

Stetson University

Rolks Report Live Webinar: Fall Planning Preview

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[Captioner standing by.]

(This Meeting is being recorded.)

[Captioner standing by.]

>>DR. ROELLKE, PhD: Hello, Hatters my name is Chris Roellke and I serve as president at Stetson University and the Professor of Education at -- studies and I'm happy to welcome you to the Rolks Report live. I want to thank you for joining us and we have important information with you. We have a number of guests that I'll introduce in a moment. We have an hour together and I encourage you to answer questions in the chat. -- ask questions in the chat.

We do want to keep you informed as we make plans for your arrival and return to campus. And truth be told, we cannot wait for your return to campus. We do have a lot of ground to cover this evening. I appreciate you taking the time out of your schedule to join us. We are acutely aware of the circumstances and issues we face for the fall. There's a lot of uncertainty for example over the Delta variant and the speed it's spreading. We have asked as you know to voluntarily report the vaccination to the university and it's anonymous and the information is aggregated and tracked. It's helpful from a public health perspective. Encourage you to get your vaccination in if you have not done so already.

As of 4:00 yesterday, the data was updated with regard to vaccination rates. Overall, we have a verified vaccination rate of 44 percent. With the ones employed at Stetson at 62 percent and students at 39 percent. This information is for both campuses. And this information is available -- information is available updated daily to the Stetson websites tracking dashboard.

I'm optimistic that the vaccination rates are higher because not everyone yet had the

opportunity to upload their information on vaccination.

I do want to thank everyone sincerely who has voluntarily reported their status. These numbers are strong. But we need to do better. I know that we can.

We continue to offer weekly drawings of a thousand dollar grants and free parking. That was an incentive free parking for fall 2021. The vice president Ray will join us later to bring us up to date on the winner and the July 30th drawing. We believe, and I believe as the university dedicated to learning and knowledge, we must take advantage of what we now know about how to manage safety.

We know the vaccinations have proven extremely effective in bringing down infection rates. It is by far; the best mean we have of providing a safe and healthy environment for the entire Stetson University community. As you will hear this evening, the vaccines and reporting the vaccination are the best means to returning to normal campus activity without restriction. With the exception of the ones with medical and religious exceptions, I expect all members of the community to get vaccinated. It's not a requirement, but an expectation.

We have to take responsibility and do it together. When I started it here a little bit over a year ago, I emphasized the importance of kindness in all we do. Let me just say that get vaccinated and reporting it is a kindness we can give to the communities and each other.

Thank you for indulging me in the opening remarks. It is my pleasure to introduce Dr. Joseph Smith that has given us his time and expertise over the last 18 months.

We were just talking before the Webinar; I want to extend for the university my sincere appreciation to him for what he has done for us. To Dr. Smith, thank you so much for sharing your time and your expertise.

>>DR. SMITH: Thank you for having me. I will extend that big virtual hug right back to you. And -- continually impressed with Stetson and your response to this pandemic. At every step, Stetson has been very thoughtful, circumstance speculate and trying to balance the risk and benefits of every move. I think you have done an exemplary job keeping students and families at the center of that. My hat is off to you and the administration there as well. In fact, I wish more organizations would do what you were doing now and provide the forum for the information to get out.

I have been here since 7:00 a.m. and I may have the radio voice going. I'm jump right into kind of what we are seeing. And obviously, you are free to put questions in. But if you have been under a rock, for the last you know week or ten days, we are seeing a surge in COVID cases.

This was a little bit unexpected. I was among the physicians who believed that we

had really gotten beyond the worst of the pandemic and moving to whatever new normal territory is. The wrinkle most of us didn't see was the emergence of the Delta variant. You have seen it used in the news and you are probably asking each other about it, what does it mean in the Delta variant is as all viruses tend to mutate, the mutation of the original strain from Wuhan, China in 2018 and made its way around the globe.

It mutated a little bit and how it did is interesting from a scientific standpoint and bad for the people who are not vaccinated and at risk of catching it. There's been an alteration in the protein on the outside of the virus. The protein spike changed a little bit and it's a little bit easier to catch. It spreads more easily than the initial sprain we all saw and we'll learn about. That's not that atypical. Viruses are you know; they are not intelligent -- life forms but they do have a design that -- that lends itself to they want to spread. Virus will often mutate in a way that they are more easily spread. This one though did something most don't do and it's mutated in a way that it makes you sicker.

There's a receptor in the body called ace two receptor and you have it in epithelial cells and they line your lungs in particular. The ace two receptor will bind to the virus now and it will block your body's ability to degrade some products that are injurious to the lungs. This thing is now --

(Audio cutting in and out.)

-- setting up shop and a little bit easier for you to get and once there, it's doing more damage. What does that really --

(Audio cutting in and out.)

The sense at Daytona beach, where I am, we had gotten to five percent of the house were suffering from the virus. We are now around 15 to 20 percent of the patients here in the hospital have this virus. What scares me is I'm starting to see an influx of people I would like to say your age and mine, but I'm twice your age. An influx of people young, previously healthy and young adults who were getting gladdened by the -- flattened by the virus. Those patients are almost exclusively in the category. This is crucial, guys, that you got out and get yourselves vaccinated. 29 percent -- 39 percent doesn't cut it. If you are in the group that's not vaccinated yet, this is not the original strain that you saw that effected primarily oxygenarians and --

This is a different strain it uses your body's immune system against you. Being young and healthy you will amount a large cytokine and inflammatory response. That's what is part of making you sick. Being young and healthy is not necessarily a protective factor.

I'll take the questions one at a time but then there's the chat. Some of the questions around does the vaccine still protect you from the Delta variant. Yes, it does. The vaccine as you know is an mRNA vaccine it trains your body to recognize a protein on the outside of the virus. The parts of the virus that changed are not that protein and the body can still recognize the virus whether the Delta variant or the original strain and the vaccine confers some immunity.

Good question that I have gotten is, is it true Dr. Smith -- true Dr. Smith that you are seeing patients that have been vaccinated come to the hospital with it? Yes. Unfortunately. I have seen it with all three that are available.

Some important information about that. Those patients are not ending up in the ICU, which is good. Which goes with what we initially said and hypothesized even if the vaccine didn't confer one hundred percent immunity, will confer some. Also almost to the individual, they are people who have an underlying immunocompromised state. Somebody with a disease like Lupus or rheumatoid arthritis. These are the patients we are seeing getting it.

Hands down, the best thing to do to keep yourself from getting the virus is get the vaccine. All three are extremely effective and identical from what you get out of them so find one that's available and get the shot. I have gotten some questions about some of the -- lack of better term, internet rumor mill stuff. They seem to be rooted in Facebook and Twitter and not science. Is it true that there's been concern about fertility or future fertility linked to the vaccine? No nowhere in the literature at all.

When you look at the initial study of 47,000 patients and several of the people being studied got pregnant as a matter of course. The literature we have suggest that the vaccine has no impact on your fertility or future of it. Other questions I have around the severity of the reaction that people have.

Those are fair questions. It's pretty variable and we cannot really reliably predict who will have a reaction to the vaccine. I will say of all the things you put into your body, right, that includes over the counter medicine, that stacks up as one of the safest. The reactions we have seen have been mild. Generally speaking they are worse on the second spots and the sore arm is the most common. Some people feel feverish and some run temperatures for less than 24 hours or so. In the scheme of things, absolutely no comparisons to what it's like to have COVID-19, which I had. And I can tell you, I would take the shot any day of the week to not go back through that.

Some other questions I have around the vaccinations, how do we know how long the vaccine will last? That's a great question. We don't know how long it will last. I can tell you that we have seven months of data now showing it's still very effective out there far. We have every reason to believe it will be effective for a year plus. Again, there's no reason to sort of wait and see. That's

certainly something we can all handle.

A few more things. Don't feel bad I'm not picking on you guys. I have had the talk with doctors. A lot of physicians and health care workers in general, we used to think it was cool to go to work sick. It was like a badge of honor. I'm not going to let down my team and go to work sick. If you are not feeling well, stay home and stay in your room and house mates dorm mates and stay put. Do not go out and spread this thing around. On the assumption that the ones around you won't get sick. Delta variant, we are seeing young people getting sick. If you don't get sick, you can pass it to someone that does. I'm really accepting risk for myself, doesn't bear out. By not getting the vaccine is putting other people at risk is not exactly the move you want to make. Not wearing a mask, probably not where you are thinking about it, but when we frame it that way, it's easier to take the prescriptions to heart.

If I were asked and I have been, get my crystal ball out and say where are we going? I think unfortunately, we are probably moving to seeing something that looks like 2020 than the roll back on the restrictions that we have seen in the last few months. Delta variant has really changed the game. We have a gamma variant that's emerging now that's also quite serious. There's a Delta plus variant out there. As the virus continues to mutate, it does change the game a little bit for us. If you want to get back to the normal life, what do I say, get vaccinated, right? Wear a mask, wash your hands and stay home if you are feeling sick and give people space when and where you can. And answer any questions you request and that's the public service announcement version.

>>DR. ROELLKE, PhD: Dr. Smith, important information and I appreciate you saying it clearly and in an understandable way. Really really appreciate it. It's now my pleasure to bring on to the screen Lynn Schoenberg and Larry Hughes who have stepped up to serve in the capacity of the vice presidents. And Lynn will talk about the tier system and the overview of the goals of the subject percent vaccination rate. And Larry will come in a few minutes to discuss fall campus life and return to as vibrant a campus as possible and questions around move in. Lynn, thank you for joining us today and for you and -- the leadership of a Safer Stetson over the last two years.

>>LYNN: Thank you. And thank you, President Roellke. That's the best version of the explanation how the Delta variant impacts younger people I have heard. I hope we can find a way to have everyone in the community hear his words he shared with us. I want to talk about the current tier four status and the hope to move to the 74 percent vaccination rate as a community. We feel good about the tier four guidelines and they seem to be working well. We did know we needed to create a tier four sometime in the middle of spring, we realized it was necessary.

When we originally created the tier system, we didn't see a world where we had a

mixed vaccination campus. That's what the CDC and the American college association call us now. A mixed vaccinated campus in that we still have a large percentage of the population that is not vaccinated. But we also have a sizable population that is.

Tier four allows us to keep some of the important mitigates in place that have been successful for us. Things that CDC and ACHA say we should still have in place while allowing more freedoms into the community. When I talk about CDC and ACHA I want to highlight that these are recommendations specific to higher education institutions. So while some of the guidance has been more lenient for the general population, those groups have set specific criteria for colleges and universities because of our shared living environment, because how many people are combined right? Classrooms and in events. And we are trying hard to follow these guidelines specific to mixed populations.

You can see here on the screen, our current numbers right now for the -- Deland and really highlighted the overall numbers for all of Deland and the employees and the students. And you can see the 70 bar where we really really want to get to. That's what we want to hit. We did hit -- we did set the 70 percent number again in consultation with the organizations I mentioned as well as our dealt department of health in De Lucia county and the college of law. We have a lot of questions about our tier four and our 70 percent in comparisons to other institutions out there.

I wanted to answer these questions off the bat. These are things you submitted before we started talking. As Dr. Roellke mentioned, we can't mandate the vaccine at Stetson or -- we can help put things in place to keep people safe until we hit the number of vaccinated people on campus that feels more comfortable. Especially knowing everything that Dr. Smith just shared with us.

And schools in other states having different policies and procedures because vaccines are mandated there. You will see the private institutions in Florida having a wide range of policies, of which we are really right in the middle of the procedures. And then you'll see the public institutions in Florida having very different guidelines than the private institutions and that's because those are set through the state.

So I wanted to take a moment to explain there. And then really highlight some of the amazing wins that we get as a community if we can hit that 70 percent goal. The things we keep hearing from all of you that you really want. You want back and see it happen. And so this is just a sprinkling of the things that happen at 70. Facial coverings could not be required inside. Right now, they are required indoors unless you are in a group with four or less people that all agree not to wear a facial covering. We would remove restrictions on groups and gatherings in terms of size and restrictions on athletic events.

We would remove restrictions to recruitment and midday for Greek life. For residential students, we would go back to preCOVID guest policies in the halls. Each of these things sound amazing and they would help improve the vibrancy of the campus. A strong message not to wait and get vaccinated now so you can be in the considered fully vaccinated population that's 14 days after your last dose. And report it to us. Let us know so one U you can qualify for the great things Ray will talk about and so we know where we are as a community and what we can do moving forward. Highlight the benefit of that is to your own health. To the community's health and there's also some really great wins for you. You don't have to get tested at gateway testing or quarantine if there's a direct exposure. We saw it on campus yesterday. A vaccinated student did not have to quarantine even though there was a direct exposure. Gateway testing, just a quick update. We'll have full information out about gateway testing next week including the ability to sign up for your appointment slot. Some of the student leaders already got the e-mail today and are able to start signing up for their appointments because they have to be early arrivals. Athletics and some student leaders. Know everyone, all the students, will go through the clearance process. So you can get one of the brass lets that we had last year that shows you are year. If we have your vaccination record, you don't to get tested, which is nice.

I want to mention that we already do require a number of vaccinations here at Stetson which is actually in line with the state of Florida's requirements for vaccinations. We require MMI, meningitis and so the expectation of vaccination is one that our community has had for years. And years. To keep us safe and we have actually had incidences where we had infectious disease that can be very concerning on campus in the past and we firmly believe that our strong immunization policy helped keep the campus protected there.

Happy to answer questions later, but I want to pass it to my great colleague, Larry Hughes to talk about the excitement for the fall semester. We miss you and want you to come back and we are excited about that. Larry.

>>Dr. Corell-Hughes: Thank you, Lynn. Absolutely we miss you. You know, we are really excited about what life is going to look like in the fall. Getting closer to the vibrancy that Stetson campus is known for and we have missed dearly during COVID so far. When we ended the fall semester, we ended in tier two. We are now in tier four. That allows things to look a lot different. You know, regarding masks not requiring them outside. There's all sorts of implications for that.

We are focus is getting on -- beginning on August 13th and welcoming our new class and hopefully many of you and retro deuce and those classes are in person. Just a reminder, SM remain silent just a phenomenal part of the Stetson experience that on boarding to really understand how to

be a successful and get to know faculty member closely in a really unique academic classroom environment.

We'll have a virtual involvement fair. I know you are thinking wait -- August 4th we are going to have a virtual involvement fair so people can go ahead and figure out what they want to engage in. If you are a continuing student sophomore junior or senior, you are like I don't want to wait, you don't have to wait until the September one in live and person. You can get involved and get a head start on that. During orientation, a lot of the students programming boards, so how production and sorority involvement, will all be doing live events for orientation. There will be like I said, a face-to-face involvement fair. Fraternity and sorority recruitment is live and in person.

There will be some tier-four COVID restrictions about masking indoors. A very traditional fraternity and sorority recruitment experience. If you are interested in that, I urge you check it out and it's a great way to get involved and find your people here at Stetson. The annual welcome back bash, planning is underway and you will see more and more about that. I want to encourage you to use the engage portal. That's the home for the students organizations and you can see events that are already on the books and things that are coming and learn more about all the organizations.

Really, look through Instagram. All the student organizations are really promoting events through Instagram over the last year and a half and two years those are the two ways. To engage and following through Instagram.

We are really excited; I think Lynn had to hold herself back from announcing this. We have put pictures on Facebook. There was a renovation occurred in the Hollis center and what was the launch is an extended work out space. Lots of new equipment. Treadmills and steppers and jungle gym. We want to shout to the student government association which helped fund it. It has been long planned and we are excited to see the extended space. You won't need a reservation to work out in the Hollis center and you can go during the hours.

Work out classes there.

Also, inner Murals, back and forth this fall with a brand new inner Mural sport. RC car racing. We supply the RC cars and you can race RC cars through an indoor course in the Ricker field house. Inter-Murals is always innovative and they are not letting us down this year request a new RC car sport. Additionally, what radio and how to network are great ways to get involved and know what's going on here at Stetson.

And I want to just do a shout out to Royce Newman, the what's up podcast is led by -- team member. So the podcast will be back and it provides wellness education from our peers, our

peer students to one another. So previous topics have included everything from health disparities with sex and gender and the healthcare system and chronic disease and much much more. Just check out the well team Instagram for more on that.

U Lead. I want to remind you, U Lead, the letter U, Lead is a great place to look at the leadership opportunities. Some of them are paid leadership positions and some are volunteer and also just educational opportunities. We are in the planning stages for friends and family weekend. So look out for that. We are excited to have parents on campus visiting in safe ways during the fall. During parent and family weekend. I just want to wrap up by saying that one of the things that students -- is doing in the cult and union building that's the student union that's your home and living room on campus whether commuter or residential student. One of the things we think about is rhythms of life on campus. These are reoccurring events that happen every week or every other week. Uncouth hour, will be continuing in Lee garage on Thursday's nights at 9:00. That's an open mic time for the ones that have not previously been with us during a fall semester. That's an open mic that's a really amazing cross section of the campus. There's going to be a sophomore green. A hatter X speaker series. Friday night cinemas home coming and so much more. We are excited about the athletic events being open to spectators and all the sports.

And so last but not least, the residence halls shared bed rooms. So that means roommates and that's instant connections and friends. And the ability to you know, chat with people around the hall and have the chance encounters which are such a part of the Stetson experience they will all be live and in person. We are so excited to see how the unintentional random chance conversations as well as intentional conversations with the RAs transform the experience back to the Stetson experience we know. That was a -- just a quick look at you know, what we see for the fall. I want to remind you to make sure you bring your hammock because the palm trees are always calling to stretch a hammock and hang out on the palm quad and around the campus. President.

>>DR. ROELLKE, PhD: Larry, thank you so much. I know this is a simple equation but as I was listening to you and Lynn speak is it safe to say a fair equation would be increased vaccination increased campus vibrancy?

>>SPEAKER: One hundred percent.

>>DR. ROELLKE, PhD: Let me repeat the equation. Increase vaccination equals increased campus vibrancy. Thank you very much. Lynn was going to chime in with more information related to her previous conversation.

>>LYNN: Yes. So there was something that I had planned to talk about and didn't and then it was a

question over in the QA. So we wanted to hit that first before we went over to Ray. So the question was about what folks who are vaccinated can do to help keep moving us forwards as a campus. And I absolutely believe that it's all of our responsibility to keep this moving. So if you are vaccinated, number one, make sure you reported it to us and you told us about it. If you are not comfortable uploading your form, we can do a quick virtual meeting and they can see the information and they can note it.

The other thing to do is have conversations with your students, friends, brothers, team mates, colleagues, about why you chose to get vaccinated and why it's important to you. And see if you can answer any of their questions or refer them to great good scientific resources to the recording of the Webinar to hear Dr. Smith and the common tear the help move the needle. To be a social influencer and be a part of moving us forward. I think to the specific question that it's appropriate for faculty as well as staff and coaches to have that conversation with students one-on-one. It's also a chance for us as a communities to practice difficult dialogue and be in that space where it's okay not to agree on something. And to state our points and have that level of engagement. That's what Stetson is all about. And I sincerely hope we can do it in a way that's respectful and smart and kind. So absolutely we all have a place in having that conversation. Thank you for that question.

>>DR.ROELLKE,PhD: Lynn, that was beautifully stated. Thank you very much. I would like to turn the screen to Ray Naut the vice president of enrollment. Ray, you have exciting news to share with the community.

>>RAY: I do. Thank you. First thing I'll say is I'm vaccinated. What you heard is what the campus community can get to if we can get to 70 percent. You are not alone. We are encouraging it and I imagine there a number of people that have been vaccinated and not submitted them yet. I encourage you to continue doing it.

If you want to learn more about the Safer Stetson and the weekly opportunities that you will hear about, go to Stetson.edu forward slash safer. The interesting thing we tried to do is not incentive the opportunities on campus but rewarding the students or the behavior of getting us back to normal. We have starting doing weekly awards and incentives. We have done \$1,000 scholarship awards to weekly recipients for getting their vaccinations. We have done it for graduates and law students as well. These are small opportunities that were building up to on June -- July 30th. Sorry. We have a number of winners already. The winners that have gotten the \$1,000 scholarship. And the students authorized us to share yes. Katie, Isabel, Jason and Erin received a \$1,000 scholarship that applied to their award to help reduce the balance. Free parking pass, Casey. Shaun and Devin. These are awesome things to celebrate.

That's what we do every day at Stetson. Is celebrating small victories leading up to what greatness is going to be. This is culminating to what we'll be announced on July 30th at 2:00 p.m. live. That is we are announcing two students one first time in college as well as a continuing student will receive a one year full tuition award that covers fall and spring semester. Runner ups will get theme park tickets for two to go to universal and Disney this is our way of rewarding students to participating it. We want to get back to seeing you in person.

We want to get back to the opportunities of engagement and campus vibrancy. You have heard Larry talk about the great opportunities. What better way to do it than do it safe and ensure the community is doing what we need to get back on track. If you follow us at Stetson dot EDU forward slash safer on July 30th at 2:00 p.m. We'll do it on Facebook Live and make the announcement to the winners. I can't wait to make the announcement in the next few weeks.

Any questions you have, feel free to call us. All you have to do is submit your vaccination card to health services.

>>DR. ROELLKE,PhD: Ray, thank you so much. That's exciting news and as you can tell we are trying to make it as easy as possible for the members of the community to keep the community safe and well. If you look at -- I looked at my calendar correctly, today is July 15th, if you would like to be part of the grand prize drawing, you have some time to do that and get yourself vaccinated and also get yourself reported to have been vaccinated. Thank you very much, Ray, for that. I would like to have all the panel lists if they will rejoin the screen. I think all the information has been very very useful for the community. I, myself, have learned a lot from each of you today.

I want to thank you again for the important information. We have a number of questions that were sent in advance.

I guess the first one I want to ask and Lynn, this is to you. You mentioned earlier we are a campus that engages in difficult conversations. What advice do you have for someone that's vaccinated and wants to be a leader, what advice do you have for them. Conversely, for the ones that are skeptical about the vaccine, what advice do you have for them?

>>LYNN: Sure. So I think for folks that want to be part of that communication of why they have gotten vaccinated, I would start from that framework and I like that Ray shared his vaccination status. I think sharing with people why you got vaccinated and using the word I, makes it personal and makes it about that individual human in front of you that you might have a relationship with. That you might have had good times with. And who you respect. Especially if they are faculty or an advisor. It takes it away from

some of the larger, you know, politicization of the conversation right. It makes it about your individual opinions, values, perspectives, your read on the science.

We have a lot of scientists in this community, right? I think it's -- I heard some of the prehealth students just beautifully talk about their understanding of why the vaccine is so beneficial and we need to hear more from them and those voices on campus. So I think listening is a huge part of any difficult dialogue conversation. Not interrupting, taking the time -- this is not a quick convo. This is digging in a little bit.

And I think if you are of the mindset where you are not made up, your mind is not made up about the vaccine or feeling like you are not ready to get it, it's okay to say what your reasons are. I very much want to promote a community where you feel okay to explain what your hesitations are. And to feel safe on the campus. There's a question on that. With the Safer Campus Task Force, we want you to feel safe. I hope these things coming from us, help you to feel like it's okay to have your reasons and let's talk about them.

>>DR. ROELLKE,PhD: Lynn, thank you very much. Dr. Smith, I hope you might be able to follow up a little bit with your scientific background for the ones that are hesitant. You mentioned in the open remarks that you can understand as a practitioner and folks hear about the side effect et cetera. What other medical advice do you have for the ones on the fence about that?

>>DR. SMITH: -- I think that it is to ask the questions. This is new technology. This is you know, a new vaccine and a new virus, right? So I think the natural curiosity is fine. In fact, I think it's really healthy. Where I think you know, we could all probably do a better job is consider the source where you get some of the information. So just because someone is on a digital platform for instance, and they have thousands of followers, it doesn't mean they are applying any sort of scientific method to what they are espousing. I encourage you to take the same curiosity to had you ask the question and say is it safe and apply it to the answer you got. What study are you citing and push on that. What you would find as I did, when you really push on it, the solid information we have is that vaccine is extremely safe and extremely effective, this virus is extremely unsafe. Okay. And it's something to be avoided at all costs.

You know, be sure that you are really vetting that material that you get. Just because someone wears a white coat and they are on your TV screen or computer screen doesn't necessarily mean they are citing the best science. They may be trying to sell you something. They may just be putting their own fears out there to feel like they have more company. Take the same curiosity and

apply it to what you are being told and you will come to the same conclusion I did, this is the right way to go, the get the vaccine. Which I have also taken and given to my family members.

>>DR. ROELLKE, PhD: I have to remember to unclick the mute button. Let me echo that I have also received the vaccination and my family members as well. I have a daughter in the medical field and she had it in New York City. We have so Moderna and Pfizer, I myself was a Pfizer recipient. And I'm very very liberated to have that vaccine, if I may say so personally.

That leads to the next question a number of -- parents asked a question, if for a variety of reasons my child does not choose to get vaccinated whether it be for religious or other reasons, health reasons or otherwise, how do we make sure that student is not discriminated against is the term used by parents, they will not be ostracized et cetera. Let me say this before I ask people to answer the question. We have done it as a community our -- demonstrated as a community our able to care for each other. We learned a tremendous amount as a community through the early durations of COVID-19 and frankly I think a lot of success in that regard was due to the kindness and compassion that people shared for each other regardless of how they were feeling about this particular virus.

So that's a little bit of caveat and evangelism from the president. Help belay the fears that somehow, I decide not to get it, I will have a positive Stetson university experience. Can I count on Larry and Lynn for that answer?

>>DR. CORELL-HUGHES: Sure. I think one of the things that's important to know when someone does submit their vaccination record, that goes into a pretty private and controlled system. And so it's not the case that like, you know, the president of your fraternity would know who's vaccinated and not. You know, they may be encouraging one another to get -- become vaccinated so that you know, we can reach the 70 percent and the level and reduce restrictions. So they're maybe doing that. There's that information is tightly controlled from the university standpoint and only managing isolation and quarantine and contract tracing and for the reaching the immunity level.

Our student body, you know, we have a very wide and diverse eclectic students body and there's lots of different opinions. So would there be a debate in a residence hall room on a Thursday night about why you should or not get vaccinated? Probably. Absolutely. There's going to be the conversations in the dining places or in passing or in classrooms. That will absolutely as an academic community ideas and truth and understanding what is best for the community, those are part of our values. So those conversations will happen and so, I would encourage any student to you know, own their well thought out perspectives. And be open to learn while they are here at Stetson. So --

>>DR. ROELLKE, PhD: Excellent. I'm grateful for the last part and particularly that part. It seems as me as an educational community that's precisely what we do. We have conversations about difficult topics and that is how we learn from one another. I thank you for the commentary. Lynn, do you have any other insights you want to add to the topic?

>>LYNN: Just a quick add because I love that Larry said there. I want to highlights there are institutions that are actually having different policies for students that have been vaccinated and ones that have not. While we see pros and cons to that, that's not what we are doing at this time, we don't want people to feel shamed or unsafe, as was the question. So while we'll continue to encourage facial coverings for people that are not vaccinated, there is no repercussion or nobody going around making sure that people that are not vaccinated have their facial covering on. We are not requiring badges or brace lets or anything of that sort that would identify someone as being different because they are not vaccinated.

>>DR. ROELLKE, PhD: That's great Lynn and something that Dr. Smith said earlier throughout the last academic year, we focused on the other mitigates that we had at disposal, prevaccine. Washing our hands and distance and crowd size and wearing masks and they are also proven mitigates for the virus. Let's keep them in mind too as we continue to push vaccination goals. Ray to you for the next question there's a question logistically. If I'm the winner and I paid my bill already, how does that work?

>>SPEAKER: That's a good question in fact because the bill was due today. If you paid it in full, you get a refund for the difference of what the scholarship is and you paid in excess. It will pay out in August, I think, the disbursement date is August 23rd. So you would get a refund for you know, the cover whether it be room and board if you paid in completely full, a nice refund check in the fall and nothing to be paid in spring.

>>DR. ROELLKE, PhD: Excellent. There's questions about masks in classrooms. Lynn, to you for this, there may be particular classrooms based on faculty members discretion that may have different rules as contrasting with the campus as a whole. Do you mind talking about that caveat?

>>LYNN: Absolutely. This was something really clear to the members of Safer Stetson that at the 70 percent rate that we would still leave the option for individual faculty members to require masks facial coverings in the classroom if they felt a need to do that. They need to be clear with the expectation just like any other classroom expectation and make sure the students know that's expected of them. And the students do have to wear a facial covering in that classroom. We really don't want to have to go there but if we do that would be a community standards concern.

>>DR. ROELLKE, PhD: That's helpful. Lynn, to you again. Tell us about gateway testing, we deployed it I think effectively last fall and spring as students reentered the community. I know it's not a focus on the attention here today.

If you could, tell us about the clearance process through gateway testing which is another strategy to keep the community healthy and safe.

>>LYNN: Absolutely. So details on gateway. If you are a vaccinated employee, then you are exempt from the gateway process. If you are unvaccinated employee, you are expected to get tested through the gateway process. The dates are the 15th and the 19th and on campus. It's the lab based testing, PCR. If you are a student, you will go through the gateway clearance process regardless of vaccinated or not. But you don't have to get tested if vaccinated.

The reason for that is because of what we just talked about. We are not trying to shame people and so, all students will have one of the brace let that they will wear for the first few weeks of class. I don't have the date in front of me. It will indicate they are cleared. That's the language we are using and that language allows us to be in compliance with the Florida's law. You don't have to spit in the cup if we have the vaccination record. You can just get your key if you are residential student and get your brace let in you are anybody in the process. We are starting signups for that. If you are an early arrival which are the athletes and the student leaders, you got an e-mail today to sign up for the appointments.

There was a question if you can't make the appointment, just respond to the e-mail and they will help you figure out it.

And for other folks, you'll start getting the emails, next week, we have a lineup of who gets them first. So that people can sign up. If you are incoming first year student, it will be during your focus orientation check in that's the 13th and the 14th and continuing student is 15th through 19.

>>DR. ROELLKE, PhD: Great. Lynn, one follow up. I know it's antidotal but I think it helps illustrate when one gets vaccinated sort of the liberation that occurs when you are vaccinated because I think we had a positive case on campus and there was going to be isolation that needed to take place but it was not necessary because the student was vaccinated but had not submitted it yet? Is that correct?

>>LYNN: That's correct. Just happened definitely a direct exposure and the student told us they were vaccinated and the student submitted their card and I'm going to engage the student to see what held them back from turning in the card beforehand. The student was able to be cleared right away and they are symptom free and feeling great.

>>DR. ROELLKE, PhD: Thank you. Lynn. Dr. Smith, I want to ask you about generalized

observations which you shared earlier. But what are we learning about the currently positive activity rates around the surrounding communities?

>>DR. SMITH: Increasing. What we tend to look at the canary in the coal mine for the hospital and the urgent care positivity rates. Because patients go to urgent care to get tested from the primary care office because it's quick and we can tell what's coming to the ER maybe a week or so later when the patients get sicker. It's in the double digits now. 10, 12, 13 percent of patients that come in respiratory symptoms, test positive for COVID. What the CDC does, are you guys an out of health testing for the variants? We are not. The CDC is coming behind and they are taking all the little positive swabs – which is gross -- and they get them up to Atlanta and they actually test them.

So what we are seeing is that now approximately 50 to 60 percent of the cases of positive COVID are Delta variant now. That's scary because I read an article a week ago that said 50 percent. That article sited that two weeks before it was 30 percent. It has doubled in three weeks. That tells you the dominant strain is going to continue to be dominant.

In fact, parts of Missouri that are up in the 70 percent range. What we are seeing is you know that positivity rate is climbing, the proportion of the Wuhan strain. And a gamma variant as well. Not a lot of positive news out there for the standpoint of the rise. The positive news is like you said earlier, we have the mitigates and know what to do and have the play book. So we have been through it before and now we have widely available vaccines.

Please, for the love of America, everybody get the vaccine. It's widely available and within a few days you can enjoy some protection after you get the shot. Pretty please, everybody again, help me help you by keeping you out of the hospital, I would love to come see you at a party at Stetson or sporting event but not here.

>>DR. ROELLKE, PhD: That's a perfect way for us to conclude the Webinar today, Dr. Smith. We owe it to you as the medical provider and the neighbor to keep your job easier and keep the beds open and not filled. Thank you so much for your clear and firm messaging today. Very much appreciated. Stetson is a fact a place where learning and values meet. I would like to conclude will something we'll do this year is kindness not only matters, it enables us to listen and engage with others unlike ourselves and consider paths that we can forge together to make our community and the world a better place. Get vaccinated and stay healthy and safe and we can't wait to see you in the fall.

Go Hatters!