



COVID-19 RAPID RESPONSE CALL

THURSDAY, APRIL 9, 2020

PANELISTS

- Rus Drew—Chief of Police, Emory University
- Sharon R. Rabinovitz, MD—Executive Director of Student Health Services. Dr. Rabinovitz is a member of the American College Health Association (ACHA).

INITIAL CAMPUS HEALTH RESPONSE

- The first case was diagnosed January 17. Students living off-campus accounted for many of the early cases, but were quickly followed by cases among students on-campus.
- The first university emergency support function call was held January 23.
- On February 3, started screening students returning from China.
- Health assessments were done over the telephone, with only the most serious patients receiving an in-person exam. One dorm was designated as the isolation dorm, with 10-20 students.
- Initial assessments for all student health issues are now done with tele-health.
- Currently, transitioning a gymnasium to serve as an urgent care center for students

PPE GUIDELINES

- Everyone should wear at least a cloth mask when outside. When engaging at six feet, a surgical mask and gloves should be worn. Interactions within six feet require a N95 mask and gloves. Physical contact requires the addition of goggles and a gown.

CAMPUS POLICE RESPONSE

- Had non-patrol personnel work from home or reassigned them to support patrol operations. Implemented telephone reporting.
- Continue to focus on officer safety by discouraging congregating during shift change, and disinfecting cars and shared worked spaces. Constantly evaluating how to engage individuals who may have the virus. and coordinating these responses with EMS.
- Calls for service on the two academic campuses have decreased, but have increased on the 10 medical campuses, which includes the CDC complex.



- Providing assistance when possible to municipal agencies, which are seeing a spike in domestic violence calls for service.
- Emory Police is assisting other campus public safety agencies by providing PPE and policy guidance.

TRANSFORMING CAMPUS FACILITIES

- Main campus has transformed a gym into an urgent care center, which required partitioning the gym to facilitate triage, testing, and treatment. Acquired necessary equipment for patient care and identified spaces for medical personnel to don and doff PPE.
- Transitioning one residence hall to house medical staff who have tested positive, as well as two additional halls for patients that need isolation but do not require hospitalization.
- Important that campus public safety agencies be involved early in any discussions about repurposing facilities to address issues such as access control, credentialing, and general security in and around the facilities. It's better to plan early for contingencies rather than respond to crises in the middle of the night.

CAMPUS EMERGENCY OPERATIONS CENTER (EOC)

- Campus has implemented a virtual EOC that includes police, student health, residence life, counseling, general counsel, information technology, and representatives from local hospitals.
- Campus police and student health are collaborating with local, state, and federal law enforcement, health and emergency management agencies to implement protocols.

ENGAGING STUDENTS

- The police department is emphasizing education over enforcement to reinforce the importance of social distancing and shelter in place, and students have exhibited good compliance.
- The university still has several hundred students on campus. A significant number are Asian, and they have experienced bias incidents. Normally, the police department would bring students together to discuss the incidents, but skilled community relations officers have addressed the concerns virtually in coordination with Student Life and Residence Life. The number of incidents has decreased, but will remain an ongoing concern for the university.
- Similarly, the department has engaged in educational efforts with the homeless populations that congregate near the hospitals.



OTHER KEY TAKEAWAYS

- Support all staff in your agencies. Ensure that they know the policies and feel safe. Consider that many people are grieving, whether because of the virus, death, or loss of routine.
- For campuses that do not have medical expertise, public safety directors/chiefs should seek medical expertise from local hospitals or emergency management agencies. Don't operate blind—listen to the experts.
- Regularly check websites for the latest guidance, including the ACHA and CDC, which frequently issues new guidance:
 - <https://www.acha.org/>
 - <https://www.cdc.gov/coronavirus/2019-ncov/community/critical-workers/implementing-safety-practices.html>
 - <https://www.cdc.gov/coronavirus/2019-ncov/community/colleges-universities/index.html>
 - <https://www.cdc.gov/coronavirus/2019-ncov/hcp/alternative-care-sites.html>
- We all need to anticipate the budget impact that COVID-19 will have on IHE for months and years. If you haven't already done so, every campus public safety director/chief should explain to administrators (CFOs and others) the value of public safety in the operation of campuses.
- The hope is that there will be some semblance of normality in the fall. What we are able to do in the fall depends on what we do now.