

**Faculty Senate MINUTES – September 7, 2021**

**[Zoom – @ 6:00 pm \(details at end of Agenda\)](#)**

**Senators Present:** Kenya Wolff, KoFan Lee, Shari Holt, Kerry Bowers, Alex Watson, Joseph Carlisle, Joe Sweeney, Melissa Bass, Lance Yarbrough, Robert Barnard, Angela Green, Dan Durkin, Carrie McCormick, Jordan Ballou, Matteo D’Alessio, Lauren Cardenas, Sasan Nouranian, James Cizdziel, Mike Cinelli, Donna Buckley, John Berns, John Lobur, Cole Stevens, R.J. Morgan, Carolyn Higdon, Whitney Sarver, Christy Nielson, Hans Sinha, Andre Liebenberg, Joel Mobley, Brian Boutwell, Carrie Smith, Brian Reithel, Heather Allen, Gabriel Garrido, Brad Jones, Sujith Ramachandran, Yunhee Chang, Scott Mackenzie

**Senators Absent (Alternate):** Conor Dowling (for SueAnn Skipworth), Simone Delorme (for Willa Johnson), Macey Edmonson (for George McClellan), Charles Mitchel (for Zenebe Beyene)

**Senators Absent (Unexcused):** Elliott Hutchcraft, Jesse Cromwell, Joshua First, Manny Perryman, Jon-Michael Wimberly, Randy Dale, Michael Repka, Carmen Sanchis-Sinisterra

- **Meeting Called to Order:** Chair Durkin introduced himself and noted how to take attendance through the chat function. We have some committee vacancies that I will post in chat. Correction: the meeting for January is on the 25<sup>th</sup>, not the 24<sup>th</sup>, which is a Monday. A reminder that our guests cannot vote if a vote is taken and can speak only at the invitation of the chair.
  
- **Approved minutes from the May 4, 2021, meeting**
  - MOTION
    - SECOND:
      - Vote – all in favor
  
- **Update from Bob Baker, Athletics, on how to recommend tutors to work with student-athletes**
  - We hire 60-75 tutors but have lost a number recently, as they have struggled because of Covid concerns and their mental health. Thus my need to come to you for graduate students or exceptional undergraduates to recommend.
  - Requires recommendation by faculty letter
  - Business math and sciences are especially sought but all subject areas are welcome
  - Fair pay and flexible hours, good job, great training and support
  - [Baker@olemiss.edu](mailto:Baker@olemiss.edu) or [careers@olemiss.edu](mailto:careers@olemiss.edu)
  
- **Associate Provost Rich Forgette, on the findings of the Faculty Annual Report Task Force**
  - Thanks to all the members of the task force this summer, which included Dan Durkin and Brice Noonan this summer. The problem is a longstanding one: our reporting period has not afforded sufficient time for annual reviews to ensure their integrity and timeliness.

Commented [AG1]: I don't know who was unexcused and who was excused but these are people on the list who did not sign in or have an alternate.

Commented [AG2R1]:

Commented [AG3R1]:

- Traditionally we have had a reporting period ending March 15, which is an odd beginning and end point. We've made things cleaner and simpler by moving to a calendar year reporting period, from January 1-December 31, so that everything can be placed in the appropriate FAR, to allow faculty more time to update FAR, and more time for chairs to conduct annual reviews and look at budgets.
- The window for faculty to complete FAR will open December 1 and close February 1. We are rewriting the FAR template to facilitate reporting and strategic planning when the budget arrives in May. We are also encouraging departments to regularly review and revise their tenure and promotion guidelines. The task force has established a sunset period for these on an 8-year basis. Departments must review their policies and take an affirmative vote, even if they decide to leave them unchanged. The 8-year period coincides with program review deadlines.
- **Q&A**
  - Q: what sort of education or training we might receive on the tags for FAR? Does each faculty member know what the strategic goals of the university, the college, or department are?
  - Forgette: We are relying on Strategic Planning Council to create tags but are looking at ways to give faculty discretion in where to place items.
  - Durkin: The task force also looked at items like High-Impact Practices faculty could check on their Faculty Activity Report.
  - Q: What about reporting research effort and will there be any changes in accounting practices?
  - Forgette: I forgot a really big item, so thanks, Bob. ORSP saw this as an opportunity to address an important problem: we need an auditable trail of how we treat research expenditures, a huge chunk of which is salaries. We need a clear defensive pathway showing what part of salary is committed to research. It's complicated and at the intersection of many places like IT and Academic Affairs, and it will have wide implications within departments looking at the respective roles of research, teaching, and service. Thanks for that important question.
  - Q: Was there any discussion of some sort of uniform method of effort reporting? Tracking seems to imply some mandatory effort reporting. Does this mean our hardline salaries will be trifurcated between different accounts for teaching, service, and research sub-accounts? Will this present any complications when contracts are issued, etc.? Are there any discussions about these follow-on implementation policies?
  - Forgette: The provost may want to chime in and nothing is set in stone yet but you're right there will be some sort of effort reporting template but it will likely be interfaced where a department chair would report that effort. A lot of this will be determined in later meetings.
  - Q: Keep us in the loop about how this process develops because it would behoove us to have a conversation about implementation. I can see the absolute need to provide that auditable trail, but it would behoove us to have that conversation going forward.

- Wilkin: Agreed. We want to make sure it can be done at the department level and not where accounting and budgeting and contracts are handled. Fund 10 account money would stay in Fund 10 account. What we refer to as XX02 accounts are for research expenditures. I don't think there are plans to change the accounting at this point, but we do need to make sure it makes sense at the department level, where these budget allocations will have to be implemented.
- Q: Does the document include a timeline for these changes?
- Forgette: Ideally the changes for the reporting period would be for the upcoming calendar year. We are working with IT to implement the change. There is some urgency for us to act on the research but we need to do more consultation and planning on that. So I don't have a timeline yet.
- Q: Would it look like one longer period or two shorter periods?
- Forgette: IT is helping us look at that because of the overlap between previous years reporting period and this one, so you'll have to decide what to place on this year's FAR and what to report next year.
- **Provost Noel Wilkin, with an update on the University's COVID-19 response**
  - Thanked everyone for helping us manage this and move forward with our mission. When the pandemic broke out we had no way to prevent its spread so we shut down while we planned and developed a layered set of protocols to help prevent the virus from spreading. Started bringing people back to campus June 5, 2020, as we saw how effective they were: masking, social distancing, testing, quarantine, isolation, etc.
  - 50-55% offered with some sort of on-campus in fall ; 70% offered in the spring has some sort of on-campus or face-to-face contact.
  - These protocols have helped us continue our mission without the virus spreading.
  - 168 million people have taken the vaccine and it's incredibly effective, more effective than any vaccine we have seen, including the flu. Recent research shows that 99.97% of those vaccinated will not experience severe health outcomes, even including the Delta variant.
  - Add masks to that and you get another layer of protection.
  - We have no evidence of the virus spreading in classroom or workplace settings on campus when protocols are followed.
  - Vaccine clinics have been running throughout every orientation session, which were all on campus this summer, and we have had 4 vaccination clinics before the semester began. We will post links to continuous vaccination schedule.
  - Get vaccinated now. It's the clearest path to managing going forward and most effective strategy to prevent serious health outcomes.
  - Same team will begin offering the flu vaccine soon since flu can also cause hospitalization and death.

- MDOH launched testing at the Oxford Conference Center for free. Appointments can be made as of today and tomorrow with more to come next week. We have worked with the city to set up testing since June, and we're happy it's here.
- University Health Center brought back PMG that ran testing last year to make testing more widely available.
- We are still contract tracing and quarantine/isolation, but there is no need to quarantine unless symptomatic, if vaccinated.
- Providing guidance for isolation or quarantine. Sent a flowchart around campus to administrators and supervisors.
- Dashboard has all case reports. Every reported case goes straight from the health provider to the Tableau interface.
- We also met with faculty who handle wastewater treatment and are testing to see the volume of cases on campus. Last year showed strong tracking between case load and wastewater treatment to get a sense of how prevalent the virus is on campus. There is a lag time on that. Thanks to Matteo and his team for making this happen.
- Outbreaks are linked to a specific place or program. Health center handles this with chairs and deans who are responsible for these areas.
- Immune-compromised people or those who can't get vaccinated should see Kimberly DeVries, the new director of the EORC, to help accommodate people. She works with the chair and the dean individually.
- We recognize some faculty and staff are caring for children who have to quarantine or isolate. We are working with faculty in this situation to keep students learning within classroom spaces, whether they need to take leave or get their courses covered.
- The American Academy of Pediatrics says it's uncommon for children to get severely ill due to Covid, even among Delta variant. Hospitalizations tracks about the same rate as the flu. Kids are not at the highest risk of Covid.
- I asked University Communication to compile a list of how we are communicating; see the attached list of dates when emails or letters have been sent and from whom.
- I can assure you not a single day goes by that I'm not dealing with things the pandemic is throwing at us and keeping up with the research on what's happening and working with deans to handle all these issues people are facing. A lot of concern and we are doing everything to keep our mission moving forward. It's disruptive but the good news is cases seem to be on the decline statewide.
- **Q& A**
- Q: Any plans to do pre-emptive testing for asymptomatic folks offer booster shots? People in public-facing roles are especially concerned.
- Provost Wilkin: Still awaiting guidance on boosters. Clinical decisions are based on what's approved. So far, immune-compromised people have been approved for boosters but they're

still not the general public. We stand ready to admin them when available. Clinicians continue to watch that.

- Pre-emptive testing before activities have shown to have lags in test results that creates more problems than they solve. Caused more issues than it solved because people became overconfident with a negative test and relaxed protocols. Most schools have done away with this kind of testing, even within the SEC, since it did not really affect spread on campus. Symptomatic people need to isolate and get tested. Quarantine if you are in close contact with someone who's positive and you are not vaccinated. If vaccinated, isolate and get tested.
- Testing is recommended at 3-5 day point after contact, if asymptomatic, which is driving increased demand for testing.
- Rapid testing is inaccurate for negative tests, so you need to get the PCR, which takes 2-4 days but we may be able to accelerate that to within 24 hours.
- Q: Do we have a percent or number of students who are vaccinated?
- Provost Wilkin: No, to collect that it would be voluntary, but we did survey to ask them preemptively about their willingness to be vaccinated and got a low response rate and the info was unactionable but we did learn what caused their hesitancy we could use in our Myth busters page. Without a 100% response rate, we don't have a lot we can act on. We still have to have protocols in place to protect people, so the path forward is the same. So we have not collected self-reported data on vaccination status.
- We don't have a lot of data to act on and we still have to have protocols in place to protect people.
- Q: Also true for faculty and staff?
- Provost Wilkin: We have no information on that. Over 5500 vaccinations have been administered on campus this year alone. There is an uptick of number getting vaccinated.
- Q: What incentives are being offered to students and faculty to get more vaccinated, such a housing vouchers?
- Provost Wilkin: We are working with the vaccine task force to figure out how to reward people to get vaccinated. Testing showed us that getting something for certain was more motivating than lotteries or giveaways. Lotteries for scholarship were the least effective and we had to determine with financial aid if we could even award the scholarships. They are also the most expensive. This held true for testing, and we expect the same results with vaccination.
- Health behavioral change is driven by the desire to keep doing what they want to do, to get something certain, and least effective are lotteries raffles or chance. Freedoms drive health behaviors the most. The Lane Kiffin bobbleheads got the most traction, surprisingly enough, but it was something for certain that motivated people. UM branded products were also popular.
- To quote the American Public Health Association, it takes good old-fashioned public health, person to person.

Q: Do we have any idea of the faculty and staff vaccination rates?

Provost Wilkin: Information gathered from such questions do not help us address the problem.

Durkin: Was glad to see Coach Kiffin setting a good example for what to do if you are infected.

Q: On the teaching and learning side, is there a threshold for changing the mode of teaching if a certain number of students are out sick? My department is reporting up to 40% missing due to isolation or quarantine. Are we better off teaching remotely in those cases?

A: When faculty can't be in class we work to get class covered within classroom, as in other situations. So far that process has been smooth. We don't see those cases being linked together within a given classroom but a number of students are isolating because of contact in other spaces, so we try to keep class moving forward in class. When should we switch because they are not in the classroom to learn because of absences?

We haven't reached that threshold yet but we have 60 % of students in your example still expecting face-to-face instruction. The CDC and others says it's important for face-to-face instruction and we have so far not had the situation where more than half of a class is out.

Q: I had 10 out of 40 students attend my class. They are doing the right thing by quarantining, but my concern is I have to prioritize in-class students over those missing class. We don't want to leave behind a number of students because they cannot attend.

Durkin: Thanked the Provost for his time.

- **Senate Resolution on Covid Policy for Fall 2021**

- MOTION to consider: John Lobur
- SECOND: Alex Watson
- DISCUSSION:

MOTION made by Joel Mobley moved to strike item 2 because it doesn't make sense logically to include numbers that will always be changing, and the rate of increase is negative at the moment.

MOTION made by Carrie Smith moved to edit to indicate that rates are higher than pre-vaccination numbers in order to avoid having misleading or outdated numbers.

Joel Mobley noted it might be easier to eliminate said language rather than change it.

POINT OF ORDER raised by Brian Reithel to second the motion to amend the proposal before moving on and to go into the Committee of the Whole to allow free-form editing for a while and come back to a vote later.

SECOND: Brian Reithel seconded the motion to amend so as to correct the statement regarding numbers of active infection, which we do not know.

Lance Yarbrough suggested we build the resolution backward. We don't know where we are going so we don't know what evidence is needed.

Chair Durkin asked Brian Reithel to explain the process of moving to adjourn to a Committee of the Whole, which allows for more relaxed rules that allow things to move more rapidly rather than having to vote on every single thing. Knowing what we are voting on is key.

MOTION to adjourn to a Committee of the Whole: Brian Reithel

SECOND: Lance Yarbrough

- Jordan Ballou moved to strike language referring to specific department and replace with Faculty Senate and perhaps include ASB and Staff Council.
- Hans Sinha moved to strike item referencing the Supreme Court upholding vaccination mandate, which is inaccurate. Add to paragraph 7 noting we have no Covid vaccination mandate but we have existing mandates for other vaccines. Add four paragraphs to emphasize the unusual nature of the problem that Covid poses: MMR are serious communicable diseases and UM requires all students to be vaccinated. Covid is currently a worldwide pandemic, whereas MMR are not currently worldwide pandemics.
- Joseph Carlisle asked if MMR mandated by the state and IHL policy.
- Brian Reithel answered that Mississippi State urges students to be fully vaccinated before the start of the fall semester. Mississippi law and IHL Board policies require that students obtain certain vaccinations before attending IHL institutions. This does not currently include the COVID-19 vaccine. Unless and until state law and IHL Board policy is amended, the University does not have the legal authority to require any additional vaccinations.
- Yunghee Chang: 4<sup>th</sup> paragraph already addresses this issue of existing vaccine mandates so combine or eliminate.
- Brian Boutwell suggested sharpening the purpose of the resolution and diffusing some rancor around it by making the first whereas something to show this is a resolved issue and just one more instance of the same.
- Durkin noted conditions of employment at medical centers are different so we might not be able to argue this applies to UM generally.
- Boutwell: the numbers around infection, etc. is subject to change and debate, but what is not debatable is that we have standing policies on the same kind of issue, so placing this first makes it less combative.
- Carrie McCormick moved to strike statement about MMR vaccines as redundant because it's commonly known what vaccines are already required in Mississippi, so not necessary to detail it out.
- Sasan Nouranian suggested we include examples of communicable diseases combined into one statement.
- Lobur suggested maybe leaving out the IHL, since they have already made their views known, so mentioning it would weaken the point.
- Charlie Mitchell noted that changing to "whereas students are already required to provide proof of immunity to other vaccines" rather than designating who requires these other immunizations, the university or IHL.

- Sinha noted the important difference between language about requiring vaccination versus requiring documentation about vaccination or immunity.
- Mitchell noted his desire to get around the problem of who requires what vaccines.
- Reithel noted that students are required to present proof of immunity, whether through vaccination or the disease itself.
- Mobley asked if we can include reference to vaccination as one kind of proof of immunity.
- Reithel argued that would be too narrow and thought it unwise to include that specific language. No need for that level of detail.
- McCormick: we need to watch the redundancy and the length of the resolution.
- Durkin: This point is worth making, about the contagiousness of the Delta variant.
- Lobur respectfully disagreed with McCormick, wishing to guard the chain of logic crafted by the law school faculty.
- Reithel: we have to be careful about making medical statements, since, for example, the R0 for Covid is not the same as for measles.
- McCormick agreed and added that we should not be making medical assumptions.
- Angela Green noted that it's not contested that MMR are not currently at pandemic levels, as common sense indicates that none of these diseases is posing the kind of risk Covid is.
- Carrie Smith suggested adding "To prevent outbreaks of contagious diseases" as the purpose of the vaccine requirement.
- Sinha: the language of vaccination is necessary because that's the whole point of the resolution, but keep it as a separate paragraph. We are currently in the middle of an outbreak.
- Brad Jones: Emphasize vaccines in previous statement. "Vaccinated and/or proof of immunity" needs to be included.
- Mobley: definitely include language of vaccination.
- Boutwell: Vaccinations are the most common way to prove immunity.
- Reithel: Language should specify vaccination OR proof of immunity but not both.
- Reithel: Communicable diseases items could be combined, but it's medically inaccurate to compare Covid to other diseases
- McCormick: agreed to delete language that's not medically accurate.
- Sinha: this was drafted by a non-medical person, so if it's not correct, it should be deleted.
- Nouranian: Objected to the use of "pandemic" or any language limiting us to the state of things right now as the situation is fluid, so there is no point in having the statement about the lethality of Covid.
- Scott MacKenzie disagreed, as Covid's lethality is the reason for that urgency.
- Sinha: It's very important to include this statement because it's both accurate and conveys the urgency.
- Nouranian: Add "emergency."
- Sinha: What's the problem using the word "pandemic"?
- McCormick: Measles, mumps, and rubella were once pandemics too, so aren't we contradicting ourselves by saying "unlike MMR, Covid is a worldwide pandemic."
- Durkin: The key word is "currently."



- Lobur: Should we include language about variants and how vaccines slow the creation of new variants that lead to more outbreaks?
- Boutwell: The variant point is a good one but want to reiterate that the first item should be about the university's standing policy on vaccines.
- Dowling: Either the urgency should be stated first or the policy but either way we should be more succinct.
- McCormick: Should hyperlinks be included in the resolution?
- Durkin: We can exclude them in the final document, though they were necessary earlier in the process, as people could easily access information through the links.
- Carlisle: Is the last "whereas" redundant with the one with numbers?
- Reithel: The one with numbers weakens this in the eyes of people who have actually study the statistics. Research shows that numbers tend not to persuade, so we can eliminate the first "whereas" and refer to this being a pandemic without getting bogged down in the numbers we can attribute directly to Covid. It's comorbidities combined with Covid, as fewer than 5% of people are dying just because of Covid alone; the rest have an average of 3-4 co-morbidities that coincide with the same diseases Mississippians die from every year. If we want to assert that it's a worldwide pandemic, let's just assert that without the numbers.
- Boutwell: Agreed. Starting with epidemiological assumptions is problematic. But the immunity policy is still the firmest point of agreement that diffuses a lot of rancor that can follow from some of these other statements.
- Reithel: Make the fourth "whereas" the first one, with numbers in it.
- Mobley: Starting with MMR weakens it as no one thinks of those diseases in any way like they do Covid.
- Boutwell: We have a standing policy. That's where we start and we add another communicable disease to the list.
- Are we requiring it of all faculty, staff, and students?
- Durkin: Regarding MMR, there is a requirement for students to provide proof of immunity, but it's not required for employment except at medical centers.
- Mobley: Quoting a current statistic you risk it being out of date, as the numbers will always be changing. Either state the point more clearly or get rid of it.
- Durkin: in my department we considered the community responsibility when our hospitals are about to break, that we need to add protection to the system. Does that belong in this document?
- Q: To return to a point made earlier by Carrie Smith, do the numbers refer to pre-vaccine levels?
- Carrie Smith: No, but just to keep the focus on Mississippi. The numbers of infected are high, and yes, that's a shifting point, but they are at unsustainable levels. The hospitals can't handle it.
- Sinha: remove reference to the number of hospital beds.
- McCormick: should we focus on just Mississippi students or those in Oxford?
- Smith: We should take account of all our campuses.
- Green: We could note that hospitals across the state and region are at capacity.
- Mitchell: We should note that a death creates an open hospital bed, so we should amend that language.
- Matteo D'Allesio: should we refer to the fact that at least one vaccine has been FDA approved?

- Green: We want to avoid specifying which since not all the vaccines have received that approval.
- Durkin: Several of my friends had cited the lack of FDA approval as a reason not to get the vaccine.
- Boutwell: Different state laws prevail. For example, Louisiana's laws are much looser than Mississippi's.
- Q: Didn't UMMC require a vaccine?
- Durkin: Yes, but we can't make apples-to-apples comparisons to medical schools.
- Reithel: State law allows hospitals to make different policies. I normally do like to cite MSU, but their FAQ statement notes that unless and until the state and IHL require mandates they do not have the legal authority to require them. State laws governing hospital safety allowed for that action.
- Dowling: The specificity of the number of students vaccinated should be eliminated.
- Barnard: We need to specify these are Covid vaccine rates because we have very high rates for MMR for the kids.
- Nouranian: As to Part B, about exemptions by law, we just stated there is no state law for any vaccination mandate, so that should be eliminated.
- Durkin removed reference to Vanderbilt because they are a medical school. Should we leave reference to one SEC school, LSU?
- McCormick: It weakens it to rely on just one school for comparison.
- Smith: There are hundreds of other schools that have required vaccines.
- McCormick: We have to be careful about numbers that date this.
- Barnard: Indexing it to a date seems better: As of September 1, for example.
- Sinha: The date the resolution passes is the date we should use.
- Durkin: Specific number or refer to "more than a thousand" other schools have opted for a vaccine mandate?
- Green: someone posted a link to an article with all the schools that have acted so far.
- D'Allesio: I did but was not able to locate a total number.
- Brian Jones: Today's *Chronicle of Higher Education* says there have been 1,016 colleges and universities so far to require vaccination for Covid.
- Lobur called to remove C because the university already has a robust program to incentivize vaccines.
- McCormick: as for D, you can practice resilient teaching any time and not just during Covid.
- Various senators suggested removing D and E, as they weaken the overall effect of the resolution to focus on vaccinations and not teaching modalities.
- Melissa Bass: If the mandate were to take effect, we would still have the issues related to changes in class modalities, so without undermining the main effort, we should either retain something to that effect or issue a new resolution to deal with that issue.
- Durkin: Are you okay with a separate resolution on that matter?
- Reithel: we do need some fact checking on that. I do have a colleague who's immune compromised and is teaching entirely from home.
- Sudith Ramachandran: Add something about HVAC to help with the virus spread?
- Reithel: I intend to vote against this resolution but that would dilute the focus.

- Yarbrough: Faculty and staff would now be required to have vaccines?
- Reithel: A long time ago we had to get MMR boosters because of an outbreak of measles, back in the '90s.
- Nouranian: Item B, we are saying either get vaccinated or get an exemption but there is no state law to get an exemption from, so that statement is not correct.
- Reithel: University policies on vaccinations include medical exemptions. Are we going to require mandatory testing?
- Yarbrough: State laws for exemptions vary a lot and Mississippi has fewer options than most states do for not getting vaccinated. About 39% of the state and 46% of Lafayette County are unvaccinated, so almost half our staff would face possible termination.
- Reithel: We also need to be careful about being proscriptive here, for example, when it comes to requiring pregnant women or nursing mothers to get the vaccine.
- Brian Jones: We should make the Covid vaccine requirements similar to what we require for other vaccines.
- Sinha: With exemptions allowed by law or policy. I'm in favor of weekly testing, which other universities have, as well as allowing for exemptions.
- Barnard: Mandate should mirror other vaccine requirements?
- McCormick: But then faculty and staff would have to be vaccinated.

- POINT OF ORDER made by John Lobur: we cannot go past 9:00 PM without a vote to extend it, so we must either move along or prepare ourselves to vote to stay longer.

Chair Durkin noted he was indeed watching the time and then read the entire document with all current changes.

Discussion as to whether to include points D and E or whether to author a new resolution so as not to dilute the matter.

- MOTION to return to regular order to vote on the resolution
  - SECOND
    - DISCUSSION:

- Dowling: Should the title refer to fall 2021 to convey urgency? My department was in favor of this resolution.
- Brian Reithel noted that his department was nearly unanimously against this resolution because 1) the IHL has already ruled on the issue, 2) personal choice (my body, my choice), 3) reasons having to do with beliefs about one's one bodily immunity granting better protection against the virus than vaccines do, 4) concerns about changing the terms for already enrolled students being kicked out after spending money on books, housing, etc. 4) a large percent of population is already protected by having gotten the disease; college students are less likely to get seriously ill. Personally, the resolution is well crafted but members of my department have asked me to vote no.

- Jordan Ballou said members of Pharmacy Practice, the vaccinators on campus, were strongly in favor of previous versions of this and we have put in place a vaccine mandate for our students, approved by UM legal, noting that without the vaccine they may not graduate on time because of vaccine requirements at six of our major medical partners. Speaking only for Pharmacy Practice and not the entire School of Pharmacy.
- Carrie McCormick noted that while a majority in Writing and Rhetoric are in support, some expressed concern about the cost of vaccine, others about the lack of a binding precedent, and concerns about the relationship between faculty senate and the IHL, while others expressed the view that our bodies provide better immunity against Covid than the vaccine does.
  - Brian Jones noted the vaccine is free and hospitalization is not.
- Biology was strongly in favor, with 47 faculty strongly in favor and 5 not responding.
- Christie Nielson noted being personally in favor but the need to vote no on behalf of her department.
  - MOTION to call a poll vote: Jordan Ballou
    - SECOND
      - Zoom poll vote:
      - Results 89% voted in favor, with 11% against and no abstentions.  
Resolution passes.
- Committee Updates: Some chairs are still pending so Chair Durkin will update for next meeting
  - Academic Instructional Affairs (chair: Corina Petrescu)- nothing to report
  - Academic Conduct (chair: Kenya Wolff) – nothing to report
  - Finance & Benefits (chair: Joseph Carlisle) – nothing to report
  - Development & Planning (chair: Jon-Michael Wimberly) – nothing to report
  - Governance (chair:) arrange a meeting with EORC, Provost Office, Legal, and HR to discuss policies that still need addressing, new personnel needed time to get in office
  - Research & Creative Achievement (chair: Donna Buckley) – nothing to report
  - University Services (chair: vacant) – nothing to report
  - Executive (chair: Daniel Durkin) – nothing to report
- Old Business: will send out a new resolution capturing the parts about teaching modalities.
- New Business
- Adjournment
  - Motion
    - Second
      - Vote – Meeting adjourned at 8:48 PM.

NEXT MEETING: OCTOBER 12, 2021 @ 6:00 via ZOOM

Zoom details:

Daniel Durkin is inviting you to a scheduled Zoom meeting.

Topic: Faculty Senate Meeting – October 12, 2021

Time: October 12, 2020 06:00 PM Central Time (US and Canada)

Join Zoom Meeting

<https://zoom.us/j/99793206156?pwd=MVhCOUdrVkFzMytxRTd3WUVGMVAzQT09>

Meeting ID: 967 0000 1406

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