

Open Letter to Vanderbilt University About the Fall 2020 Reopening Plan

July 29, 2020

Dear Chancellor Diermeier and Provost Wentz,

We, the undersigned Vanderbilt University parents, realize the enormous and unprecedented challenges presented by Covid-19 and commend the Administration for its tireless efforts to re-open the school carefully. We are writing to assure you that we are committed to supporting the University in its difficult path forward any way we can.

We do, however, have grave concerns about key aspects of the current plan, which we believe places both Vanderbilt students and the larger school community at undue risk.

With this letter, we respectfully ask the University to consider our urgent request for four crucially important improvements to Vanderbilt's plan. Specifically, we focus on surveillance testing, self-reporting/contact tracing, airborne transmission of Covid-19, and notification mechanisms about the spread of infection in the school community:

1. Surveillance: We believe that Vanderbilt's testing program can be strengthened to prevent unmanageable spread of Covid-19

We certainly appreciate the University's pre-arrival testing requirement and delivery of test kits to students' current location. We are also glad to know that undergraduates will be retested within four weeks after their arrival to campus. Looking, however, at new [research](#) from the Public Health Modeling Unit at the Yale School of Public Health, the Division of Infectious Diseases at the Massachusetts General Hospital, and Harvard Medical School¹ and drawing on common sense, Vanderbilt's current testing plan seems inadequate for preventing Covid-19 outbreaks and providing basic protection to students, the school community, and the residents of Nashville.

Precisely because the spread of Covid-19 can be silent (i.e., the virus can spread through asymptomatic individuals), experts in medicine, public health, and public policy stress that it is important to contain it before it becomes unmanageable. Currently, the best way to do this is with frequent testing of all individuals living or working in close quarters. For academic institutions, this includes students, faculty, and staff living and/or working on campus. Professor of public health policy David Paltiel of Yale University and infectious disease specialist Rochelle Walensky of the Massachusetts General Hospital found that in the case of Covid-19, the optimal testing frequency is *once every three days*. For colleges and universities that re-open in the Fall, Paltiel asserts that "frequent testing should be a basic requirement" ([Barber 2020](#)). University of Washington biology professor Dr. Carl T. Bergstrom concurs ([Anderson 2020](#)).

Indeed, institutions of higher learning like Harvard University, Tufts University, and Colby College have already made plans for student testing 2-3 times a week ([Anderson 2020](#), [Chen 2020](#)). Boston University

¹ A paper has been accepted for publication and is expected to be published soon ([Barber 2020](#)).

plans to test all students *at least* once a week ([Brown 2020](#)). [Yale University](#) will conduct comprehensive testing weekly ([Brinker 2020](#)). Berkeley had a similar plan until just a few days ago, when it switched to all online instruction ([Riskin-Kutz 2020](#)). [Amherst College](#) mandates regular Covid-19 testing for all faculty and staff working on campus.

The Vanderbilt community deserves no less. A single planned test in the students' first four weeks on campus, we fear, can easily come too late. Moreover, the school's current focus on symptomatic students is bound to routinely miss pre-symptomatic and asymptomatic carriers, as well as individuals with mild enough symptoms who deem it premature to self-report.

Paltiel and Walensky found that testing a student body less often than 2-3 times a week – *let alone testing only students feeling sick* – will result in unmanageable outbreaks: “We looked at a *lot* of scenarios and didn't find a single one under which that would be sufficient to contain an outbreak,” Paltiel told *Wired* on July 17, 2020. “I'm painfully aware that what we're recommending may be beyond the reach of many, if not most, of the universities in the country [...]. But if you can't see your way logistically or financially towards implementing this strategy, then you should be asking yourself if you have any business reopening” ([Barber 2020](#)).

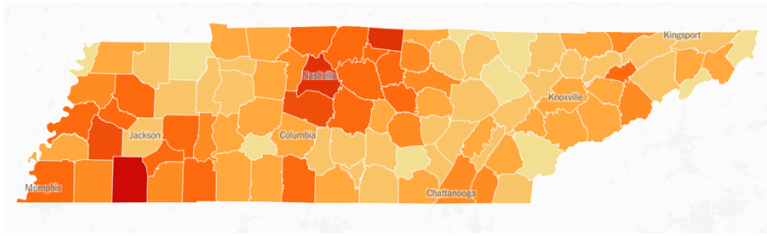
To avoid widespread Covid-19 outbreaks and to equip asymptomatic individuals with information about their exposure should they develop unexpected ailments later in their life,² we urge Vanderbilt to adopt a new testing program that mandates testing of *all* students once a week *at a minimum* and all faculty and staff working on campus *on a regular basis*. Robust testing is even more necessary at Vanderbilt than at many other schools because:

- a. Vanderbilt is bringing back all undergraduate and graduate students in the middle of a raging local pandemic, and
- b. Many students will reside off campus in a city that is currently struggling with – in the words of the University's own Dr. Alex Jahangir – a “*staggering*” rise in Covid-19 infections ([videotaped interview](#), July 2, 2020). On July 20 alone, Nashville [reported](#) 416 new cases and on July 21, the CDC announced that the number of people infected in different parts of the country could be 2-13 times higher than reported ([Mandavilli 2020](#)). De-densifying dorm living in an effort to create a more controlled campus environment when many students will be going back and forth into a Covid-19 hotspot (see maps below), compounds the risks involved in the University's re-opening.

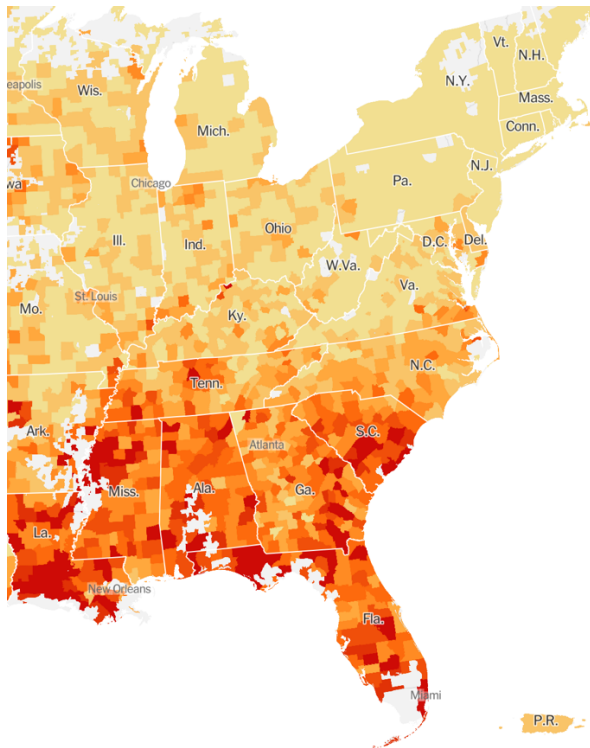
We urge that frequent testing form the foundation of the University's response to Covid-19. As Lindsay F. Wiley, American University public health law professor and former president of the American Society of Law, Medicine, and Ethics [asserts](#), “Social distancing and face covering were never meant to be a

² Although it may be too early to have solid evidence of long-term complications following Covid-19 infection, it is not too early to recognize the existence of compelling signs that persistent health problems may indeed plague some Covid-19 survivors (including individuals who experienced no or mild symptoms). There is still a lot we don't know. But absence of evidence does not constitute evidence of absence. Patient self-reports of long-term ailments abound, and studies and letters from the medical community suggest that this question is a matter of serious concern (e.g., [Carfi et al. 2020](#), [Long et al. 2020](#), [Varatharaj 2020](#), [Ghosh 2020](#), [Davey 2020](#)). Just a few weeks ago, on July 7, 2020, Dr. Peter Hotez, professor and dean at Baylor College of Medicine, [asserted](#) that “the rate of debilitating illnesses among survivors is going to be a significant concern for the US to reckon with in years to come.”

strategy by themselves. They were always intended to be combined with large-scale testing & tracing.” We fear that testing students once, sporadically, or randomly will place our children, the Vanderbilt community, and the residents of Nashville at serious and unnecessary risk.



[New York Times](#), updated July 20, 2020



[New York Times](#), updated July 21, 2020

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2. Self-reporting/contact tracing: We believe that Vanderbilt has a responsibility to recognize the inherent limitations of this program

It is now clear that self-reporting of symptoms and contact tracing following positive Covid-19 tests is a central component to Vanderbilt’s defense against outbreaks. As essential as the school’s symptom monitoring program is, we believe that it falls short in two important ways:

- a. Covid-19 transmission can occur when individuals are pre-symptomatic and asymptomatic. It is reported that asymptomatic cases can comprise around 40-50% of the infected population ([Gandhi et al. 2020](#), [Poletti et al. 2020](#)). This means that a significant percentage of infected

students may experience no symptoms while contagious, and that by the time a Vanderbilt community member gets sick and tests positive for Covid-19, the virus may have spread widely and may be difficult to contain.

- b. The second weakness of self-reporting/contact tracing is that at least some symptomatic students are likely to not comply with the requirement. New research at the University of Connecticut indicates that students may hesitate to disclose symptoms for multiple reasons (e.g., due to a desire to avoid quarantine for mild or seasonal symptoms or for ailments they experience frequently and are used to addressing on their own). The same research reveals student apprehension about contact tracing for fear of shame and stigma ([Barber 2020](#), [Pagoto 2020](#)).

Data from the CDC suggest that Covid-19 has been circulating in communities largely due to asymptomatic individuals and individuals who did not seek medical care ([Mandavilli 2020](#)). Given that Vanderbilt students who experience any symptoms must call Student Health for assessment and Covid-19 testing, self-quarantine until testing results are received, and notify their instructors – *all three of which are extremely important measures* – it is reasonable to anticipate that student compliance with symptom monitoring and reporting will be far from perfect. We, therefore, encourage the University to study student perspectives on self-reporting and contact tracing and to address any obstacles to effective implementation of this program thoroughly, systematically, transparently, and promptly.

In light of these complexities, we worry that Vanderbilt's response to Covid-19 overestimates the usefulness of the self-reporting/contact tracing program and fosters a false sense of security in our community.

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3. Airborne transmission of Covid-19: We expect that Vanderbilt is taking state-of-the-art measures to prevent infection through virus-containing aerosols and ask that these measures be made public

On July 7, 2020, at the [urging](#) of 239 scientists, the World Health Organization (WHO) [acknowledged](#) that Covid-19 spreads not only through close contact and contaminated surfaces, but also through exposure to virus-containing aerosols, which can travel beyond six feet and linger in the air from minutes to hours. As per a June 12, 2020 *New York Times* [article](#), “a large body of evidence suggests people get sick by sharing the same air with an infected person[,] including [outbreaks in a restaurant](#), during [choir practice](#) and when nearly half of 200 workers [in a call center](#) office fell ill.” Dr. Richard Corsi, internationally renowned indoor air quality expert and Dean of Maseeh College of Engineering and Computer Science at Portland State University, recently [stressed](#) that:

"It's not just close contact and it's not just contaminated surfaces. It's also what I call 'far field' contact, which is essentially if you're not standing three or six feet from a person but you happen to be in the same crowded restaurant or the same crowded bar or a classroom and you're not near the infector, you can inhale aerosols – droplet nuclei that contain infectious viruses in them."

To our knowledge, in its communications with students and parents, Vanderbilt has not emphasized Covid-19 transmission through aerosols as a pathway to infection. Please let us know what the University is doing to address this matter. Specifically, has the school included indoor air quality experts and building scientists in its re-opening plan? What measures has it taken – or will take before re-opening – to prevent Covid-19 airborne transmission? For example:

- a. Have all indoor spaces been equipped with filtration systems sufficient to remove virus-containing airborne particles? Dr. Corsi [recommends](#) proper replacement of all existing filters with filters carrying a MERV 13 or higher rating.
- b. Have all indoor spaces smaller than 1,000 square feet been supplied with portable air cleaners that have HEPA filtration and Clean Air Delivery Rates of 300 (scfm)?
- c. Has ventilation been optimized and maximized in all University buildings?
- d. Have programs been put in place for regular testing of buildings and wastewater for the presence of Covid-19 (e.g., [Bhatt & Folmer 2020](#), [Klick 2020](#))?
- e. What measures have been taken to prevent Covid-19 transmission in shared dorm bathrooms (where masks cannot always be worn), especially those without windows?
- f. Is the school planning to facilitate outdoor classes with proper physical distancing to the maximum extent possible?

For our peace of mind, we ask Vanderbilt to make public as soon as possible its plan for the prevention of Covid-19 transmission through aerosols in all indoor spaces.

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4. Transparency: We believe it is critically important that Vanderbilt commit to providing rapid information to students, parents, faculty, and staff about the status of Covid-19 in the school community

Vanderbilt's re-opening plan is unclear about notification protocols on the status of Covid-19 on campus. In light of the fact that Covid-19 can spread rapidly and that members of the Vanderbilt community – including students and families – will need complete and up-to-date information about new infections in order to make health-protective decisions at all times, we ask the University to commit to a robust and transparent program of real-time information delivery concerning testing, positive results, hospitalizations, and deaths. Students, faculty, and staff must also be notified about Covid-19 cases in their immediate environments (e.g., dorms, classes, offices). This information can be disseminated without violating HIPPA privacy rules and is necessary for strengthening the school's response to Covid-19 as well as enhancing our trust in the University's commitment to protecting our children, the school community at large, and the residents of Nashville.

We depend on Vanderbilt to develop and announce a clear and robust notification mechanism as soon as possible. We also ask the University to spell out the infection, morbidity, and mortality threshold level it will adopt to determine when the campus must re-close.

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Since classes start soon, we ask the University to act on these requests expeditiously. Our assessment of the school's safety and trustworthiness depends on clear evidence that the reopening plans align with the latest science, best practices of peer institutions, and common sense. We are here to help. Please let us know how.

We look forward to your prompt response.

Respectfully,

The Parent Plan—Vanderbilt signatories