Dr. Podolsky:

Good morning. I'm Dr. Daniel Podolsky, president of UT Southwestern Medical Center. I thank you for joining this biweekly briefing session for the UT Southwestern community. As in past briefings, I will spend about half of our time together providing you with an update on developments on the campus over the past two weeks, and then turn to your questions that will be posed by Jenny Doren, a director in our communications office. I do want to note that, if we're unable to really cover all of the questions that you've forwarded in the time we have this morning, answers to those that we don't cover will be posted, so they will all be addressed.

Let me go directly to the topic that of course remains front of mind for all of us, and that is the pandemic and its evolving course here in North Texas. Regrettably, as we're meeting this morning, it's very clear that we are in the midst of a third wave, if not a actual surge. I did have the opportunity to see the latest update from our multidisciplinary modeling group, which was forwarded just late last evening. It does show considerable more momentum since our briefing two weeks ago, with now an average daily estimated new case in each of Dallas and Tarrant County at about 900 to 1,000 per day. The model suggests that that trend is going to continue and projects two weeks from now we'll be talking more about 1,200 to 1,300 new cases per day in each of those counties, and there are parallel trends in the other North Texas counties as well. This is associated with now an increasing frequency of positivity among those being tested at the Dallas-area hospitals, which has correlated with the trends towards subsequent diagnoses and for a subset of those eventual hospitalization. When we met last, our positivity rate here was about 10% as of the last few days, it's at the 14% level.

If there is a silver lining in all that, it's that clearly there has been progress made in how we are able to care for patients with COVID-19. While there are certainly rising numbers of patients who are in hospital across the North Texas region, the number requiring ICU care is actually substantially lower than it was in the early months of the pandemic, roughly half, if not less than half of what that rate was. Correspondingly, there has been a decrease in the overall mortality to about half of what it was in April. Notwithstanding that, a rising number of cases does mean that we are seeing rising census in hospitals, and that is true on the campus. As of yesterday afternoon, at least, there were 36 patients hospitalized at Clements and 85 at Parkland. That compares roughly to the low point that we saw in early September of about 10 to 15 in Clements and about 40 at Parkland. I think the trends are unmistakable and all follow in the same direction.

One further comment on this latest update from our UT Southwestern modeling group, which, by the way, as in the past, will be posted publicly after it's been cleaned up a bit so to speak, is that we're really seeing cases across the entirety of the geographies of the counties and also across the full spectrum of age groups. In the past, there have been times during the pandemic where we've seen a much more significant predominance of older age groups, and then, for example, in early September, a younger demographic in the very early 20s, but now it's really, not only across all geographies for the most part, it's also across all age groups.
Sticking with the campus, who we continue to monitor closely any instances of diagnoses among the UT Southwestern community, and there have been at least a couple since we updated, since this update two weeks ago. One, an instance from a patient to one of those caring for this patient, and another, an employee to an employee transmission in the nonclinical environment. As a running tally, we've now had, since the beginning of March, so over eight months, 25 total instances of employee-to-employee transmission, or roughly half in the clinical setting and roughly half in the nonclinical setting, and 13 instances where an employee has seemingly acquired the infection in the course of caring for one of our patients who was diagnosed with COVID-19.

Finally, before I turn to other matters, I know one thing that's on your mind, certainly is on my mind, is looking beyond the new year as the pandemic continues to evolve. I am sure most if not all of those listening this morning know that we made the decision now a few months ago that we would continue our current level of operations at least through Jan. 1. We are obviously now on the cusp of the month of November, and with that we'll be considering carefully what is an appropriate policy with the safety of the campus community foremost in mind if we look beyond Jan. 1, and I expect to be providing guidance on that at our next briefing in two weeks, but I do want to assure you that's very much on my mind and on the minds of the leadership team and the EROC, not least because you want to have some ability to plan for managing both your work here at UT Southwestern, of course, your family life as well. Two weeks, I expect to be able to share a plan. Again, I want to emphasize the overriding most important concern in decisions about that will, as it was in the past, be the safety of everybody at UT Southwestern.

With that, I'd like to turn to non-COVID matters. I think there are a number that should be of interest to the campus. First, I do want to make you aware that we, having completed our FY20 on Aug. 31, which correlates with the state's fiscal year, we've now been able to close the books as it were. I share with mixed feelings the final determination that, in the course of that fiscal year, we did end with an operating deficit of about $46 million. My mixed feelings are that that's clearly not in any normal circumstance very good news to have an operating deficit. We've not had one before, at least in the 12 years I've been at UT Southwestern. But it is not nearly as dire an operating deficit as we really had every reason to expect way back in the mid-spring May and early June where we're feeling the full brunt of this pandemic and its impact on our campus financials.

We are committed for the long-term strength and vitality, really of the UT Southwestern to navigating the nooks this current fiscal year towards a positive margin. I was encouraged to see at least the preliminary figures for our first month of the year, September, to suggest with the incredible hard work and some belt tightening on the campus, that it was a positive month certainly a much more encouraging for sign and what we were experiencing as I talked about earlier in the spring, as the pandemic was really settling in here.

So with that update, which I felt you as members of the campus should be provided, do want to remind you to move to another topic that our annual flu vaccination campaign is very fast approaching its conclusion, and that's on Saturday, Oct. 31. At last check, more than 8,200 employees and students have been vaccinated. And if you have not done so already, please take advantage of our free flu shot. It is the case that so far the numbers of cases of flu are running below those normally seen at this time, but we are early in the flu season and we should be doing everything we can to protect each of you, but the
campus as a whole. And so I strongly urge you to get that flu shot and to remind you that you can get that shot here at UT Southwestern free, even if you don't otherwise get your medical care with us at UT Southwestern.

Moving to other topics, I'll mention two to me anyway happy events. This coming month November, we will be topping off the two towers that are currently under construction on our North Campus. To remind you one of those house the expansion of our brain-related research under the umbrella of our Peter O'Donnell Brain Institute, and the other will provide a new really state-of-the-art facilities of the Harold C. Simmons Comprehensive Cancer Center for providing the very best experience to our patients and their families who come to us for cancer care as an ambulatory center. Sticking with the topic of facilities I'm also pleased to say that we are on target for the first phase of the opening of the third tower of Clements University Hospital. That will take place beginning of the second week in December.

So a little more than a month from this morning, and that will represent the opening up of three to four floors within the building. The remainder of the third tower will be opened in the second part of January, and it represents an enormous effort by really almost too many groups to mention around this morning, but say to all of them, we are grateful for bringing that project to what will be a successful conclusion just when we needed it most. And surely a great addition to the campus in what it will enable us to do to provide health to our patients in our community. I wanted to also share with you the happy news of recognition of two of our faculty with really quite special honors. Our colleague, Dr. Ralph DeBerardinis, a member of the Department of Pediatrics and the Children's Research Institute at UT Southwestern early last week was elected to the National Academy of Medicine.

With Dr. DeBerardinis' election that brings to 17 active members of the National Academy of Medicine as members of our faculty. This recognizes his really important and somewhat contributions through his study of relationship between metabolism and cancer among other important topics. And his election to the National Academy of Medicine really reflects the impact and national stature that have followed from his work.

Also this week, Dr. Steven McKnight, formerly Chair of our Department of Biochemistry, and still professor in that department was recognized with the Robert A. Welsh prize in Chemistry. This is really one of the greatest honors in the field of chemistry and well-deserved by Dr. McKnight for his many contributions, including the study of areas that regulate the expression of genes, the specific transcription factor. And in recent years, the role of a class of proteins called low-complexity sequences that form really important aggregate that really regulate some of the most fundamental functions of cells. And through that to really be important broadly in biology and medicine. So we congratulate both Dr. DeBerardinis and Dr. McKnight.

And I'll conclude with a couple of coming attractions. Tomorrow, Dr. Julie Pfeiffer from our Department of Microbiology will be speaking as the virtual version of our President's Lecture Series. I do hope you will join in that will take place tomorrow at 4 p.m. And really Dr. Pfeiffer will be sharing their fascinating work about the unexpected connections she's discovered between bacteria, particularly those in the gastrointestinal tract and viruses. And some of that with some important insights relevant to SARS-CoV-2, which also as we learned can be present in the GI tract.
The second coming attraction, we have a little more forewarning on this one is to take place two weeks from today. So the same day as the next briefing, and that's our Tribute to Veterans celebration and something we do annually. Our keynote speaker is Col. Victor Suarez, who is the assistant chief of staff for logistics for the U.S. Army Regional Health Command. Part of his many duties, Col. Suarez serves as the vaccine program managers, and oversees all aspects of health care, PPE lab diagnostics, and medical maintenance supplies for 14 of the U.S. Army's medical treatment facilities. This is an event to remind you is sponsored by our Veterans BRG, one of our many business-related groups that celebrate and bring together distinct communities within the UT Southwestern, which in [inaudible 00:16:12] and certainly exemplified by the veterans, really are part of the strength we derive from diversity as an institution. So I really hope you'll all have that on your schedule, and sharing it, albeit this year virtually.

And with that, I'm going to conclude my update, and I'm going to turn to Jenny Doren for your questions.

Jenny Doren:

Good morning, Dr. Podolsky, I'd like to begin with a few questions regarding employee benefits.

Many families have been hit hard financially during the pandemic. We understand the institution's difficult decision to forgo the annual merit plan this fiscal year, but in lieu of this, are there any other ways that UT Southwestern can help families? Is it possible to temporarily reduce the mandatory investment into the Teacher Retirement System of Texas, or TRS, or perhaps lift the restriction of borrowing against invested retirement funds?

Dr. Podolsky:

Well first of all, I do understand that the pandemic has provided stress of all sorts over these past months. And in some of that, just the anxiety and the emotional stress that it provides, but also in the very real economic stress. Clearly, we've experienced that at the level, as I've shared before and just this morning, at the level of the institution. But I know that this hits home for so many of the UT Southwestern community individually.

Much as I would like to be in the position to really advance some of the ways that have been touched on in the question, to provide some relief from that stress, unfortunately, as a state institution we are generally bound by the laws and the regulations of the state. Retirement contributions, for example, are regulated by the state and cannot be changed by the institution.

However, employees may be eligible to take a distribution from their voluntary retirement accounts. That could be a DCP or a TSA, if you have one, up to a maximum of $100,000 of their available account balances through Dec. 31 this year. Additionally, if you are currently making payments on a loan from a voluntary retirement plan, you can also request a deferment of payments for up to one year. I encourage employees to contact their retirement vendors to initiate a request for loans or deferments. Employees who need additional assistance can contact our EAP, our Employee Assistance Program team at 648-5330, and they provide the names of local community organizations that may be able to offer additional financial assistance services.

Jenny Doren:
Well, I'd like to stay on the topic of benefits for a little bit longer. As you have heard yourself, employees are grateful for the opportunity to work remotely. They're also grateful for the focus of the institution to keep our community safe. For those who are working from home, is there any financial assistance for office supplies and other necessary equipment?

Dr. Podolsky:

Well, I certainly encourage all employees who are working remotely to talk with their immediate supervisor about their needs for equipment and supplies to successfully complete their work. We have been able to meet the needs for laptops, cameras, and other essential equipment, to ensure connectivity and completion of work. And in addition, employees can access discounted cellphone service through our employee discount. Details of available discounts can be found at our website, and we'll post that for those who want to follow up on this briefing.

I do hope that there's a little bit of an offset in terms of the costs that you may have incurred by virtue of savings that follow from reduced commuting and transportation costs. But please, I suggest you discuss this with your immediate supervisor and I'm sure they'll do what they can to be helpful.

Jenny Doren:

Thank you, Dr. Podolsky, one final question regarding benefits, and this is a serious one. The past several months have been mentally taxing for many of us. Knowing that employees are dealing with added stress, has there been any discussion regarding a separate allotment of mental health days for employee wellness?

Dr. Podolsky:

Well, first to acknowledge that during this period and beyond, the stress that the pandemic has really brought into everybody's life in one fashion or another, I do know that many employees have experienced higher than expected work hours or demands, and really encourage you to use vacation time as a scheduled time off to refresh and regroup.

While I do appreciate the spirit behind the request for additional mental health days, our leave programs, like our retirement programs, are dictated by the state and not left to the discretion of an individual agency of the state, like UT Southwestern. But again, I want to really encourage all employees to take time off and replenish yourself to sustain your emotional, mental, physical, social, and spiritual well-being.

Of course, everybody I hope would be aware that we have the leave options that include sick, vacation and holiday time to ensure that employees are supported for at least the amounts of time under each of those designated programs. One of the ironies, and we certainly saw this through the end of the summer, was that we collectively are not taking that time off. I understand that many may have not thought that take a vacation when we’re not really able to travel, but vacation doesn't just mean travel. It does mean a time to refresh and take time off.

And so I hope this year that everyone will really take advantage of that for your well-being, and ultimately, to speak from the standpoint of the campus, your ability to stay engaged and energized.
about the work here. But again, while we can’t, as a campus, just establish a mental health day program, even if that might be appealing to us, I do think it's important that we take the means that they do have by virtue of vacation and holiday time to get that time out.

Also, we'll take the opportunity to remind everyone once again about the availability of services to provide resources for maintaining mental health, and the availability to everyone of our Behavioral Health Support team, the team of advanced practice providers, psychiatrists, psychologists, and therapists. Responds to calls and emails every day between 7:30 a.m. and 6 p.m. This is really a supportive service. If a person calling needs a more, a higher level of care, such as counseling or an appointment with a psychiatrist, they will be able to provide that connection. So that's available to all. I want to remind you that in reaching out, all calls and emails are treated as confidential and not shared outside the team. And also in calling that Behavioral Health Support team, there is no charge. So please, if you're feeling distress, take advantage of the help that they can provide.

Jenny Doren:

Thank you for reminding us of those resources. Speaking of taking time off, with the holidays nearing, many of us if not all of us are weighing what to do. Are there any recommendations for families about whether to get together or hold off this year?

Dr. Podolsky:

Well, as a general guide, it's going to be important and we're only reminded by the recent trends that I've shared in terms of a rising number of cases that even though we head into a holiday season where we would naturally look to really have more time together with those close to us, it needs to be done with the same attention to limits of the size of gatherings. And importantly, of course, maintaining physical distancing and masking in particular where that gatherings are bringing together people who are not from the same household.

I will say that the EROC and the leadership team had the holidays very much in mind and will be sending out to the campus what I believe are some pretty creative ideas, hopefully helpful ideas about ways to celebrate the various holidays coming up even if it is in a very different context than we would normally be doing. So I think it's possible to enjoy the holidays and have fun and it's important to do so. I tie this back to the former question about maintaining all of our emotional and spiritual and mental well-being. And we'll hope that the suggestions that will be going out to the campus within the next few days will help in that regard.

Jenny Doren:

Well, in addition to those suggestions, I want to let folks listening know that this week's episode of “What to Know,” hosted by Dr. John Warner, Executive Vice President for Health System Affairs, is going to be focusing on this very topic of how to manage the holidays during a pandemic. He will be interviewing Dr. Trish Pearl, UT Southwestern, Chief of Infectious Diseases and Tony Roach, Southwest Airlines, Managing Director of Customer Service. So hopefully, we can provide some additional clarity and guidance.
Pivoting now to our current COVID-19 census, there has been a lot of media recently about rising cases and hospitalizations, as you spoke about during your opening remarks. As we are headed towards a surge, what can people do to help slow this with cooler weather and more indoor activity happening?

Dr. Podolsky:

Well, I'm glad for the question because it allows me to just go back and re-emphasize what I've covered in my opening remarks. I think all of us, it's easy to understand that all of us are tired of the sustained effort that we've been a part of now for eight months and more, but there is no room for complacency. We need to stay the course in maintaining our commitment to physical distancing, mask wearing, hand hygiene. I say that, it's important for three reasons. One, to protect yourself. Two, to protect those around you including the rest of the UT Southwestern community and the setting example when you're off the campus because it's hard to see how we're going to see a change in the trends that I've shared with you, which clearly are worrisome as we look at them now without it being galvanizing our entire community to really be rigorously attentive to these measures which are the only ones we know right now actually work to stem that they've stemmed the two previous waves. That's what's going to stem the third wave.

Jenny Doren:

So I want to talk and probably end on vaccines. With many vaccine trials taking place in both the U.S. and abroad, there have been reports of adverse reactions. When a vaccine becomes available, how do we know it will be safe to take the vaccine? And what does the FDA do to guarantee the safety of an approved vaccine?

Dr. Podolsky:

Well, it's of course a very good and an important question. And I would start by saying that the scientific community, vaccine manufacturers, and the FDA have standard processes that are robust and they remain in place to assure that vaccine efficacy and safety are monitored. They include data monitoring safety board, which includes independent scientists reviewing the data from the researchers and the company as the vaccine trials are completed. And there's an addition to these independent boards, the FDA oversight boards. It's clear this is a different circumstance where there is a time urgency and there's not going to be inherently the number of years that would normally go into the evaluation and review of a vaccine. And so, it'll be all the more important that the FDA will continue in long-term monitoring in these studies to know what the long-term consequences are.

There is an inherent unknown there that's different from current circumstances. But in the first approval process, there will be rigorous review of both the efficacy data and the safety data. I also want to add that I will be chartering a group here at UT Southwestern within the next few days of those coming from multiple disciplines as experts on our campus to help guide our policies and our ability to provide guidance to our patients and our employees when a vaccine becomes available. As to the data on efficacy and safety, even if the frontline is to rely on the FDA and behind it, the CDC, which has been a true bulwark for the American public in maintaining the safety of our vaccines. Historically, we also take very seriously our responsibility on the campus to be able to really know everything that can be known.
about these vaccines to provide guidance to, as I said already, both our patients and our own campus community.

Jenny Doren:

Well, glad to learn of those developments. And as you already mentioned, we will post all of the questions and answers online. Thank you.

Dr. Podolsky:

Great. Thank you all for joining me this morning, and I look forward to being with you in two weeks. In the meantime, I hope you will continue to remain as safe as possible. Thank you.