Class of 2024
Student Check-In

10/16/20
Student Check-in Format

- Presentations take place for first 30 minutes
  - Influenced by questions collected by your student leaders
- Post Questions in Q&A after Deans Presentations
  - “Like” questions posted by your classmates
- Online FAQs & recording of today’s session will be updated Tuesday following each virtual check-in

https://meded.ucsf.edu/covid-19-updates#FAQ

Disclaimer:
We answer questions generalized for the entire class…if you have specific questions related to you personally, please reach out to the Student Experience Team
All Student Check-in

- Acknowledging Uncertain Times
  - Lee Jones, MD, Associate Dean for Students

- Decision-Making Regarding In-person Activities
  - Catherine Lucey, MD, Vice Dean for Education

- Update on F1 Education & Travel Over Holidays
  - John Davis, PhD, MD, Associate Dean for Curriculum

- Q&A
Acknowledging Uncertain Times
Lee Jones, MD, Associate Dean for Students
Remind Yourself What You Can Do

- Connect with Peers via the Bridges House Program
- Sign-up to visit the newly opened MSC
- Virtual happy hours
- Exercise outside (hiking, biking, visit sunset beach)
- Outdoor gatherings (no more than 12 people physically distanced, wear a mask!)
Medical Student Well-Being Program:

Free Psychotherapy: The staff for this program is especially trained in working with medical students. This service is free to all medical students and will always be confidential. Please schedule an appointment either Dr. Howard Rubin or Vittorio Comelli via email or by calling 415-476-0468.
- **UCSF Student Health & Counseling:** (415) 476-1281, option 2
- **Student Experience Team and Medical Student Dean on Call (after hours issues):** (415) 476-1216, option 1
- **CARE Advocate:** (415) 502-8802 or email: care@ucsf.edu
- **National Suicide Prevention Lifeline:** 1-800-273-TALK (8255)
- **National Crisis Text Line:** 741-741
- **MedPeers Program:** Connects medical students with peers who have completed at least three years of medical school. Email medpeer@ucsf.edu and the MedPeer on call will respond within 12-24 hours.
Decision-Making Regarding In-Person Activities
Catherine Lucey, MD, Vice Dean for Education
We are all sorry the pandemic has not subsided as we had all hoped. We support you, and we are moving as fast as the virus allows to increase in-person learning while protecting the broader UCSF community and the Bay Area.
UCSF Pandemic Guiding Principles

- Follow guidance from the Local, State and National public health officials to minimize the spread of infection
- Decrease the density of people on campus to protect workers, learners, and patients
- Allow only essential in-person activities to minimize potential exposure
- As health professionals, role model adherence to public health guidelines
- Maintain students' advancement toward graduation
- Ensure the stability of our educational programs in response to shifting public health requirements
Q: How are decisions about what students are allowed to do being made?

- UCSF follows the directives of the San Francisco Department of Public Health as interpreted by the UCSF Emergency Operations Command (EOC) Center.

- Educational Deans of all the Professional Schools and the Graduate Division have jointly agreed to move in lock-step with regard to restrictions on gatherings and use of in-person activities for essential activities only AND to share the available spaces for all learners.

- UCOP UC Health Leaders provide guidance for all medical schools.
Q: How do you decide what is essential?

- Our decisions about in-person curricular learning is defined by two things
  1) the educational activity is time sensitive to keep students moving toward graduating on time and
  2) activity is unable to be conducted remotely without serious loss of effectiveness.
SFDPH Has Different Guidelines for....

- Social Gatherings
- K-12 Education
- Higher Education – Adult Learners/UCSF!
  - SFDPH may ‘lift’ restrictions for social gatherings and K-12 education, but does not impact higher education
Higher Education Directives (9/30/20)

- Small and stable cohorts of staff and students
- Indoor activities limited to 2 hours each with no congregation before or after the class; size of cohorts no more than those outdoor and limited by classroom size
- Large gatherings mixing multiple cohorts are prohibited
- Outdoor classes limited to 14 participants comprised of stable cohorts; instruction time “as short a duration as possible”
- Prevent outdoor groups from interacting with each other.
- No snacks and meals during instruction
What are options to consider?

Reminders that small group outdoor activities are allowed and encouraged— is there a need for more centralized help linking people up?

Outdoor student-led discussion groups comprised of 2 coaching groups (perhaps rotating which 2 coaching groups are linked each quarter)?
F1 Curriculum & Holiday Travel
John Davis, PhD, MD, Associate Dean for Curriculum
F1MS1 Fall Updates

- Thank you for your Feedback!
- All F1MS1 Learning will be remote from Thanksgiving through Winter Break
  - Decision based on student feedback
  - Follows UCOP guidelines
  - Provides continuity and equity of instruction for all students
Curriculum & Testing Details

- Inquiry Immersion (IDS 123A) remote January 4 – January 15, 2021
- CMC activities will remain in-person
- Students who leave the campus for more than 30 days will need to return to the Campus/Bay area by January 10, 2021 to complete a COVID 19 test prior to in-person activities.
While I am out of the Bay area, do I still need to follow the COVID-19 Code of Conduct?

- Please do! Be a public health model for your friends and family…
  - Wear a mask
  - Social Distance (stay more than 6 feet apart)
  - Wash your hands regularly
  - Limit the size of gatherings with people outside your household
MS1 Winter/Spring 2021 Updates

- Lecture and Small Groups (Foundational Science Blocks, Inquiry, ARCH Weeks) will continue to remain remote through June 2021.
- CMC learning will be in-person
- Anatomy lab will move to a hybrid in-person/virtual model pending approval from the Emergency Operations Command Center.
- Follows direction of other local institutions of higher learning
SHCS Update
John Davis, PhD, MD, Associate Dean for Curriculum
Q: Confirming when I return to SF after Thanksgiving/winter break, will I need to quarantine?

A: There is currently no domestic quarantine in CA for student travel within the United States.

- Students who participate in high risk activities should consult with a SHCS nurse.
- A COVID-19 test is required if a student is away from UCSF campus for whatever reason for more than 30 days.
- International travelers must self-quarantine for 14-days.
Q. Will UC require students to get a COVID-19 vaccine when one is developed and available?

UC looks forward to the development of a safe and effective vaccine for SARS-CoV-2. Vaccines are in development and only recently are being tested in human trials. The University is monitoring progress and may update its immunization policy, but only in consultation with the California Department of Public Health and our own internal experts, and after new vaccines are fully approved by the FDA and recommendations for use adopted by the CDC and expert professional organizations.

Reference: UC Influenza Vaccine Requirement Q&A -10/6/20
The lack of regular COVID testing has been another source of confusion. Will anything be changing with our infrastructure to allow for more frequent testing?

- The frequency of asymptomatic testing required is based on local conditions and campus density. UCSF is reviewing how other UC campuses implemented COVID-19 testing and will assess and implement feasible improvements to streamline testing for students required to test upon return from winter break.
Why doesn’t UCSF provide mass testing?

- Assumptions of models that support mass testing do not exist at UCSF
  - Small numbers of susceptible unprotected/unmasked individuals
  - Limited congregate living; low density workspaces
  - $R_0$ or $R_E < 1.5-2.5$

- Limited evidence that mass testing is effective

- False positives $\geq$ True positives
  - Prevalence 0.8%, Specificity 99%: 10 per 1000 TP and 10 per 1000 FP

- Empirical evidence at UCSF supports current strategy of rapid identification, testing and quarantine of high risk and Sx persons
  - Low rates of acquisition within UCSF: COVID-19 risk $<$ community
  - Low rates of transmission within UCSF: $Re = 0.059 (0.032, 0.108)$

SUMMARY: Currently at UCSF, mass testing would have minimal effect on reducing COVID, while creating large numbers of false positives at a very high cost.
Q and A