

Aug. 19, 2020, Weekly Briefing Transcript

Dr. Podolsky:

Good morning. I'm Dr. Daniel Podolsky, President of UT Southwestern Medical Center, and I am pleased to welcome you once again to this weekly briefing session for the UT Southwestern community. As in past weeks, I'll plan to spend about half of the time we have this morning providing an update on development since last week's briefing and then turn to Jenny Doren, Director in our communications office, who will pose questions that you have submitted since that last briefing.

To dive right into the topic of COVID-19, I am pleased to be able to report that the trend in declining cases and hospitalizations that I noted last week has continued since that briefing. And, indeed, in reviewing the latest update from our UT Southwestern modeling group, which I received late last evening, we can anticipate that trend to continue in that same direction for the coming two weeks. To put a few numbers around that overall trend, overall the hospitalizations in North Texas have declined a further 10 percent compared to a week ago, and that's 27 percent decline compared to two weeks ago. Test positivity is also declining, which is a leading indicator about the eventual trend we will continue to see for hospitalizations.

Most recently, the positivity among those who get tested at Dallas County hospitals has been at 14 percent, and that's compared to a rate of 16 percent in the prior week. Especially encouraging to me is to see that the Rt value over the past two to three weeks in both Dallas and Tarrant County has been well below 1. In fact, in the range of 0.8 to 0.9. And that's an indication that at this point in time, the scope, the scale, of the pandemic in our region is shrinking.

However, that is no basis for complacency because we know from experience that our behaviors, as they have changed over time, have influenced whether we have seen a decrease in cases or, looking backward, an increase in cases. And of course, we all know that we're entering into a new period in which schools will be opening with the uncertainty as to how much that will impact the transmission of COVID-19 in our region. Also, we are approaching a three-day holiday weekend early in September, and we can only hope that the kind of discipline that we seem to collectively have maintained over this past month, which has led to these very favorable trends, will continue to be exercised, notwithstanding the fact that a holiday weekend is usually a time for a celebration and communal get-togethers.

So, nonetheless, I think we can all feel that we are in a better place than we were through the month of July and with continued focus on wearing masks and maintaining physical distancing and the rest of the nonpharmacologic interventions that we will continue to see those trends progress.

In terms of where we are in the campus, it reflects the general trends I've just described for the region. As of yesterday afternoon, there were 21 patients that we were caring for at Clements University Hospital and 65 patients at Parkland. You will likely recall that at those numbers, that is well below half of the number of patients we were caring for at Clements and Parkland, respectively, if we look backward three and four weeks. That's not to say, though, that some of those patients remain quite ill



and in the ICU requiring mechanical ventilation. And so even if the trends are positive, we still know that there are many patients who are requiring the skill and expertise of all of our caregivers and the teams working with them across the campus.

A topic that I have touched on in each of these last several weekly briefings has been COVID cases on our campus among those employed by UT Southwestern. And indeed, the trend follows in that regard, what we've talked about already, in what's happening in the region. Over the past week, only nine additional members of the UT Southwestern community were diagnosed as having COVID-19. And in keeping with the overall trends, which we've talked about in past briefings, in this instance, every one of those was acquired through an exposure in the community, and none reflected a transmission from one employee to another, or from a patient to an employee. To give you the total running aggregate number of our colleagues who have experienced an infection of COVID-19 since the pandemic began, that now is an aggregate 245 total individuals; 210 of those 245 were the result of community-acquired transmission, eight were from one employee to another in a nonclinical area on the campus, 14 from one employee to another in a clinical setting, and 13 from a patient to an employee.

So as I've said in providing the updated numbers each week, this is evidence, in my mind, of just how effective it is if we are careful in carrying out our responsibilities here on campus, how safe an environment we really maintain. And at the same time, just as I said about maintaining the overall trend in the region, it's also true here on the campus that continued vigilance is the only way in which we will continue to be able to ensure that level of safety.

I would like to return to a topic that I've mentioned, although not last week, but I think is a very important initiative that has been spearheaded by UT Southwestern now being carried out in conjunction with our partners at Texas Health Resources, and that is an expansive prevalence study to really identify where we may have asymptomatic infections across Dallas County and Tarrant County as a basis then to focus where efforts might be most effective to further diminish transmission here and in our broad communities. This prevalence study has now been in progress for about three weeks and includes a very active outreach through mailings to a true cross-section of the communities of the two counties by virtue of an outreach that is ensured to reflect the diversity in every sense of the word of the populations of Dallas and Tarrant County.

We are eager to see the participation of those invited to join and undergo the test, which is both a test for the virus and antibody – the latter as one way of seeing who may have been infected without actually having known it. And there is no question that this study – which is one of the largest, if not the largest, to be undertaken across the country – will give us new insights into the dynamics of the pandemic. At this point, the study leaders spearheaded by the Principal Investigator, Dr. Amit Singal, are looking for volunteers to walk in the neighborhoods where people have been invited to participate, to make more direct person-to-person contact as follow-up to the letters that people have received about the studies, since, not surprisingly, in far as not everybody will read every piece of mail, we hope to increase the uptake of the invitation.

The study team has carefully thought through the logistics of this block walking to ensure the health and safety of volunteers. There are town halls being planned for next Tuesday, Aug. 25, to explain the need for volunteers and what they will be doing. Please check the COVID-19 website for further information, and please do consider volunteering as a way to help our overall institutional effort to help our overall



community. We expect this to be a pathbreaking study and by volunteering, you can have the gratification of knowing that you contributed to its success by helping to ensure that it was able to enroll the full number and diversity of participants needed for it to be a success.

Turning to a related topic, I'm pleased to remind you and update you on the active efforts underway at UT Southwestern to participate in clinical trials aimed at defining the most effective means of treating patients with COVID-19. This has included a trial with Remdesivir, with and without other drugs, to define its full extent of its potential effectiveness. And that's part of now a growing number of studies to look at their potential to help those who have not been sick enough to require hospitalization to recover from their COVID-19 infection more rapidly.

In addition to the outpatient version of Remdesivir, we have a trial called COLCORONA, which is evaluating colchicine, a drug approved by the FDA for the treatment of gout to see if it will decrease the incidence of hyperimmune reactions seen in some COVID-19 patients.

A third outpatient trial is one with a combination of antibodies produced by the Regeneron company. This will mirror a trial already underway across Clements University Hospital and Parkland for those who are hospitalized, but with the hope that treatment in the outpatient setting will, in fact, prevent the need for hospitalization for those whose illness might progress. And we do expect additional trials will follow in the weeks ahead.

So in keeping with UT Southwestern's mission not only to provide the best care possible today but to try to be part of creating a better tomorrow, I'm delighted to see so much commitment to our clinical research teams to be part of defining best treatment for COVID-19.

Before wrapping up this update, I do want to touch on a couple of topics. The first is to say how pleased I was to know that over 600 of you listened to Monday's webinar on recognizing and addressing racial bias in science. For those of you who did not have the opportunity to listen in on Monday to this terrific program, I want to be sure you're aware that it is recorded and will be available online on the Office of Faculty Diversity & Development website.

And as I mentioned last week, especially for those of you with school-aged children, I recommend that you watch the current video in the "What to Know" series hosted by Dr. John Warner. His most recent guests were Michael Hinojosa, Dallas ISD Superintendent, and Joan Buchanan Hill, Head of School at The Lamplighter School. Both of them were impressively thoughtful and articulate in talking about the challenges and preparations for them, and for teachers, parents, and children in facing the school year that has started for some and will begin for others after Labor Day.

It's in that context I'll remind you about the child care toolkit on the COVID-19 website, which has been updated to include district-specific back to school information, as well as information about ways to prepare for the return to school. In addition, the toolkit has information for parents who are seeking child care and/or tutoring services. And so with that, I'll conclude this update and turn to Jenny Doren to respond to your questions.

Jenny Doren:



Good morning, Dr. Podolsky. You have mentioned during multiple briefings that UT Southwestern does not have any layoffs related to COVID-19 on the table, but what about department reorganizations that may involve a reduction in staff and/or salaries?

Dr. Podolsky:

So let me make a distinction. As acknowledged in the question, we have been very explicit to say that we are not planning any layoffs or furloughs that are the result of COVID-19 and its impact at UT Southwestern. Similarly, we have no plans for organizational-wide layoffs or furloughs or changes in organization as a result of COVID-19. We want to do everything we can to support our workforce and to be sure they will be there for UT Southwestern and all the people we serve. At the same time, the business practices will continue as usual and, as appropriate, programs may evolve. We still expect people to perform as they would in any circumstance, irrespective of COVID-19. So none of our practices are changing with respect to employment as a result of COVID-19. We continue to focus on what we are all doing to advance the mission of UT Southwestern.

Jenny Doren:

Thank you for that. So turning for a moment to politics, given President Trump's executive order deferring the "withholding deposit and payment of payroll taxes," how will the University handle this situation? Could employees possibly sign an affidavit so that those taxes could continue to be withheld so that we don't have to worry about paying those taxes back once the moratorium is withdrawn?

Dr. Podolsky:

Well I appreciate the question because we have been considering how to both address that executive order and at the same time be as supportive and create as least confusion as possible for employees of UT Southwestern. So just as a starting point, for those who may not be aware, President Trump signed an executive order this month that impacts Social Security tax withholding and reporting requirement. The executive order directs that employees' portion of the Social Security tax, 6.2 percent, be deferred for four months, from September through the end of the year. I do want to underscore that this is a deferral of the Social Security tax and will need to be repaid unless additional legislative action is taken to forgive the loan by the Congress.

The proposed temporary payroll tax holiday would likely only apply to those making less than \$100,000 per year. If Congress does not make the deferral a permanent tax reduction, then UT Southwestern would have to collect the owed taxes back from employees. Given the current uncertainty regarding procedures, the UT System is recommending that we do not implement any changes until the Treasury Department issues additional guidance. And we will, of course, be following that closely. As we have more clarity, we will be sure that employees are appropriately informed of our plans to conform with those.

Jenny Doren:

Now, to a question about our masking policy. Masks, as no surprise here, are generating a lot of media coverage right now. Given new studies testing the effectiveness of various types of masks, one of our



staff mentioned that Children's updated its policy to not allow anyone with facial gators or masks with valves to enter the building. Should our screeners be asking patients wearing those types of masks to exchange them for perhaps surgical masks?

Dr. Podolsky:

Well, our current policy does not permit masks with these exhalation valves for UT Southwestern personnel. But in light of additional information and reports, we are currently reviewing our mask policy more broadly. At the same time, we will be reluctant to change policy with every bit of new information until it's possible to really assess which of these really have merit and should be used as a foundation for our campus policy. So we will be reviewing our mask policy, and I would encourage you to monitor your email for updates to these and to our policies regarding which masks will be permissible on the campus for patients and visitors as well.

Jenny Doren:

You mentioned Dr. Warner's "What to Know" video series. This week, we're going to be touching heavily on masks. We're going to have Dr. Seth Toomay and Dr. Brad Cutrell on that episode. So look out for that on utswmed.org. Friday at 9 a.m., we'll post that.

So there is ongoing research around pregnancy and COVID and in particular new findings that pregnant women with COVID-19 may be at increased risk for ICU stay and ventilator needs. Does this change our guidelines around who is considered high-risk?

Dr. Podolsky:

Well, our current definitions of high-risk health care employees include those over age 65, or in their third trimester of pregnancy, or with underlying health conditions. Those health care workers at UT Southwestern who are at high-risk can voluntarily return to patient care by submitting a written request to their supervisors. So just to be clear, if you are in one of those high-risk categories, you need permission in order to be involved in patient care activity on the campus. If your essential job functions do not require direct patient care, you are not considered a high-risk health care employee. If you have any questions about returning to campus or policies, please speak with your immediate supervisor or human resources.

Jenny Doren:

Thank you. We continue to receive new questions about vaccines. Will UT Southwestern offer employees who are 65 and older a pneumonia vaccine? Can they get it on-site in addition to the flu vaccine?

Dr. Podolsky:

At this time, we have no plans to provide other vaccinations during the flu vaccination campaign. However, I will note that the high-dose flu vaccine, which is recommended for adults 65 and older, will be available for employees.



Jenny Doren:

So now to our final question for the day. Dr. Podolsky, we received a question about citations being issued in labs where 6 feet of social distancing are not being observed and possible exemptions for training new lab members. Can you please explain if this is happening and what exactly the rules are?

Dr. Podolsky:

Well, currently, there are no laboratory inspectors or citations being issued. We expect every person at UT Southwestern, in this instance those working in the laboratory environment, to comply with all of the policies that are designed to keep them safe and to keep all of those who they work with safe. And that means that masks and other PPEs must be worn at all times in the laboratory. And this is certainly especially important when it's necessary to safely work closely with learners or staff needing training on a side-by-side basis for short periods of time. Again, we should look to limit the time in which there may be less than the 6 feet of distancing that is otherwise expected, but experience would say – just again reflecting on the numbers that we have seen over the course of these months – that even with those brief periods needed to provide close supervision in a physical sense, maintaining the use of PPE and the additional use of hand sanitizers and other nonpharmacologic interventions does maintain a safe environment for everyone.

Jenny Doren:

Thank you for your time and, of course, your valuable updates.

Dr. Podolsky:

Thank you, Jenny. And I hope everyone will have a safe and productive rest of the week.