### Response to Vanderbilt University's Return to Campus Update of August 10, 2020

August 11, 2020

Dear Chancellor Diermeier and Provost Wente,

We applaud Vanderbilt University for the important improvements it made to the school's Return to Campus Plan, as announced in yesterday's <u>weekly update</u>. We are especially relieved to see the adjustments to the surveillance testing program and the community notification plan concerning new infections. We believe that these improvements will increase the protection offered to students, faculty, staff, and Nashville residents in this precarious time and will support everyone on campus as well as many families like ours to make informed decisions about the best path forward throughout Fall 2020.

We continue, however, to have grave concerns about key aspects of the University's plan, which we fear still leaves students and the larger school community at undue health risk. Following our July 29, 2020 <u>open letter</u>, this is our second urgent plea for further improvement.

Specifically:

#### 1. Surveillance:

• As pleased as we are to know that all undergraduate students will be tested a second time within one week of arrival to campus, we fear that this testing round will have little ability to prevent the spread of Covid-19 if not coupled with a quarantine until test results come out.

Under Vanderbilt's revised plan, if there is even one student who arrives to campus with Covid-19, they will have the opportunity to interact with – and potentially infect – other members of the Vanderbilt community before they receive their test result and move into isolation. This means that by the time every student's test result is out, Covid-19 may have spread, the test results may offer an outdated picture of viral prevalence on campus, and an important opportunity to prevent outbreaks may have been missed. On the other hand, a quarantine until one's test result is out can help protect those members of the community who arrive to campus virus-free and can help prevent needless health harm, which we now know can be serious and long-term (<u>Stephenson 2020</u>). Additionally, it will allow Vanderbilt to launch the semester with the virus contained rather than having to chase after it. Many institutions, for example <u>Wesleyan</u> <u>University</u>, <u>Williams College</u>, and <u>Yale University</u>, already have such arrival testing/quarantine programs in place.

## Should Vanderbilt decide against an arrival quarantine, we kindly ask that it explain the rationale behind this decision and addresses our concern above.

 We applaud the University's decision to include in the school's ongoing surveillance testing plan all members of the Vanderbilt community. We are troubled, however, to see that the school's approach to surveillance testing seems to overlook the important <u>study</u> by Yale University, Harvard University, and Massachusetts General Hospital (mentioned in our July 29,

## 2020 open letter and featured on our <u>website</u>), which concludes that the safe reopening of campuses requires frequent screening of all students every two days.

As we mentioned in our open letter, numerous colleges and universities have already adopted frequent testing as the cornerstone of their return-to-campus plan. Yale's David Paltiel and Massachusetts General Hospital's Rochelle Walensky found that testing a student body less often than 2-3 times a week is likely to leave room for 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" (<u>Barber 2020</u>).

In fact, the recent <u>decision</u> by Johns Hopkins University – which was planning to test everyone on campus twice a week – to switch to remote study suggests that even *this* frequency of testing might be inadequate for stemming Covid-19 outbreaks. In their announcement to Johns Hopkins students, President Ronald J. Daniels and his team stated that, "Based on extensive consultations with our faculty experts in public health and medicine, and emerging guidance from public-health officials, we have concluded that *returning in person would pose unacceptable risks for you [students], our faculty and staff, and our neighbors in Baltimore.*"

Against this backdrop, we are deeply concerned about Vanderbilt's announcement that for Fall 2020 the school is considering conducting only select testing that targets a "representative" and "meaningful" sample of the school community at a frequency to be determined by the data collected. Of course, we appreciate that such testing can be useful as a tool for general surveillance, as it has the potential to yield reliable estimates of the prevalence of Covid-19 on campus and to offer important feedback on the effectiveness of the precautionary measures put in place. It will not, however, be able to identify *every infected member* of the community, move them into isolation, and give them the opportunity to seek early treatment should they want to. It is also not likely to mitigate or suppress every outbreak, at a time when the pandemic in Nashville and across he US is still very concerning (Kelman 2020).

Once again, we urge Vanderbilt to adopt frequent, proactive testing of *all members* of the school community as the foundation of the University's response to Covid-19, no matter what the first two rounds of test results show.

Should Vanderbilt decide against such testing, we kindly ask that it explains the rationale behind this decision and addresses our concerns above. We also request answers to the following questions: a) How is Vanderbilt planning to keep R below 1, so that Covid-19 cases on campus – both symptomatic and asymptomatic – decline instead of explode? b) What model(s) have been used to establish that the school's current plan reduces R below 1?

• • •

#### 2. Self-reporting/contact tracing:

In light of the fact that self-reporting/contact tracing is central to Vanderbilt's response to Covid-19, we continue to urge the University to acknowledge the program's inherent

## limitations, which render frequent surveillance testing of all members of the school community all the more important.

We discuss these limitations in our open letter. Here, we add that the Centers for Disease Control and Prevention's (CDC) definition of "close contact"—the definition adopted by Vanderbilt for contact tracing—does not cover all scenarios of viral transmission. Notably, it excludes contact with infected individuals for less than 15 minutes as well as exposure from "far field" contact (i.e., beyond six feet) to virus-containing aerosols (see our open letter, <u>Higgins-Dunn 2020</u>, <u>EPA</u> <u>Webinar 2020</u>, <u>Anderson et al. 2020</u>, <u>Marr 2020</u>, <u>KCRW 2020</u>).

As we stated in our open letter, we worry that Vanderbilt's response to Covid-19 overestimates the usefulness of the self-reporting/contact tracing program, when in reality this program is likely to leave potentially exposed members of the community unaware about their exposure, at risk of infecting others, and unequipped to seek early treatment, if asymptomatic.

• • •

#### 3. Airborne transmission of Covid-19:

 As we mentioned in our open letter, we expect that Vanderbilt is taking state-of-the-art measures to prevent infection through virus-containing aerosols. We ask that these measures be made public.

To our knowledge, in its communications with students, Vanderbilt has still not acknowledged Covid-19 transmission through aerosols as a pathway to infection. The limitations of adopting CDC's "close contact" definition as a pillar of the University's Return to Campus Plan can compromise not only the school's contact tracing program but also the guidance to students for self-protection. As far as we can tell, for example, students who will be sharing dorm bathrooms (many of which are windowless and with suboptimal ventilation) have not been alerted to the risk of brushing their teeth or washing their face, even for just a few minutes, next to potentially infected students who are also without a mask and talking, coughing, or sneezing. Similarly, students who will live in dorms have been <u>assured</u> through the Vanderbilt website that they will be able to enjoy each other's company "sitting in their doorways talking late into the night" without acknowledgment that such activity could release virus-containing aerosols in dorm hallways and infect individuals positioned at a distance greater than six feet from infected residents. In some Vanderbilt dorms, moreover, windowless bathrooms are the exhaust pathway for the whole floor, potentially concentrating viral load from rooms and hallways.

# We request once again answers to the six questions about aerosol transmission of Covid-19 that we posed in our open letter as well as clear messaging and guidance to the school community about aerosols as a path of infection.

• • •

#### 4. Transparency:

• We are heartened to see that Vanderbilt has established a notification protocol to keep the school community abreast of the status of Covid-19 on campus.

For full transparency, and to better equip us to make informed decisions about our children throughout Fall 2020, we ask again that the information released include the number of tests conducted, hospitalizations, and deaths, in addition to positive test results. We are also resubmitting our request for a clear definition of the trigger(s) the University will use to shift fully to remote study.

• • •

Since students start moving into dorms next week and classes begin in two weeks, we ask the University to address our concerns as soon as possible. As we stated previously, our assessment of the school's safety and trustworthiness depends on timely and clear evidence that the reopening plans align with the latest science, best practices of peer institutions, and common sense.

We are here to help.

We look forward to your prompt response.

Respectfully,

The Parent Plan—Vanderbilt

cc. G. L. Black