**GC COVID Questions for Executive Cabinet**

As we all know, Georgia College is part of the public system of higher education that includes 26 institutions. We receive our guidance from the University System of Georgia, which in turn is informed by the recommendations from the DPH and the CDC. Please also know that our leadership have open and ongoing communications with the system office and that we hear and share many of the concerns that so many of you have expressed. While the USG continues to monitor local circumstances, no institution may operate outside of the guidance we have received.

Several of the questions presented relate to the organizational structure of Georgia College and its relationship within the USG. We are directly linked to the USG, which in turn is directly connected to state government. As such we are aligned with the Governor’s Office and the COVID-19 policies that emanate from his administration.

**CASE REPORTING**

1. Why is the administration refusing to return to daily reporting of COVID cases on the dashboard? What are they trying to hide? I, too, greatly prefer the daily count and not just on Monday with a total of the prior week.

In an effort to be open, honest and transparent, the current COVID dashboard publishes data on a regular basis. This is consistent with the vast majority of institutions in the USG, with the exception of only one institution. We continue to track cases daily but believe the information is best understood in the context of a week. Given how these data are being self-reported to Georgia College, caution should be exercised about what inferences can reliably be made.

**CONTACT TRACING**

1. Many students in our classes are coming to class before they realize they have Covid. Why is there no guidance to students or professors for making sure they notify all close contacts once they realize they have Covid? The students are expected to tell the DPH the names and phone numbers of all their close contacts, but they obviously do not know those for everyone they sit near. The school is putting the students into the position of being in contact with people who have Covid, so can’t the school provide support for ensuring that contact tracing is done properly?

\*\*This was my question, too. I’d like to add to the question: Why are we making DPH do all of our contact tracing for us (and spending additional state funds to do so), when it would be much easier for us to notify close contacts of COVID+ students internally, especially when those contacts occurred in the classroom? We have contact info for all of our students easily available in class rosters.

We encourage anyone who feels sick not to come to campus. DPH is the assigned entity with the expertise, training and capabilities to provide contact tracing and is funded to perform this function. Faculty transmitting specific health information regarding specific students is not acceptable and may be a violation of HIPAA.

1. Who is conducting contact tracing when students report positive they have tested positive? Does the contact tracer ask the infected student who they have spent 15 minutes 6 feet or closer? Does the contact tracer contact roommates? Does the contact tracer contact classmates (classrooms no longer have physical distancing)? What does the contact tracer do when the students do not know the names of those they sat beside during class? Does the contact tracer contact professors to warn them of exposure? Since students and professors are exposed to each other in classrooms without masks or physical distancing, would it not be wise for student and faculty contact tracers to coordinate?

See response above.

**MITIGATION**

1. In the opinion of GC administrators, what would it take for the BOR to approve mandating mitigation efforts?

As a state institution, Georgia College follows guidance from the USG, which is informed by the CDC and DPH.

1. What is the logical reason for not instating a mask mandate (apart from it’s not allowed by BOR)? In summer we thought vaccinated people didn’t get infected and they didn’t carry. Now that overwhelming data is available to the contrary, what’s stopping us from going back to a mandate and keeping students and faculty safe?

As a state institution, Georgia College follows USG guidance that is informed by the CDC and the DPH.

1. Is there any way we could require masks or any way we could pull together as a system to push for a mask mandate? It will save lives, and requiring masks just isn't that big a deal. I understand the financial and psychological ramifications of steps like going back online. But masking has no serious financial or psychological ramifications. Furthermore, we know from a recent Chronicle survey that, "55% of U.S. university and college faculty have seriously considered either changing careers or retiring early" due to pandemic-related concerns and requiring masks would help faculty and staff feel like our health and our lives matter; it might even reduce the possibility that we would need to return to online teaching in the future - which *would* have serious financial and psychological ramifications.

See response above.

1. Do faculty and/or administrators from USG institutions have any voice in the decision-making process regarding whether their particular institutions follow CDC guidance for institutes of higher education such as limiting occupancy and requiring mask use by people who are not fully vaccinated?

See response above.

1. Has there been any discussion of the USG allowing individual institutions to make vaccination, masking, and physical distancing policies based on the vaccination rates and level of community spread in their particular counties? Alternatively, has the USG considered adopting different pandemic policies for different areas of the state with different pandemic issues, such as rural vs urban communities?

These decisions are made by the USG which is informed by the CDC and the DPH.

1. In what ways has the administration advocated for faculty safety concerns with the USG during the pandemic? Can the administration imagine any USG health and safety guidance that it would refuse to implement?

The GC administration has open and ongoing contact with the Chancellor and other administrators in the USG.

1. I want to know what the administration thinks would be the worst possible outcome of actually standing up for the health, safety, and long-term reputation of our universities? Loss of state funding? Loss of students? (Why can’t we just recruit more diverse students in this very diverse state?)

GC is part of the USG. As a state institution, we follow USG guidance that is informed by the CDC and the DPH.

1. I had a possible exposure with a student (which turned out to be OK since the student's exposure was after our meeting.) But at human resources, they told me that if the student had tested positive and I had been exposed to her, I could still be in the classroom since I was fully vaccinated unless I started to have symptoms. Is this the same policy for students?

According to CDC guidance, yes. Fully vaccinated individuals that come into direct contact with COVID positive individuals do not need to quarantine if they have no symptoms.

**MODALITY CHANGES**

1. Why are faculty being asked to bail out the USG from their in-person/all-is-normal policy when we have exposure/symptoms/positive tests by automatically being “allowed” to change the modality of our courses?

As a state institution, we follow USG guidance that is informed by the CDC and the DPH.

1. Can it be made easier for faculty who are also parents of children in quarantine at home to move their courses online temporarily? Our options now are either to take sick leave, which means the employee is prohibited from working or to apply for a change in course modality with approval from the provost, which may take time or be denied. A faculty member whose child is sent home from school in the afternoon needs to quickly make arrangements before they need to teach on campus the following morning. Quick approval from the department chair should suffice for the brief period of quarantine. YES.

Related to the question above, it would also seem in the best interests of department staffing as well as the orderly progression of classes to allow these short-term shifts in modality. If a faculty member must take sick leave to care for a family member or quarantine themselves due to illness, it would seem better to shift that class temporarily online than to have to ask another overburdened faculty member to substitute, particularly at the last minute and given we may not have equal expertise in subject areas covered in different department courses.

Has the system or the university surveyed either faculty or students regarding their comfort level taking classes with no vaccine mandates, no mask mandates, and no physical distancing? Has the university system or the university surveyed faculty or students regarding their preferences for course delivery in classes that have no vaccine mandate, no mask mandate, and no physical distancing? I have anonymously surveyed my students and, despite the fact that they don’t wear masks (perhaps because of peer pressure or status concerns) most aren’t comfortable and most prefer a hybrid option. I urge Senate to ask faculty to survey all their classes.

As was the case prior to COVID, faculty members who have events anticipated by this question should work with their department chair, dean and HR to determine suitable arrangements.

**TESTING**

1. Is there a way to provide on-campus free testing for faculty and staff? The testing on August 31 was helpful, but it was only one day.

We are appreciative that the School of Nursing will be providing regular testing for all members of the campus community. Dates and locations will be communicated once details have been confirmed. We are also exploring other testing options for faculty and staff.

1. It would certainly be a benefit if GC would offer free Covid testing for faculty and staff on campus especially as it is difficult to find testing appointments in Milledgeville. Wait times at Urgent Care and DPH can be hours, and local pharmacies are no longer testing. Can we take time away from the workday to get tested as testing sites are closed after the end of the workday? Other USG schools are providing testing for faculty and staff. Can we have in-kind, on-demand testing on campus as students do, given the USG policies have asked us to be in classrooms with Covid+ and maskless students? We are exposed to Covid+ students on an almost daily basis and it is a burden (and will be a weekly, time-consuming burden) to have to travel around middle Georgia trying to find locations that have test availability or stores that have at-home antigen tests in stock. We may need to test weekly if not bi-weekly given the number of students in classes testing positive for Covid. At-home tests are costly, and testing locations are not always free. Free on-campus testing for all would go a long way in solving this problem that has been created by USG policies.

See response above.

1. At the current rate of students testing positive for COVID-19 on campus and many reports of students attending classes and testing positive shortly thereafter, it seems that surveillance testing of all students, or even of randomly selected students, would be a good idea. Would it be possible to institute surveillance testing, or even just encourage students without symptoms or known direct contacts to get tested?

We encourage anyone with symptoms to get tested, and GC students are offered this service through our Student Health Services.

**ADA**

1. How is this situation not a violation of the ADA? Our lack of mitigation measures should be a violation of ADA, if not at least ableist in not keeping safe education available to immune-compromised students? <https://www.thenation.com/article/society/mask-mandates-school-law/>

To date, current mitigation strategies have not been found to be in violation of ADA.

1. Workplace safety is a basic expectation. As one of many who are categorized by CDC guidelines as immunocompromised, why is it fully my responsibility to ensure my health and wellbeing by **claiming a disability** as a means for receiving ADA accommodations that may permit the continuation of the USG waiver given last year? What are the intended, or unintended, consequences of documenting a disability? How would this classification be used in the future?

As was the case prior to COVID, individuals seeking any accommodations would provide documentation to HR to make relevant determinations for ADA accommodations.

**CARES ACT**

1. How much money did Georgia College receive from the CARES Act? How is the money being used/has the money been used? I second this question! And I third it! And where is this reported? Will students receive reduced tuition with the student allocated funds?

Information related to this can be found [online](https://www.gcsu.edu/financialaid/cares-act).

**MEETINGS**

1. Is it possible to continue virtual university meetings as has been the practice over the past year and a half? Even the *option* to meet virtually (when needed) would be a relief during this time of increased COVID cases despite the availability of vaccinations. I am asking as one who is fully vaccinated but also as one who is trying to be as safe as possible for the good of my family.

Georgia College provides flexibility in the way meetings are organized and attended.

**VACCINES**

1. I am glad that we are now providing some incentives for students and employees. Several students and employees have expressed frustration about that since it only applies to people who get the vaccine now, as opposed to those who already got one. Could this incentive or some lottery be applied to students and employees who provide proof of prior immunization?

The federal funding that has been allocated for this initiative is limited to those who are unvaccinated in an effort to encourage more vaccinations.

**CLARIFICATIONS**

1. In need of clarity, if a faculty member tests COVID+ and needs to remain at home due to illness, is it required he/she/they use their sick leave? Several faculty on campus have received differing directives. Stay at home and work. Take the classes online. Come to campus. It appears there is a lack of consistency in how faculty are to handle their own situations.

As was the case prior to COVID, faculty members with situations anticipated by this question should work with their department chair, dean and HR to determine suitable arrangements.

**OBSERVATIONS**

1. This is less of a question and more of an observation. According to GC’s COVID protocol tree, a person who is vaccinated and shows no symptoms but has had direct exposure to COVID is supposed to report to class. In the past several days, I have had students who followed the protocols only to find out later that day or the immediate days following they are positive for COVID. This scenario is putting everyone on campus at extreme risk. This guidance is neglectful because it ignores the fact that anyone can be a virus carrier -- vaccinated or not. Moreover, with the majority of students not wearing masks -- despite constant encouragement -- in our classrooms, along with the university’s promotion of large gatherings, the virus is unstoppable at Georgia College.
2. Given that diversity, inclusion, and equity are generally stated beliefs of the university, that there is a desire to lead collaboratively and creatively, and that win-win options are always better than win-lose, what is the administration’s plan to optimize university outcomes and simultaneously optimize individual faculty professional productivity? “Work to the contract” comes across as a blanket statement that avoids interaction seeking options that benefit both the university and the faculty member.
3. Faculty across schools, departments, and disciplines are feeling like our health and safety are not important and we are starting to think that we would rather be working outside the USG. These faculty are feeling resentful and are not happy here in this environment. (David Johnson, among others)

Thank you, we appreciate receiving these observations from our campus community.