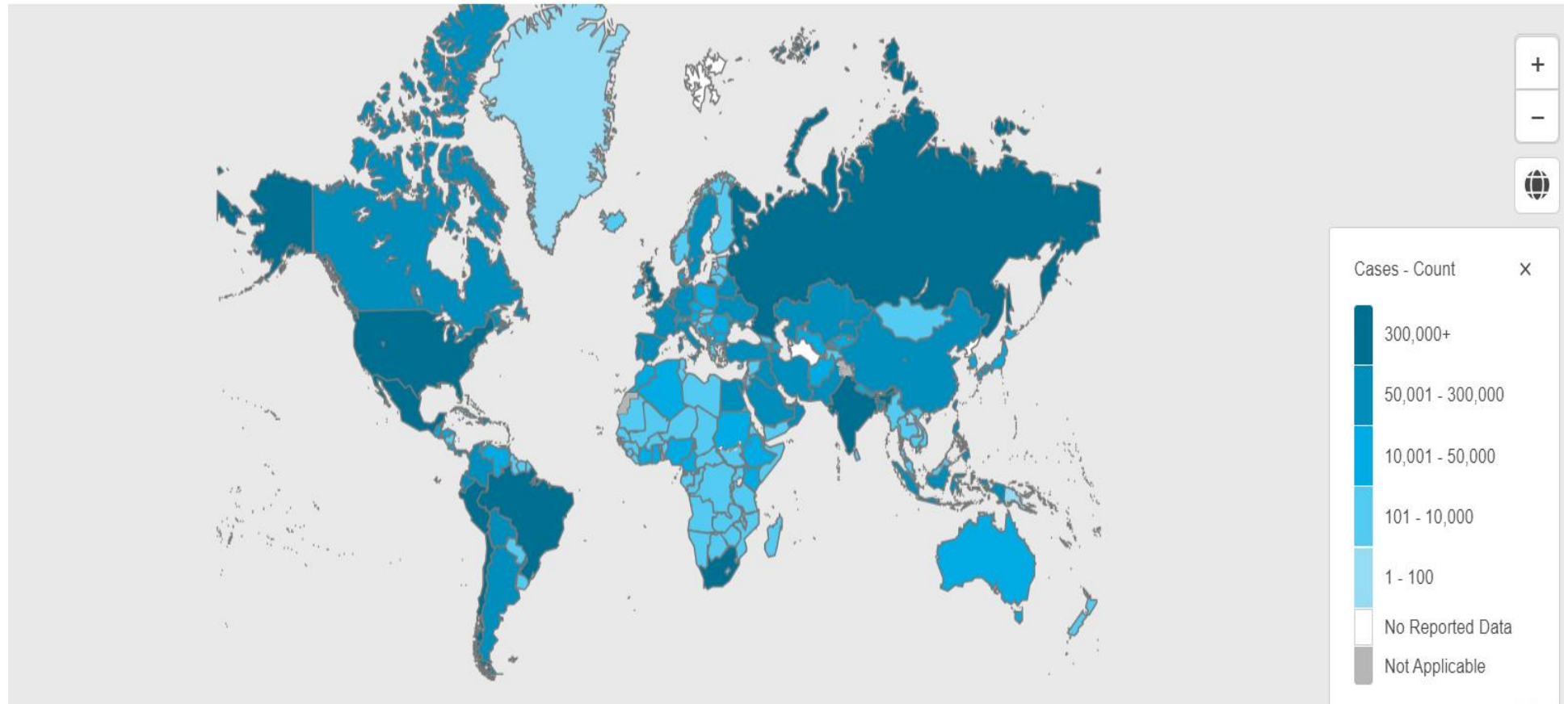
COVID-19 UNITED STATES

Total Cases
4.75M

Total Deaths
157,000

Reported Cases
- 0 to 1,000
- 1,001 to 5,000
- 5,001 to 10,000
- 10,001 to 20,000
- 20,001 to 40,000
- 40,001 or more

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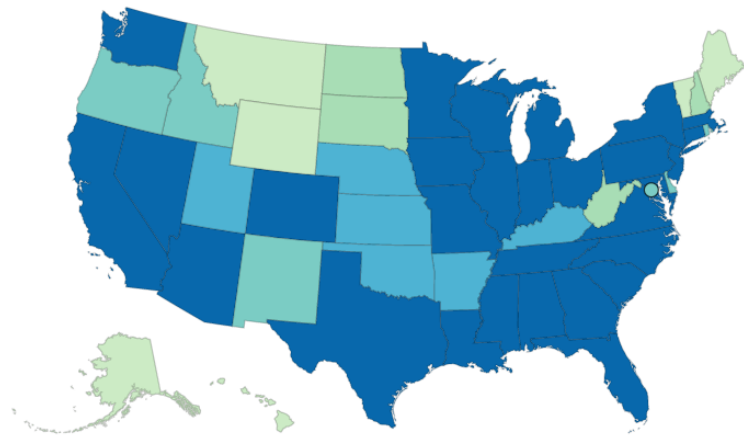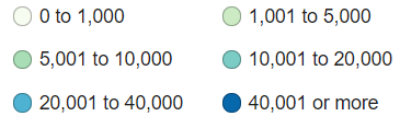
New Cases by Day

The following chart shows the number of new COVID-19 cases reported each day in the U.S. since the beginning of the outbreak. Hover over the bars to see the number of new cases by day.

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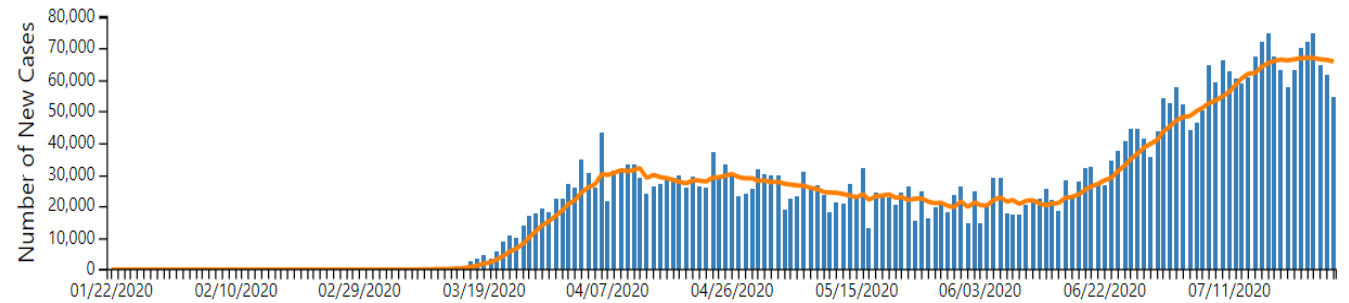
Cases   7-Day Average   Reset

COVID-19

- 40% of people who get COVID-19 are asymptomatic

- 20% of people who get COVID-19 require hospitalization

- Between 0.2% (young children) and 15% (elderly/comorbid) people with COVID-19 die

What happens next? It all depends on us....

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COVID-19 LOUISIANA

Cases
120,846

Deaths
3,910

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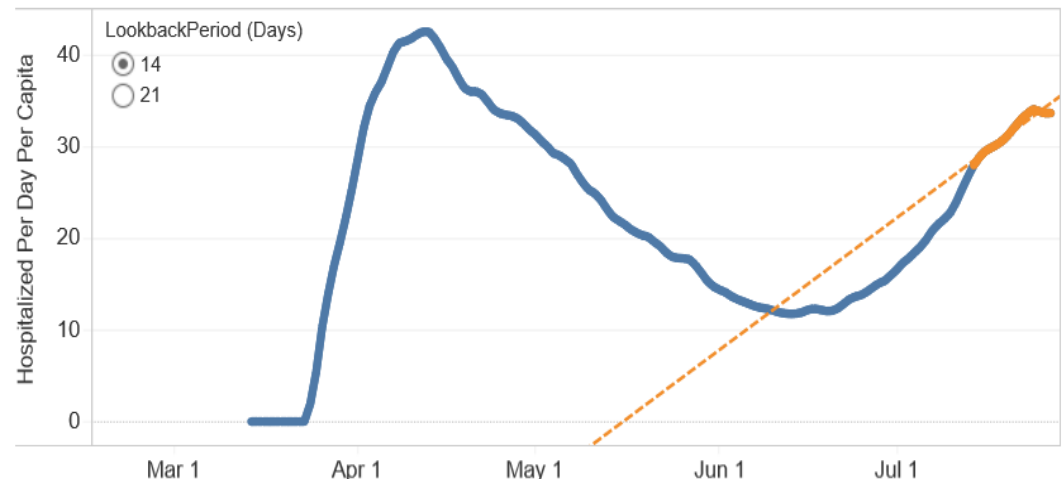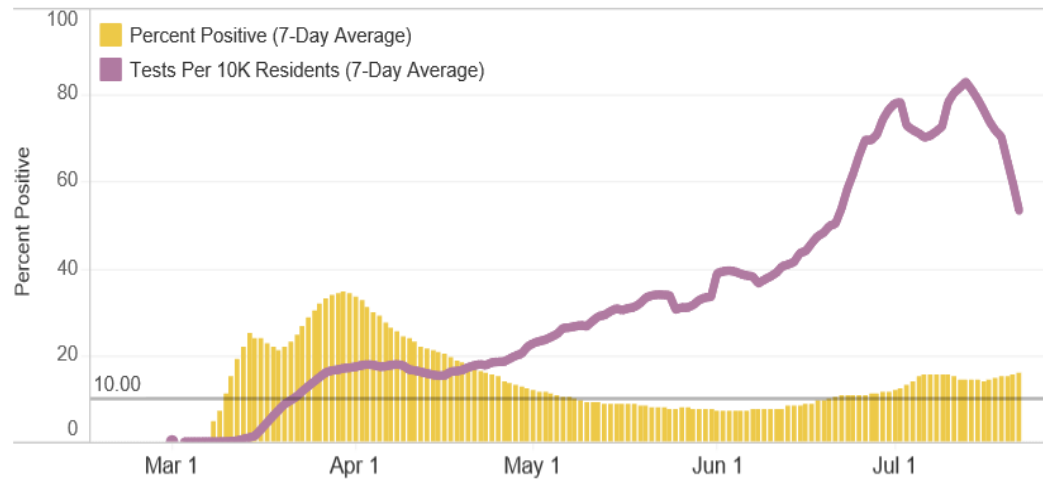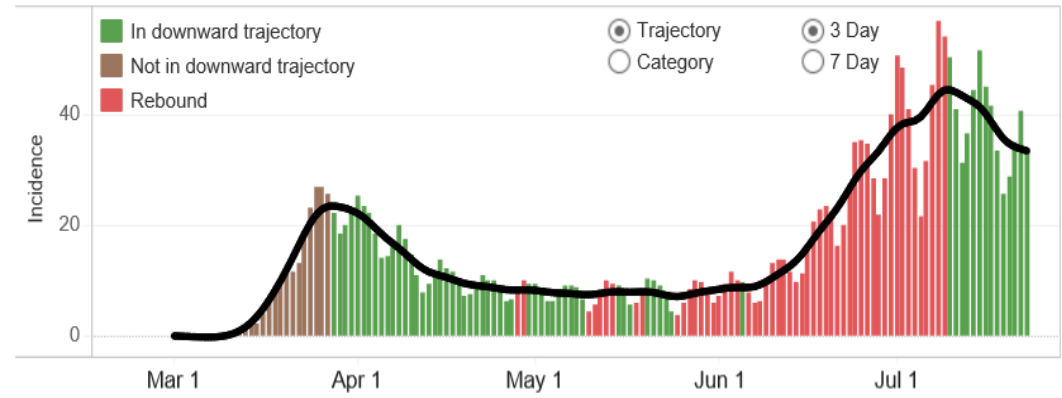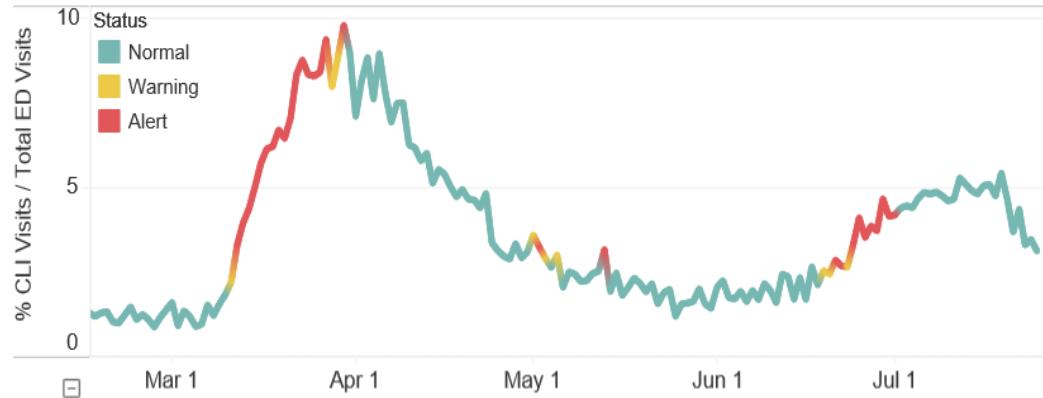
COVID-19 18-29 Year Olds (YO)

Louisiana COVID-19 cases by age group
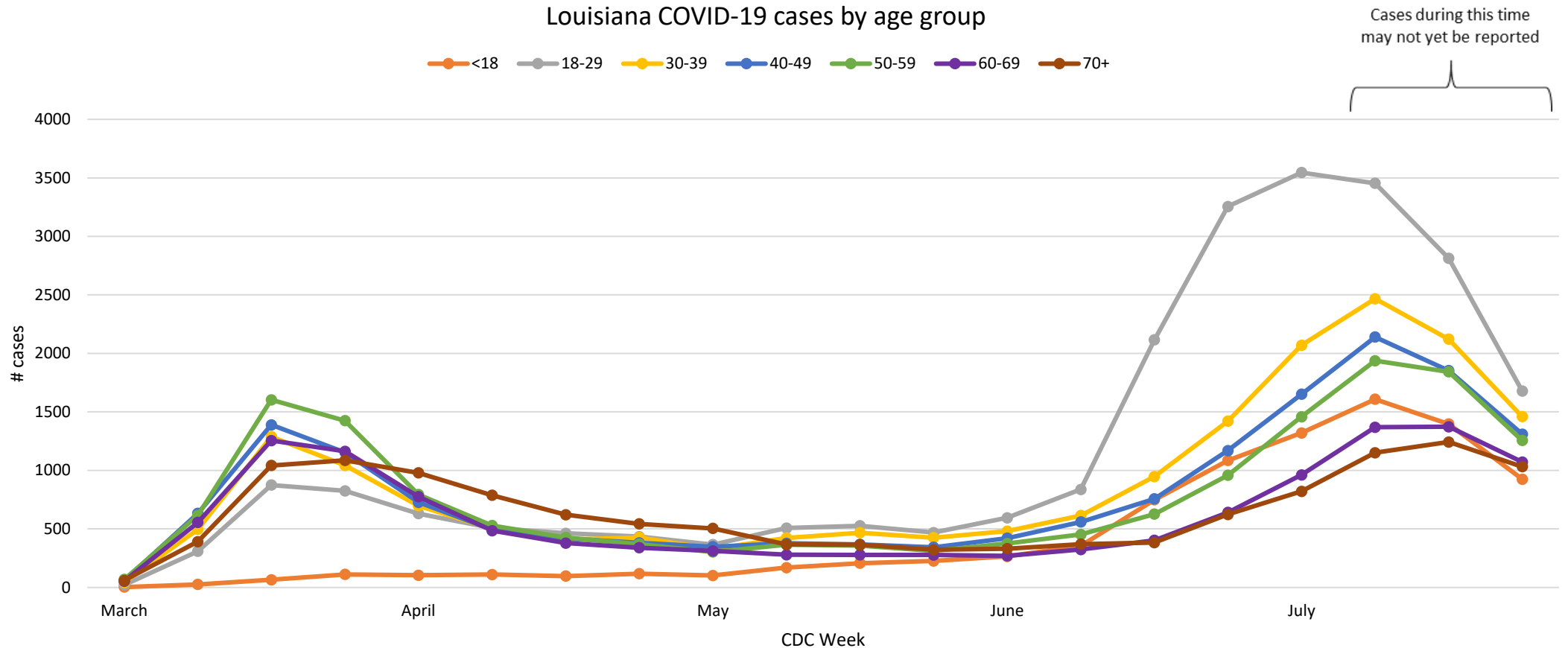
COVID-19 What We've Learned

- **What we know is evolving**
  - This is a new virus
  - As we learn more, our recommendations will change
  - Prevention, Treatments, Vaccines

- **Preventive Measures Work**
  - Wear a mask
  - Social distance
  - Personal and environmental hygiene
  - Stay home if you are sick

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COVID-19 What We've Learned

- **COVID-19 is very contagious**
  - Spread by droplets (6 feet)
  - Infective Dose (>15 minutes)
  - An infectious person can spread the illness to at least 2-3 other people

- **People with COVID-19 show a range of illness**
  - Asymptomatic to severe
  - 20% require hospitalization
  - Between 0.2% (young children) and 15% (elderly/comorbid) people with COVID-19 die
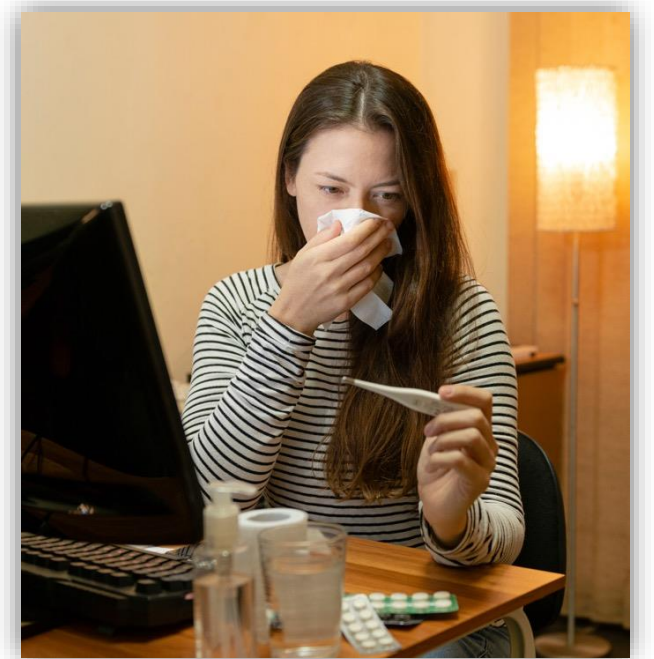
COVID-19 What We've Learned

- **Groups at highest risk**
  - >65 (risk increases with age)
  - Comorbid conditions: HTN, DM, obesity, heart disease, lung disease

- **Asymptomatic people can spread the disease**
  - Person can be infectious 2 days before they get symptoms
  - Person can be infectious even if they get no symptoms

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COVID-19 Impact on Higher Education

- 18-29 YO can get COVID-19 at the same rate as other adults
- Behaviors may increase likelihood of spread
- Range of illness is less, but not zero
- There are students and faculty at higher risk
- Outbreaks have the potential to close classrooms, dorms, etc.

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Triggers for Closures

- Number of people testing positive - quarantine
- Number of people seriously ill – not able to attend class
- Outbreak

- Closures will be determined in consultation between the school administration and the Regional Medical Director.

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Contact Tracing

- **Contact Tracing** – When a known case of COVID-19 is identified, those people who were close contacts will be asked to quarantine for 14 days after last known exposure

- Close Contact – Within 6 feet for >15 minutes

- **Contact Tracing App**: LOPH is developing a Google-Apple exposure notification (GAEN) app that can be widely used across the state, including within the Higher Education system. Hope to roll out by early Fall

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COVID-19: Impact of Spread Among 18-29 YO for the Community

- Increased spread in this age group will fuel spread in the broader community and vice versa.

- Will have an impact on overall business operations (sick employees).

- Will have an impact on hospital capacity.

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Jerry Monier, Jr., *Associate Director- Research and Development, LSU NCBRT*

Kelly Hamilton, *Under-Secretary, New Mexico Department of Homeland Security and Emergency Management, LSU NCBRT Instructor*

Todd Short, *Lieutenant, University of Illinois Police Department, LSU NCBRT Instructor*

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https://regents.la.gov/WEBINAR/

- Two campuses are active participants.
- Chats are directed to the panelist.
  Answers may be:
  - provided immediately;
  - saved until the end of the session;
  - provided as a follow-up at the conclusion.
- Scenarios focus on:
  - University of Louisiana at Lafayette
  - Dillard University

- Responses are not graded or evaluated.

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1. On August 21, 2020, an 18-year-old resident of an on-campus residential hall suffers a low-grade fever with a cough. The student receives a COVID-19 test at the student health services clinic and agrees to share information with the University through a consent form.
   - The student feels bad over the weekend and stays in the dorm, visiting the laundry room and the dining facility.
   - The clinic informs the student of a positive COVID-19 test on August 24.
   - The University is notified the afternoon of the 24th.
   - Student Health Services coordinates with the regional Office of Public Health to begin contact tracing, notifying those who have been in close contact with the student during the last five days to quarantine for ten days; this includes five faculty and up to 100 students.
   - The student attended a fraternity recruitment event on the evening of August 20 and potentially exposed up to 50 people.

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2. Some faculty and students with recent casual or close contact with the student want to be tested for COVID-19.

3. Word has traveled fast over social media about a student with coronavirus in a residential hall on campus.

   o Social media tries to identify the student, leading him to consider withdrawing from the university.

   o Students identified in contact tracing are not remaining in quarantine.

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- A student in on-campus housing tested positive for COVID-19.
- Contact tracing was implemented, and notifications were given to individuals in contact with the student and to the University.
- Potential negative social media messaging targeted the school, students, or faculty.

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1. Do we have good information regarding who was exposed? How do we track testing of additional students (for example, fraternity or classmates)?
2. What is communicated to the campus community?
   o What happens if students don't want to come to class?
   o What mechanisms are in place to encourage isolation/quarantine?
3. Do we change any policies regarding our response in commuter student areas?
   o Do we make any changes to screening questions at our clinics?
   o How do we message and encourage (or require) students off-campus to get tested?
   o Are we academically prepared to deliver course material to quarantined or isolated students?

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4. Assume one of the students in the fraternity lives off-campus with two roommates. Do we have any recommendations for these students (none are displaying symptoms)?

   o Would our recommendations change if the student and roommates lived on campus?

5. What are the recommendations for people who attended the fraternity recruitment event?

   o Can a student who does not quarantine be disciplined for not adhering to the policy?

   o Would the discipline or consequences be different if it were an employee instead?

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1. A married couple working in separate departments on campus have a four-year-old son. The child attends daycare near the university.
   o A student working a part-time job at the daycare is ignoring mild coughing and scratchy throat, attributing them to her lifelong battles with asthma and allergies.
   o The child's father is the primary person to pick him up from daycare.
2. The student worker at the daycare finally gives in to concerns from her mother and visits the campus Student Health clinic. She tests positive for COVID-19. Isolation is advised, and she complies.
3. Forty-eight hours later, the child's father presents symptoms of a low fever and stays home with the four-year-old. His graduate student handles his classes and office hours (all are small-group, in-person settings).

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4. Twelve hours later, the wife presents with similar symptoms, but due to the nature of her research and the timelines involved, she makes a brief appearance on campus to hand off some information to her two graduate students and her undergraduate student workers.

   o All are unaware that the daycare student worker has tested positive because when she called in, her supervisor was not present and another student worker took the message.

5. Contact tracing has not begun because the student's employer was not notified; thus, the parents whose children attend the daycare are also in the dark.

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- There were positive COVID-19 tests for an employee and spouse from two departments on campus.
- Actions must be considered from a public health and campus safety standpoint.
- There should be messaging from the University to students, parents, faculty, staff, and the community about decisions being made.

1. Did you activate your Emergency Operations Center (EOC) or a Coordination Center?
2. What should be communicated to students, employees, and the general public?
   o Who will craft the appropriate press release?
3. What are the policy issues for faculty and staff who want to work from home, citing fears of being exposed to an infectious person during their incubation period?
   o A relatively large number of faculty and staff have reported software/system delays in response times while working online. Some are experiencing other computer issues as well, and there is a delay in IT getting back to them. What policies govern employees who work from home but do not have a functioning computer?

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4. Are any changes warranted to recommendations or policies for the end of the semester before the holidays?
5. What are the decision points for suspending classes or closing the main campus?
   o What are the triggers—number of deaths and/or cases? Case-fatality incidence?
   o Are the triggers for cancelling classes different from those asking faculty to work from home?
6. Does the Incident Command Team in the EOC have the authority to acquire more resources, such as medical supplies, security, or personnel?
7. Are sanitation contracts or personnel in place to address buildings and equipment that have been exposed to a symptomatic person?

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October 12—November 20

1. Most states have experienced multiple cases and casualties of COVID-19 during the "second wave" this Fall.
2. In Louisiana, the epidemic curve has peaked, and in early November there has been the first observed decrease in the number of weekly cases.

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- Second wave infections presented a rise in cases in September and October, with a decrease in November.
- Public and State health officials report the State and region are on a downward trend in terms of new cases of the virus.

1. For how many consecutive weeks (or incubation periods) should there be a decrease in cases before students and faculty return to campus?
    o   What are the triggers to reopen classes?
2. Who is communicating information about closure length to the students and employees?
3. How does the campus administration identify those who have recovered from COVID-19? Do they need medical clearance to return to campus? If so, who monitors?
    4. What policy covers those students and employees who refuse to return to campus until they feel it is safe to return? What resources are there to make the return comfortable for students and employees?

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5. What are the issues regarding tuition reimbursements, credits, etc.?
6. Will there be any changes with the Spring semester?
7. What are the effects on students receiving VA benefits? What about international students?

1. Identify the three most important activities accomplished during this tabletop exercise.
2. What are the three most important gaps identified during this exercise?
3. What are the three most important lessons learned from participating in this exercise?
4. Identify three things that could help improve this exercise.

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CLOSING

Responses to Webinar Questions

Questions? Please e-mail webinar@laregents.edu

Thank You

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