UC SANTA BARBARA Academic Senate

August 31, 2021

Divisional Chair's Newsletter

Dear Colleagues,

This rather long newsletter provides information of interest to instructors about fall planning, as well as answers to some of the questions that faculty have sent to the Senate over the past week. While the return to campus is a primary concern for all members of our community right now, it is a particularly complex issue for those whose families and friends have been directly impacted by the pandemic, and for those who live with unvaccinated or medically vulnerable people. Each of the topics described below has been discussed extensively by the campus COVID-19 Response Working Group, which has met multiple times per week since March 2020. In addition to senior administrators and medical personnel, this group regularly includes several faculty: myself (Chemical Engineering, Chemistry & Biochemistry), Scott Grafton (Psychological and Brain Sciences), Stu Feinstein (MCDB), Carolina Arias (MCDB), Charles Samuel (MCDB), and Ken Kosik (MCDB).

Impact of the Delta variant on campus planning. The emergence of the Delta variant and accompanying breakthrough infections have been the subject of near-daily discussion in the COVID-19 Response Working Group. The Delta variant has significantly changed the course of the pandemic, and requires us to plan for on-going risk management of an endemic disease. One recent consequence of the campus discussions was the <u>decision</u> to reinstate a universal indoor mask mandate for all members of our community, regardless of their vaccination status, effective August 3 and continuing (as of this writing) into fall quarter. Our campus decision was subsequently reinforced by the imposition of a <u>similar mask mandate</u> by the Santa Barbara County Public Health Department, on August 6.

The COVID-19 Response Working Group has reviewed several projections of campus case rates for various scenarios in fall. They were generated by Professor <u>Natasha Martin</u>, a highly regarded infectious disease modeler at UC San Diego. Her models, which incorporate current information about the Delta variant, suggest that our campus transmission rates will be 3-4 times lower than in the adjacent community. This difference arises because of the combination of very high vaccination rates (a result of the vaccination mandate for students, faculty, and staff), universal indoor masking, and robust testing, which together offer strong protection against infection.

Many instructors are also parents of children under the age of 12, who are not yet eligible for vaccination. They are particularly concerned about keeping their children safe, as they return to their schools and as we return to our classrooms. An interesting perspective on the heightened perception of the risks to our children can be found <u>here</u>. The scientific data related to the disease in children are not so alarming. The American Academy of Pediatrics reports that the incidence of serious outcomes in healthy children is very low, and has not increased due to the Delta variant. The decision to reopen California's K-12 schools fully for instruction in August was based on <u>guidance</u> from the California Department of Public Health. School teachers and children benefit from the overlapping protections of a high level of vaccination compliance (over 80% of staff), masking of all individuals regardless of vaccination status, testing, and natural ventilation of classrooms.

The same protective measures will be in place to reduce viral transmission in our UCSB community, with a key difference that our vaccination rate will be much higher. Parents who are members of the UCSB community and who are especially concerned can also make frequent use of the campus testing facility, which is free and available to all faculty, staff, and students.

California is not Texas. It is hard not to be alarmed by reports about the progress of the pandemic in other regions of the country. Recently, Rice University <u>announced</u> that it was moving its first two weeks of instruction online. With 98.5% of students vaccinated, universal indoor masking, and testing for everyone, including campus visitors, their semester was set to start on August 23 when 81 students tested positive for COVID-19. This was initially not too surprising: Houston was in the middle of a COVID surge at the time, with 296 cases per 100,000 residents reported in Harris County, TX (where Rice is located). For comparison, the daily case rate in Santa Barbara County at that time was fourteen times lower (21 per 100,000 residents).

Interestingly, the panic at Rice turned out to be unwarranted: on August 23, the university reported that a <u>testing glitch</u> had caused a high rate of false positives. It appears now that Rice's COVID-19 mitigation protocols were mostly effective, even in the midst of their heavily impacted community. While the university did the right thing to move to remote instruction based on the information it had, their experience highlights the importance of having accurate, relevant, and timely information to make good public health decisions.

Trends in case rates: California, Santa Barbara County, and UC Santa Barbara. The COVID-19 Response Working Group is monitoring the local trajectory of the pandemic and the impact of the Delta variant closely. Both statewide and in Santa Barbara County, case rates per 100,000 people per day (based on a 7-day average, with a 7-day lag) have been declining since mid-August (see the graph below). The recent peak of 30.5 new cases per 100K in California occurred on August 13, 2021, while in Santa Barbara County the recent peak of 27 new cases per 100K occurred on August 12.



The full fall reopening of local K-12 schools on August 18, and the start of the fall semester at Santa Barbara City College on August 23, do not appear to have had a significant effect on the declining south county case rates, at least so far. In terms of daily <u>case rates</u>, Santa Barbara County currently has one of the lower rates in California, ranking 43rd out of the 58 California counties. As of August 26, our daily county-wide case rate was 19.6 per 100K. Cases are concentrated predominantly in unvaccinated individuals (37.8 per 100K). The rate for vaccinated individuals is just 7.5 per 100K, including both symptomatic and asymptomatic cases. Furthermore, <u>case rates</u> in south Santa Barbara County are significantly lower than those in the north county. Significantly for our university, Isla Vista currently has the <u>lowest total case rate</u> of all areas in Santa Barbara county, at just 9.3 per 100K.

For UC Santa Barbara, new cases (including campus cases and students living in IV) were higher in late July/early August (19-37 total cases per week) compared to late June/early July (0-9 total cases per week). Consistent with declining state and county trends, the number of cases fell to 13 in the last week of August.

Compliance with the vaccine mandate. UC Santa Barbara is on track to meet the UCOP definition of a "fully vaccinated" campus, with more than 90% of our community vaccinated by the first day of classes. As of August 31, 86% of our students were fully vaccinated or had started the process of becoming fully vaccinated. This number does not include information for non-resident students whose information is not in the California state database, and 500 international students who will be vaccinated by Student Health as soon as they arrive in Santa Barbara. The verified vaccination rates among faculty and staff are slightly lower (82% and 80%, respectively, as of August 31), but also promising. For students and employees who were vaccinated in California, the campus obtains verification of vaccination from the state registry, allowing us to confirm that an authentic vaccine was administered. This represents the majority of our vaccine records. For those vaccinated out of state, we rely on documents submitted by the individual. The deadline for all to submit evidence of vaccination, or to request an exemption or deferral, is **September 9**.

Students who do not comply with the vaccine mandate will have their registration blocked by the deadline, will be directed not to attend classes, will have their campus housing contracts canceled, and will not have a clearance badge allowing them to be on campus and to use campus facilities (e.g., the Library and the Recreation Center). Registration blocks used in other contexts are extremely effective in ensuring student compliance. Similar measures will apply to students who do not comply with the testing mandate. Instructors can be notified of non-compliance for students who were registered in their classes, and can inform <u>Student Conduct</u> if any violate the directive not to attend these classes.

UC Berkeley's fall reopening. We are also watching the reopening of UC Berkeley for in-person instruction closely, as a useful guide to our own reopening a little over 3 weeks from now. Student move-in to campus housing began August 16, and the first day of instruction was August 25. Among the 10,248 tests performed August 16-18 (associated primarily with arriving students), there were 26 positive cases. The daily case numbers since then have varied, but are now averaging 2-4 per day. The case rate is half that in Alameda County, where Berkeley is located.

Most instruction at UC Berkeley this fall is occurring in-person, with the exception of classes larger than 200. The Registrar scheduled these large classes to be remote at the end of spring semester (i.e., long before the Delta variant was an issue), due to physical distancing requirements in effect at the time that restricted classroom assignments for larger classes. Our public health agencies no longer require or recommend physical distancing in classrooms. To ensure that students are not incentivized to attend class while they are ill or under quarantine, Berkeley instructors are requested to record their lectures in classrooms equipped with video capture.

What evidence is the campus using to assess whether conditions will allow for in-person teaching? The most important information we have is the daily number of new positive tests in the campus community. This number, obtained using high performance testing methods, can be normalized to obtain the new case rate normalized per 100,000 persons per day (or per week), and used to calculate a running 7-day average. We also look at the percentage of positive tests, which provides information about the adequacy of our testing frequency. Similar metrics from the County and its different regions serve as important points of reference for detecting changes specific to the UCSB community. Because COVID transmission can exhibit exponential growth, it is important to analyze trends based on a combination of these metrics that might suggest accelerating virus transmission, rather than relying on any single measure at a specific point in time. Discussion in the daily meetings (Tuesday-Friday) of the campus COVID Response Working Group of trends in recent case rates and positivity rates allows us to assess our current situation and to anticipate future conditions.

We recognize that the measures described above can be biased to count people who develop symptoms and seek out testing, while missing those who are infected but asymptomatic. The campus is launching a testing program with weekly random sampling of a fraction of the campus community, to provide a second robust measure of infection prevalence. Changes in the underlying presence of disease, including asymptomatic cases, will be another sensitive indicator alerting us to increasing virus transmission.

Campus ramp down / pivot planning. Our experience in March 2020 taught us how to react quickly to an emerging public health situation. Due to the fluid nature of the pandemic and the need to respond in a timely way to changes and adapt our operations, the Senate will continue to work closely with campus leadership to evaluate important criteria based on Santa Barbara County Public Health and UC Santa Barbara campus-specific public health conditions. These criteria, along with CDC recommendations, State and County public health guidance, and trends in the available data will ultimately inform possible changes to existing safety protocols, including pivoting and ramping down operations associated with in-person instruction.

- The pivot point criteria include the following:
 - Campus and Santa Barbara County COVID test positivity rates
 - Campus and County COVID case rates
 Campus quarantine / isolation capacity
 - Contact tracing capacity
 - Breakthrough hospitalization rates in Santa Barbara County
 ICU occupancy and capacity at surrounding medical facilities

California digital vaccine registry. Faculty can now retrieve their personal vaccine record from the <u>Digital COVID-19 Vaccine Record</u> portal. The information from Student Health was resubmitted recently, so if you tried to access your record unsuccessfully in the past, please try again now. The digital record contains the same information as your paper CDC vaccine card. The record also includes a QR code that, when scanned by a SMART Health Card reader, displays to the reader your name, date of birth, vaccine dates and vaccine type. The QR code also confirms the vaccine record as an official record of the State of California.

Changes in vaccine efficacy, and booster shot recommendations. Some

older instructors who received their vaccinations early in spring 2021 are concerned about waning immunity and the impact on breakthrough infections. While time since vaccination makes intuitive sense as a measure of vaccine effectiveness (and is supported by some <u>evidence</u>), there is enormous individual variability in the human immune system, as well as many other factors that influence immune competency. Both older and younger people who were vaccinated earlier and later have experienced breakthrough infections in the past month, although symptoms were generally mild. The vast majority of hospitalized COVID-19 patients are unvaccinated.

Recent data about severe illness and hospitalization associated with breakthrough cases in vaccinated individuals in <u>Israel</u> has been a cause of much concern over decreased vaccine effectiveness against the Delta variant. However, the interpretation of this data was impacted by a significant statistical anomaly, caused by not accounting properly for the age of patients. An appropriate statistical <u>analysis</u> that included accounting for different vaccination rates according to age showed that the Pfizer vaccine is still highly effective (85-95%) at preventing severe disease caused by the Delta variant.

Booster vaccinations have already been <u>approved</u> for those with immune deficiency from a variety of causes, based on strong laboratory and real world data of booster effectiveness in this population. It seems likely that everyone will eventually be advised to receive a booster shot, possibly prioritized by age. The recommended timing of booster shots is important to follow, since receiving a booster too early can make it less effective. We don't yet know if the university will be allowed to administer booster shots to faculty, or whether the university will mandate them for the campus community. This is a fast moving area, and we hope to have clearer answers in the coming weeks.

Remote instruction requests from students. We have heard several reports of students being advised by various campus offices to contact instructors and/or departments directly to request remote instruction in courses that are currently scheduled to be offered in-person. This is inappropriate, and faculty should not act in response to these requests. Nonetheless, recording audio and powerpoint with Gauchocast/Panopto for posting to Gauchospace was a standard practice for some instructors even pre-COVID, and is allowed at the discretion of the instructor. Students with disabilities that might impact their ability to attend in-person instruction must be directed to the <u>Disabled Students</u> <u>Program</u>. International students who are unable to enter (or re-enter) the country due to visa processing issues should contact the academic advising unit in their College for guidance.

Teaching and learning while masked. The requirement for indoor masking is expected to last well into fall quarter, and will require adaptation on the part of instructors in some types of courses. <u>Instructional Development</u> is available for consultation. Although students are well aware of the mask mandate, instructors are encouraged to document it in their course syllabi:

- Student non-compliance with COVID-19 health and safety requirements or with related directions from the instructor is a violation of the UCSB
 Standarda of Conduct and will be adjudicated appartingly.
- Standards of Conduct and will be adjudicated accordingly.
 All students of this course, as a condition of physical presence in this classroom (including for exams or tests in this classroom or other location on the UCSB campus), must be compliant with the UC SARS-CoV-2 (COVID-19) Vaccination Program at all times.

In the classroom, instructors should direct any student who is not masked to don their mask immediately, or leave the classroom. If a student still does not comply, the instructor may cancel the class meeting and leave. Non-compliant students can be <u>reported to the Office of Student Conduct</u> for disciplinary measures.

In-person instruction for large classes. Some instructors have inquired about physical distancing policies, particularly in large classes. Physical distancing is effective for limiting droplet-based transmission, but not aerosol-based transmission. Now that we know the primary mode of COVID-19 transmission is aerosol-based, state and county public health requirements for physical distancing are no longer in effect. In contrast, face coverings are known to be highly <u>effective</u> at limiting aerosol-based transmission and are required indoors.

Since COVID-19 restrictions went into effect in 2020, the university has followed guidance from the CDC, local, State, and City authorities on the use of its indoor spaces, including classrooms. The American Society of Heating,

Refrigeration, and Air Conditioning Engineers (ASHRAE) provides parameters and guidelines for our built environment. ASHRAE 62.1 specifies minimum ventilation rates and other measures to ensure indoor air quality. Ventilation for all campus buildings with classrooms has been inspected by Facilities and meets or exceeds these standards. Ventilation has been further improved by maximizing fresh air inflow into all campus buildings. Opening windows and doors whenever possible has been shown to <u>enhance</u> ventilation in classrooms. Recent data provided to the campus COVID Response Working Group by UC San Diego's Professor Natasha Martin, in a model that included the use of all classroom sizes, showed that on-campus transmission for a fully vaccinated and masked student body should be far below transmission in the local community.

COVID Response Working Group member and Professor Stu Feinstein (who has been instrumental in setting up and running the campus testing lab, and also represents UC Santa Barbara at the Systemwide Fall Capacity Planning Group) will be teaching MCDB 1A in-person in Campbell Hall this fall. Across the nine undergraduate UC campuses, campus-wide policies on large classes vary. As described above, classes larger than 200 at UC Berkeley were designated to be offered via remote instruction when physical distancing rules were still in effect last May. UC Riverside and UC Santa Cruz have similar policies for large classes. However, other UC campuses (and other major universities around the country) reported to us that they have no general capacity limits on class size as of August 26, 2021.

Student quarantine and isolation. The university has plans to provide separate housing and meal delivery for students living on campus who are required to quarantine (for unvaccinated students who are close contacts with a COVID-19 case) or isolate (for any students who are infected). Consistent with current CDC guidelines, fully vaccinated students (i.e., most students) are not required to quarantine after exposure, and therefore may attend classes unless they develop symptoms. However, **symptomatic students should not attend classes**. Instructors will need to provide flexibility to allow these students to continue to make progress in their studies, as they would for any student experiencing a temporary illness during an academic quarter.

Guidelines for temporary remote instruction. Instructors who are required to quarantine or isolate during fall quarter may be able to continue teaching, but only if they can do so remotely. Instructors who are parents of children required to quarantine or isolate may find themselves similarly constrained. In these cases, the Senate will allow a temporary exception to the requirement for inperson instruction, authorizing teaching in emergency remote mode. In each of the following scenarios, the instructor must notify their Chair and their students of any temporary change in the mode of instruction in a timely manner.

<u>Quarantines.</u> An instructor who is required by Public Health or campus officials to quarantine or isolate during fall quarter may continue to teach remotely during the medically-required quarantine or isolation period. An instructor who has direct care-giving responsibility for a child under the age of 12 who is required to quarantine or isolate during this time may choose to teach remotely during the child's medically-required quarantine or isolation period. Remote teaching for the purpose of quarantine or isolation will not normally exceed 2 instructional weeks.

<u>Childcare / K-8 school closures.</u> If a childcare center or K-8 school in the County in which the instructor has one or more children under the age of 12 enrolled should close during the fall quarter due to the public health emergency, and the instructor has direct care-giving responsibilities for these children, the instructor may choose to teach remotely until such time as the childcare center or school reopens.

Temporary remote instruction during this type of instructor quarantine is expected to remain synchronous as much as possible, and when synchronous, must be offered at the regularly scheduled class time. Instructors should remain local and be available to restart in-person instruction as soon as conditions allow. Not being local is not an acceptable reason for either instructors or students to fail to participate in face-to-face instruction, whenever such instruction is required. According to the Academic Personnel Manual (APM 730), all faculty are expected to be in residence during academic terms, unless on an approved leave.

Please continue to send your questions related to fall reopening to us, at shasta@ucsb.edu. I realize that there are many questions which we have not yet answered, or have answered incompletely. As we continue to work through your questions, you will be able to check for archived and updated answers on the Senate's <u>COVID-19 information page</u>. Feel free to share this newsletter and its accompanying links with your teaching associates and assistants.

Until next week, Susannah Scott Academic Senate Divisional Chair, UC Santa Barbara



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