## Open Letter to America's Higher Education Leaders: Creating #COVIDSafeZones at America's Colleges & Universities

## Dear Higher Education Leaders:

We applaud your leadership in addressing health and safety throughout the COVID-19 pandemic. The layered prevention strategies you have advanced over the past 18 months have been critical to preserving your institutions' academic and research missions. Most sobering, they have saved lives.

As many campuses prepare to open for Fall 2021 in just a few days, we recognize the great progress our nation's colleges and universities have made to reduce COVID-19 on campuses and in their surrounding communities. The highly communicable Delta variant, however, is disrupting thoughtful plans for returning to campus, and higher education leaders will need to adjust and pivot rapidly, just as they have throughout the pandemic. At the same time, the full FDA approval of the Pfizer vaccine appears to be imminent. Taken together, these two developments stand to change the fall COVID landscape in higher education and throughout the nation.

We are seeking your help. Institutions of Higher Education (IHEs), which employ over 3 million individuals and are attended by over 19 million students, must continue to pull together. College campuses, by their nature, are high-risk congregate settings for infectious disease transmission. People not protected by vaccines are becoming infected faster, from more limited contact. The Delta variant represents a more dangerous threat to your campus health and safety, operational continuity, and ability to meet the safety expectations of faculty, staff, students, and their parents. Last year's plan may not prevent outbreaks from this year's variant. Delta is different.

This is why we, public health and science experts, leaders in health, education, and civil society, and former officials from both political parties, have come together to ask you to join us in taking further steps to maintain public health and safety, prevent spread, and keep your institutions open for student learning.

We are asking you to require vaccination. A vaccination requirement is the best way to protect students, faculty, staff and the community around your campus. Over 700 IHEs have already decided to require vaccination this fall, most with medical and religious exceptions available. Where state law and available resources allow, the American College Health Association strongly recommends a campus vaccination requirement. If your campus has a health care setting, vaccination is particularly important for anyone who comes in contact with patients. In addition, high vaccination rates provide a greater assurance of safety in other high-risk settings, where distancing or reduced contact is difficult to achieve, including residence halls and classrooms.

For those colleges and universities that are unable or choose not to require vaccination, we are asking leaders to take strong steps to get as close as possible to 100 percent of their students, faculty and staff vaccinated early in the academic year.

For all colleges and universities, we also encourage steps to make vaccination easy. Set up pop-up vaccine clinics to meet students as they return to campus, including move-in, orientation, football games and tailgates, and at student life events. Offer paid leave for staff and faculty to get vaccinated and in the event of side effects. Engage with your student leaders to get word out about vaccination to other students. Start a student ambassador program using the ACHA toolkit <a href="here">here</a>. Peer-to-peer engagement is one of the best ways to achieve behavior change in young adults.

# Please use layered mitigation strategies to keep your students, faculty, and staff safe as they return:

- 1. **Screen for Infection.** Particularly for unvaccinated individuals, require a protocol for employees and students to be routinely screened with a rapid COVID-19 test, typically twice weekly. More frequent testing should be done in higher-risk settings where appropriate and practical.
- 2. **Track Vaccine Status.** As many of you have shared with us, tracking the vaccination status of your campus population, including an attestation component, is critically important and allows an IHE to calculate community immunity and adjust the campus response accordingly.
- 3. **Encourage Mask Use.** Mask use should follow the latest CDC recommendations, which currently advise face coverings in public indoor settings in substantial or high prevalence zones, including for vaccinated individuals.
- 4. **Plan to Pivot.** As most of you have already done or are currently doing, campuses must re-visit 2020 strategies and adapt them for rapidly evolving fall 2021 situations. As in 2020-21, ensure that you have the right people at the table and let the data drive your decisions. If you are looking for additional resources, please consult the comprehensive American College Health Association (ACHA) considerations for re-opening in Fall 2021.

These #COVIDSafeZones strategies are not a broad vaccination mandate. While we support maximized vaccination, we believe that these strategies are consistent with established public health precedent and can be highly beneficial, even in the face of state laws that prohibit broad vaccination requirements in higher education settings.

We recognize that any protocols create burdens and costs for IHEs and their students, faculty and staff. Still, higher education leaders also realize the significant cost of ongoing disruption and uncertainty in campus operations and in people's lives. With your leadership, we will beat this pandemic. Higher education leaders continue to have a critical role in protecting the health and safety of people who work, live, and play on campus as well as members of the surrounding community. We believe these strategies, together with the important steps you are already taking, can achieve a balance of respect for campus safety and individual liberty. We pledge to join with you as we move our country forward together.

Signed by,

### Jerome M. Adams

20<sup>th</sup> Surgeon General of the United States

#### Barbara D. Alexander

President, Infectious Diseases Society of America Professor of Medicine and Pathology, Duke University

#### Melody C. Barnes

Fmr. Director, White House Domestic Policy Council

## Georges C. Benjamin

Executive Director, American Public Health Association

## **David Brailer**

Fmr. National Coordinator for Health Information Technology

#### John Bridgeland

Co-Founder & CEO, COVID Collaborative Fmr. Director, White House Domestic Policy Council

#### Robert M. Califf

Prof. of Cardiology, Duke School of Medicine Fmr. FDA Commissioner

#### **Richard Carmona**

17th Surgeon General of The United States Distinguished Professor University of Arizona

## Raymond G. Chambers

Co-Founder, COVID Collaborative WHO Ambassador for Global Strategy

#### **Tom Daschle**

Fmr. U.S. Senator (D-SD) Fmr. Senate Majority Leader

#### Carlos del Rio

Professor, Emory University School of Medicine International Secretary, National Academy of Medicine

#### **Karen DeSalvo**

Fmr. Assistant Secretary for Health (Acting), Natl Coordinator for HIT, and New Orleans Health Commissioner

## Mark Dybul

Co-Director, Georgetown Center for Global Health & Impact; Fmr. ED, Global Fund for AIDS, Malaria, TB; Fmr. U.S. Global AIDS Coordinator

## **Gary Edson**

President, COVID Collaborative; Fmr. Deputy National Security Adviser

## Joycelyn Elders

15th Surgeon General of the United States

## Ezekiel J. Emanuel

Vice Provost for Global Initiatives, Co-Director, Healthcare Transformation Institute, Levy University Professor, Perelman School of Medicine and The Wharton School, University of Pennsylvania; Fmr. Special Advisor on Health Policy, Office of Management and Budget and National Economic Council

#### Tom Frieden

President & CEO, Resolve to Save Lives; Fmr. Director, CDC

#### William H. Frist

Fmr. U.S. Senator (R-TN) Fmr. Senate Majority Leader

#### Monica Gandhi

Professor of Medicine and Associate Division Chief, University of California San Francisco / San Francisco General Hospital

#### **Scott Gottlieb**

Resident Fellow, American Enterprise Institute Fmr. FDA Commissioner

#### Margaret (Peggy) Hamburg

Fmr. FDA Commissioner

Fmr. Foreign Secretary of the National Academy of Medicine

#### Ashish Jha

Dean, Brown University School of Public Health

## Vanessa Kerry

Director of Public Policy and Social Change, Harvard Medical School

#### Rebecca Katz

Professor and Director Center for Global Health Science and Security, Georgetown University

#### Mike Leavitt

Fmr. U.S. Secretary of Health & Human Services; Fmr. Governor & U.S. Senator (R-UT)

#### Mark McClellan

Dir, Duke-Margolis Center for Health Policy; Fmr. FDA Commissioner & Adm, Center for Medicare & Medicaid Services

#### **Lauren Ancel Meyers**

Professor, University of Texas at Austin **Ted Mitchell** 

President, American Council on Education

#### **Melanie Ott**

Director, Gladstone Institute of Virology Professor of Medicine, University of California San Francisco

#### **Deval Patrick**

Fmr. Governor (D-MA)

## **Steven Phillips**

Vice President Science and Strategy COVID Collaborative Fmr. Medical Director, Global Projects, Exxon Mobil Corporation

#### **Kathleen Sebelius**

Fmr. U.S. Secretary of Health & Human Services Fmr. Governor (D-KS)

## Lisa Sherman

President & CEO, The Ad Council

## **Andy Slavitt**

Fmr. Senior Adviser to COVID-19 Response Coordinator; Fmr. Acting Adm, Center for Medicare & Medicaid Services CMS

#### Seema Verma

Former Administrator, Centers for Medicare and Medicaid Services

## Robert M. Wachter

Chairman, Department of Medicine, UCSF

## James Wilkinson

CEO, American College Health Association

## **Michelle Williams**

Co-Founder, COVID Collaborative; Dean, Harvard T.H. Chan School of Public Health

## Philip Zelikow

Director, Covid Commission Planning Group Professor, University of Virginia