

Memorandum

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TO: Board of Governors

FROM: Professor Suzanne Fortier, Principal and Vice-Chancellor

SUBJECT: Presentations related to the Resumption of University Activities in Light of COVID-19

DATE: October 7, 2021

DOCUMENT #: GD21-16

ACTION REQUIRED: INFORMATION APPROVAL/DECISION

ISSUE & EXPECTED OUTCOME Two presentations are submitted to the Board to support its discussion on the University's resumption of activities in light of COVID-19.

BACKGROUND & RATIONALE The presentations are submitted to the Board further to its discussions at the special meeting held on September 8, 2021.

The presentations provide an overview of the University's activities in the context of the Fall 2021 return to campus and a status report from a medical expert on the COVID-19 situation in Quebec.

ALIGNMENT WITH MISSION AND STRATEGIC PRIORITIES The presentations speak to the context of the pandemic in Quebec and provide an overview of measures the University has put in place to protect the health and safety of the University community, which remains a priority.

COMPLIANCE WITH UNIVERSITY POLICY In line with their mandates, the Board and a number of its standing committees have been overseeing the University's COVID-19 related activities and efforts since the start of the pandemic and, most recently, in the course of the University's resumption of in-person activities on campus.

COMPLIANCE WITH LEGISLATION/EXTERNAL REGULATIONS The University's resumption plans and activities align with public health directives and applicable legislation.

RISK FACTORS Given the decision to prioritize in-person teaching, the University has put in place and continues to develop measures needed to mitigate the risk of contamination on campus.

SUSTAINABILITY CONSIDERATIONS The University prioritizes the development of a sustainable health and safety framework that will inform its COVID-19 related activities.

IMPACT OF DECISION AND NEXT STEPS	The Board's Executive Committee will meet in between regular meetings of Board to monitor the University's activities in relation to the pandemic.
MOTION OR RESOLUTION FOR APPROVAL	N/A
APPENDICES	Appendix A: COVID-19: Quebec Status Report Appendix B: Fall 2021 Return to Campus Overview

Fall 2021 Return to Campus overview

Fall 2021 - Return to Campus description

- 85% of class activities in person
- 30% presence of our admin and support staff on campus
- Research labs at 2/3 capacity

Fall 2021 Return to Campus – measures in place

- Vaccine passport in place since September 1 for
 - All extracurricular activities
 - Seating areas in food locations (i.e. not for takeout)
- Vaccine passport required to access libraries, enforced at door by mid October
- Mask wearing in all indoor locations
- Distancing: no distancing in classrooms when seated; 1-m distancing default everywhere else (2-m distancing when eating)
- Exclusion of symptomatic individuals
- Contact tracing for positive cases
- Additional cleaning
- Ventilation updates
- Vaccination incentives (on-site clinic, on-site registration clinic, vaccination campaign, etc)

Contact tracing and case management

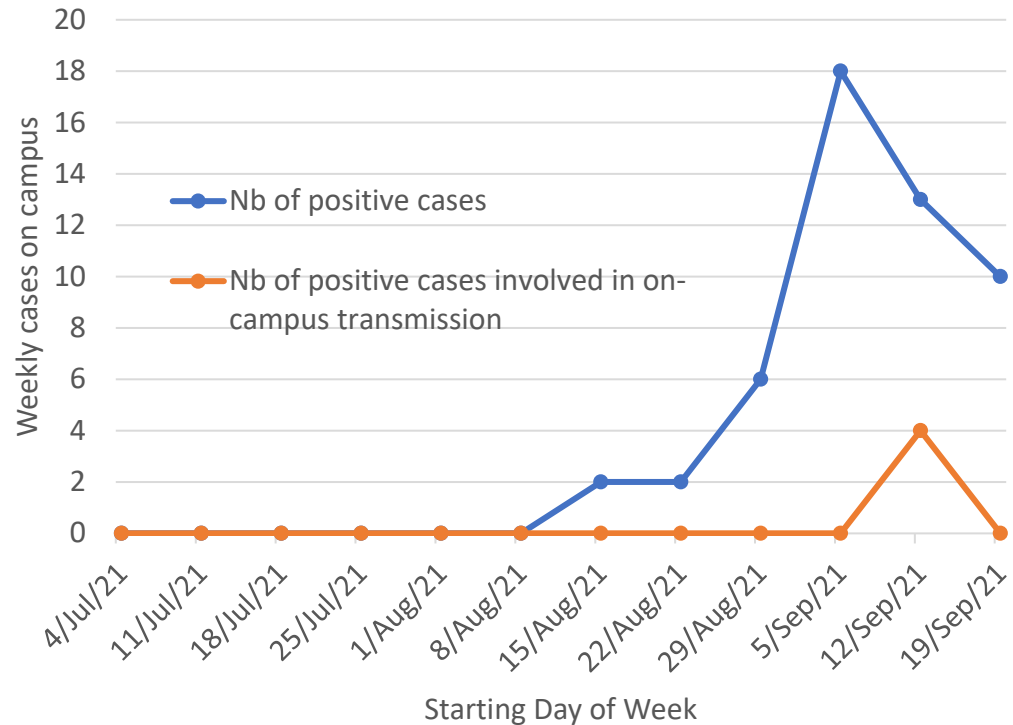
- Since September 2020, Universities have had the task of contact tracing in direct collaboration with DRSP (Direction Régionale de la Santé Publique) and following their protocol
- Since 2020, we have had a Case Management Group (CMG) in place
- When someone tests positive:
 - McGill requires that they call x3000 so CMG opens a dossier;
 - DRSP is made aware by testing site; they also notify CMG of any new case

Contact tracing: process

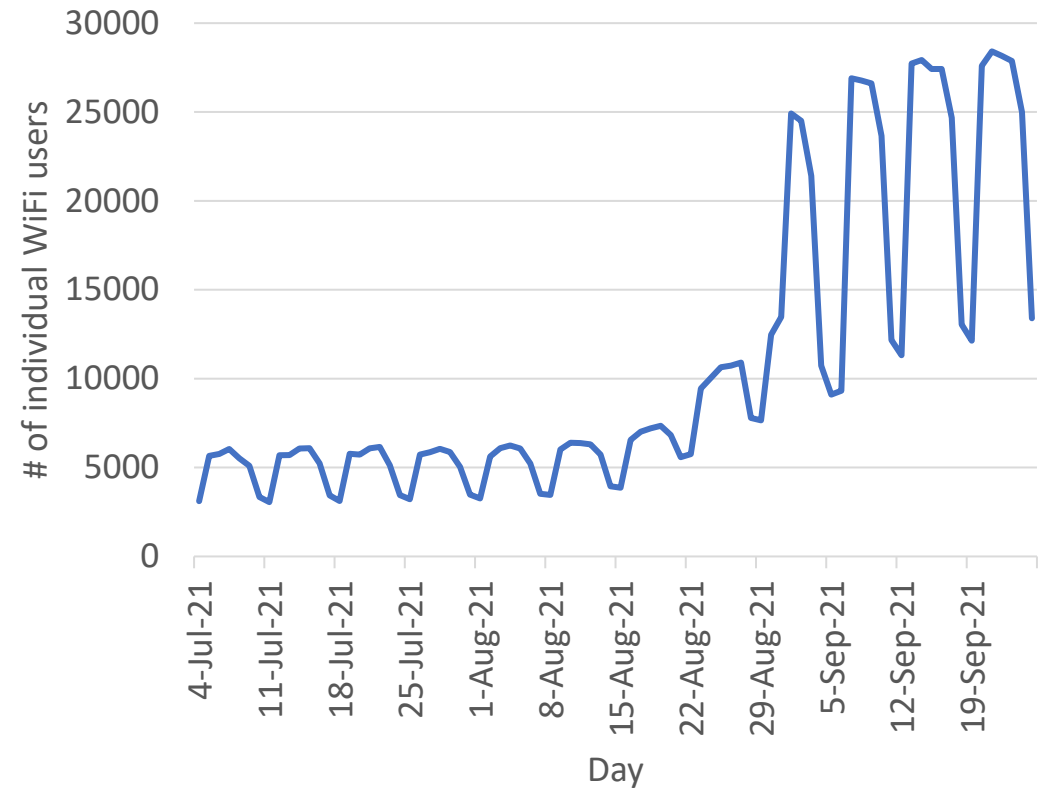
- For each positive case, McGill is in charge of tracing of contact on campus
 - Call to positive individual and interview with standard questionnaire to elicit contacts on campus during contagion period (48 hours before symptoms or positive test if asymptomatic)
 - CMG evaluates contact risk of each contact according to DRSP protocol (high/moderate/low risk) and determines whether additional site disinfection is needed
 - Contacts are given instructions on next steps according to their risk level
 - E.g. all students in the same class as a positive case will usually be notified that they are a low-risk contact because of the masking policy in place
 - In order to be considered a moderate or high risk level, contact with the positive case must have been for more than 15 min, at less than 2 m without a mask.
- For individuals who develop symptoms while on campus: in the same way, CMG evaluates whether additional disinfection necessary. As per DRSP protocols, no contact tracing is done for symptomatic individuals who have not tested positive.

Current situation on campus

Number of cases reported [McGill reports positive cases who were present on campus during their contagion period]



Number of people on Campus [# of users connected to WiFi]



Current situation on campus

91%

staff
adequately
vaccinated*

>90%

students
adequately
vaccinated[⊙]

230

security
interactions related
to safety per week[★]

27,403

Individuals on
campus on average
during weekdays[★]

0

Transmissions
in classrooms
since March
2020[§]

1

On-campus
outbreak this Fall (4
people, research
lab)[§]

95

Calls
to/from
CMG last
week[§]

518

Low-risk
contacts
traced last
week[§]

83

Medium- or
high-risk
contacts traced
last week[§]

10

Positive cases
on campus
last week[§]

* Source: MES estimate, 24 sept 2021

⊙ Sources: MES estimates, DRSP estimates of vaccination upon landing at Trudeau airport, as of 19 sept 2021

★ Source: Campus Public Safety; includes incorrect or lack of wearing of face masks, non sanitization of hands, non respect of distancing

§ Source: Case Management Group report

★ Source: # individuals connecting to campus WiFi, week of 19-25 sept

Additional initiatives - ongoing and future

- Wastewater analysis in Residences
- CO2 testing in additional classrooms
- Availability of thermometers in residences for self-check
- “Why I got vaxxed” campaign
- Incentives for use of mass vaccination centers
- Additional data visibility (public 'dashboard')
- Use of rapid tests
- Pilot study on potential usage of vaccine passport in curricular activities, if the situation requires it

Academic Planning

- Deans and Associate Deans have been fully engaged with academic planning since March 2020
- Regular meetings with faculty and staff associations and student associations
- Senate Ad-hoc advisory committee to begin meeting this week, with regular reports to Senate throughout the 2021-2022 academic year
 - To provide input on the ongoing impact of the pandemic on academic activities and policies

Academic Planning: Priority areas

- Continual monitoring (and possible adjustments) to accommodation processes for teaching staff and students
- Final examination scheduling
- Class scheduling process for Winter 2022
- Supporting blended and online learning for some courses



McGill

M[i]⁴

Interdisciplinary Initiative in
Infection and Immunity

COVID-19: Quebec Status Report

Don Sheppard MD

Chair, Department of Microbiology and Immunology

Director, McGill Interdisciplinary Initiative in Infection and Immunity



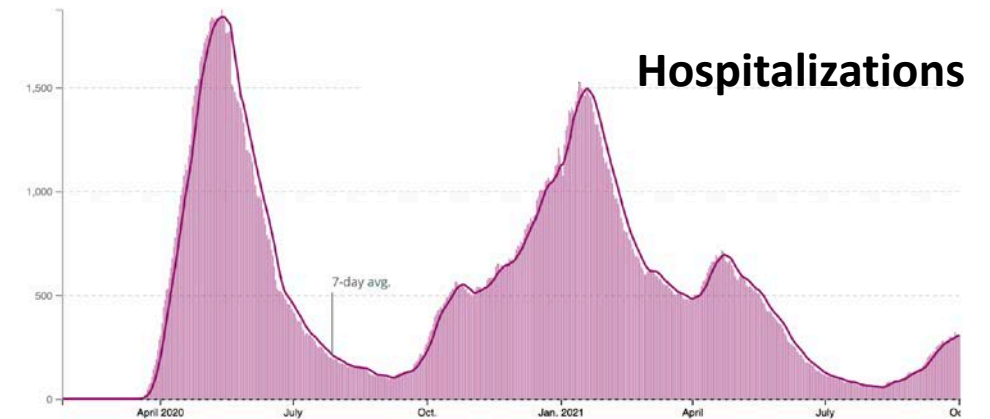
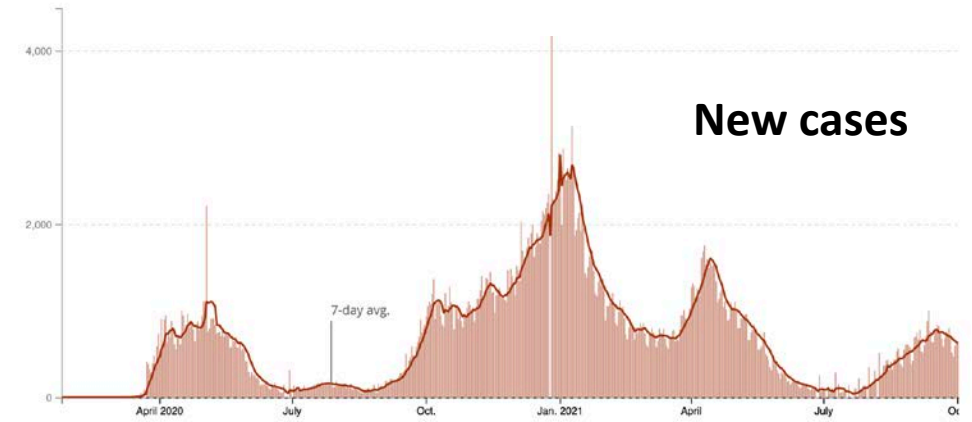
The Fourth Wave....

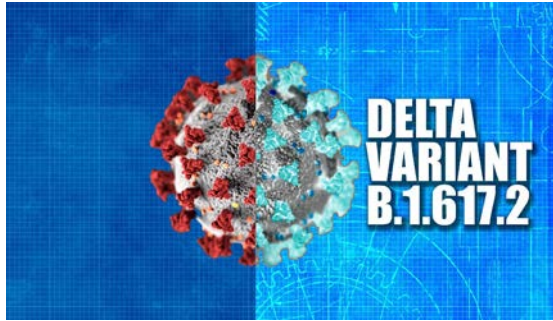


Where are we today?

Key facts (Oct 4):

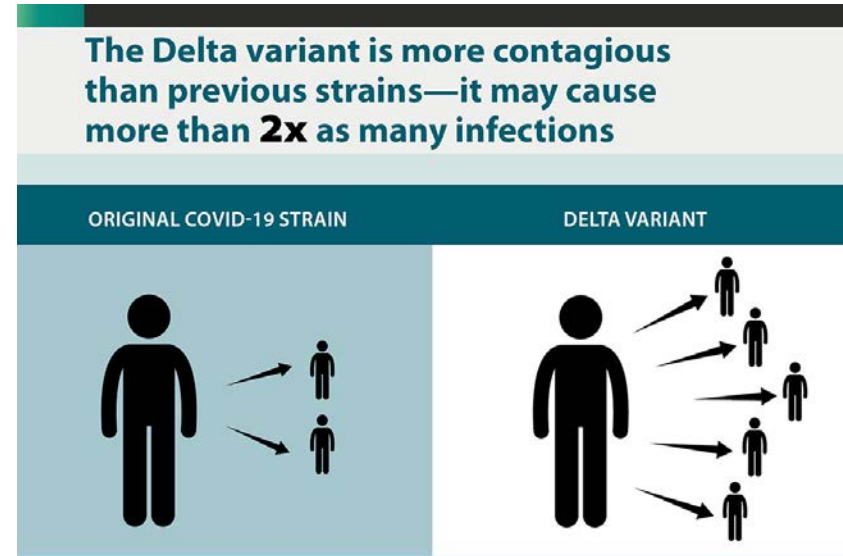
- Current 7 day case average: 557
- Current hospitalizations: 290
- Current ICU admissions: 88
- Double vaccination rates:
 - 84% of eligible pop
 - 74% of total population
 - 72% of total pop >7 days from 2nd dose





Delta is more transmissible

- UK variant was 2x as contagious as original strain
- Delta is 2x as contagious as the UK variant
- Viral loads are up to 1000-fold higher
- Incubation period is shorter
- Shedding may be longer



Incubation period
Delta: 3-4 d
Original strain: 5-6 d

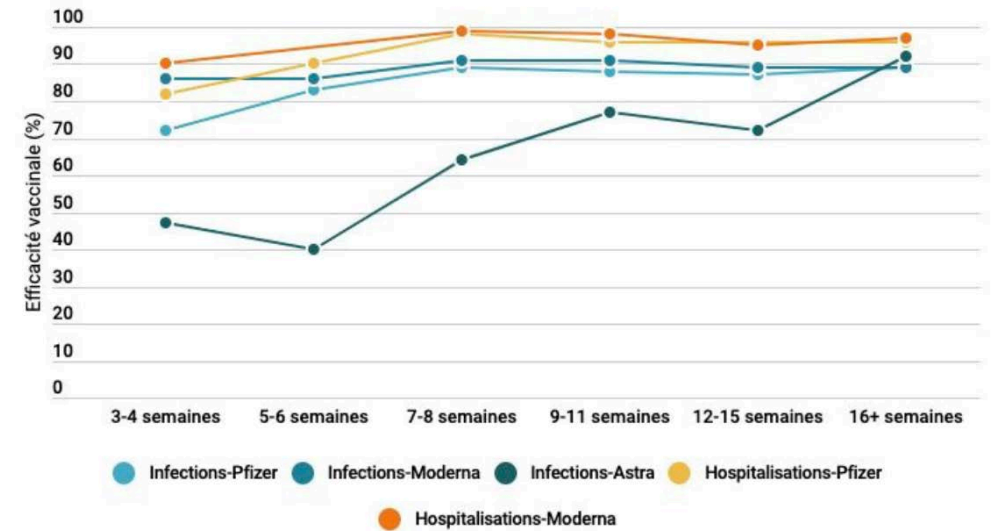
Delta is more virulent

- Scottish study: risk of hospitalization 2x vs Alpha
- Ontario data: 120% increase in hospitalizations vs original strain
- In Qc: although hospitalization rate is lower than 2nd wave, the fraction in ICU is higher
- CDC studies in children found no increase in rates of hospitalization or ICU

Does vaccination protect against Delta?

Severe illness and hospitalization

- **Pfizer**
 - UK: 96% effective
 - Israel: 93% effective
- **Moderna**
 - Canada: 96% effective
- **AstraZeneca**
 - UK: 92% effective
 - Canada: 88% effective



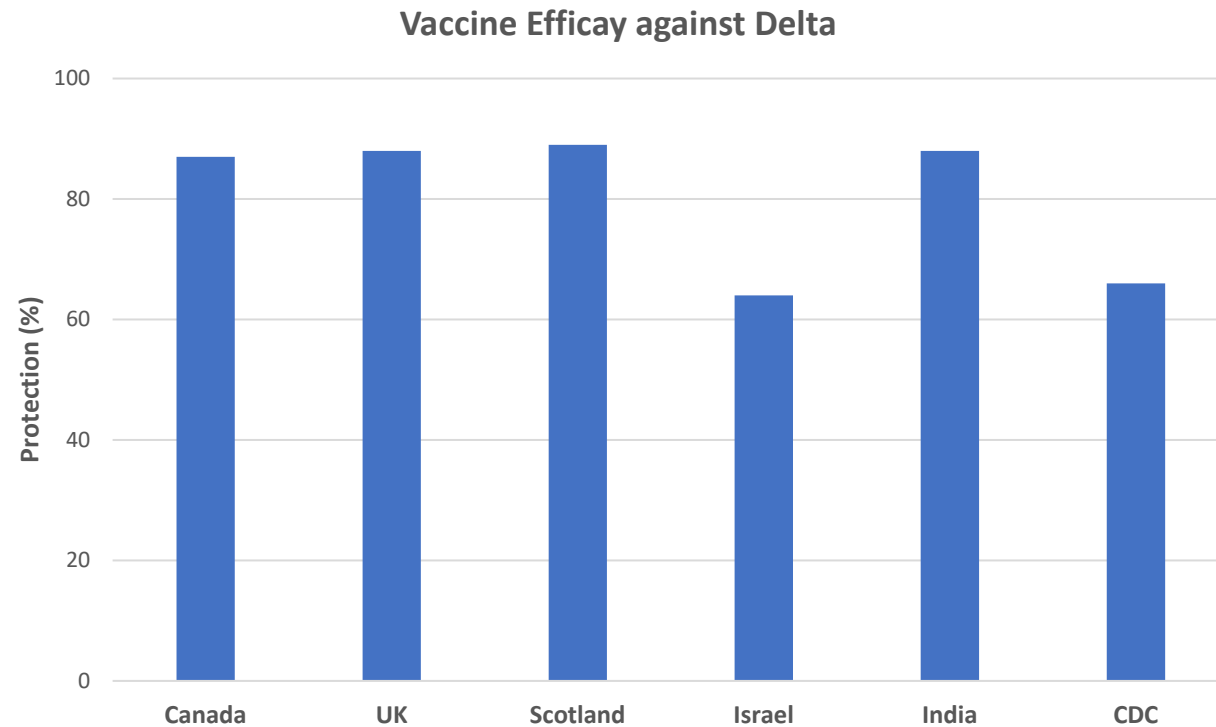
Vaccinated individuals in Qc have a 32-fold lower rate of hospitalization!

Does vaccination protect against Delta?

Symptomatic disease

- Studies from around the world show efficacy ~65-85%
- Multiple studies demonstrate
 - Vaccine breakthrough can transmit
 - Viral load in unvaccinated and vaccine breakthrough infections are the same
 - Likely shorter illness if vaccinated

Take home message: breakthrough infections in double vaccinated individuals can transmit!



Does vaccination protect against Delta?

Symptomatic disease

- Studies from around the world show that vaccination against Delta has an efficacy of ~65-85%
- Multiple studies demonstrate that in double vaccinated individuals:
 - Vaccine breakthrough is less likely
 - Viral load in unvaccinated breakthrough is lower
 - Likely shorter infectious period



Study against Delta

Canada UK Scotland Israel India CDC

Take home message: In double vaccinated individuals can transmit!

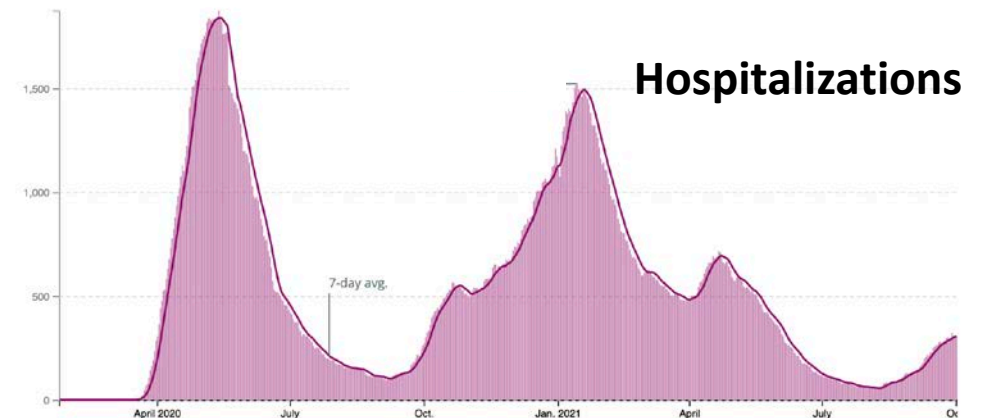
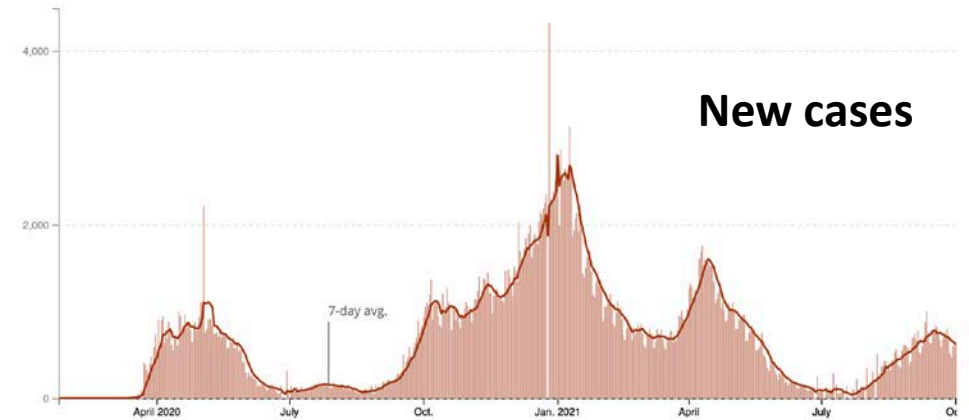
Vaccine rollout: How successful is it?

Two doses given to:

- 84% eligible population
- 74% total population
- **~56% population immune**
(assuming 75% protection)

Predicted hospitalizations

- Compared with 2nd wave
- 16% (300) if vaccines are 90% effective
- 20% (360) if vaccines are 85% effective



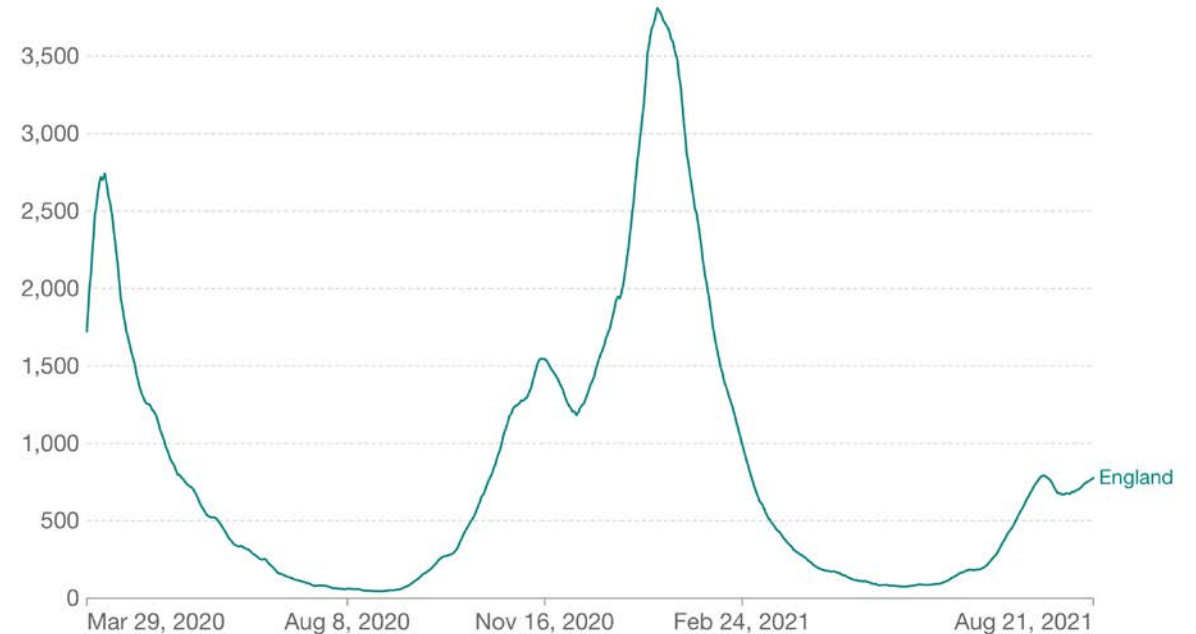
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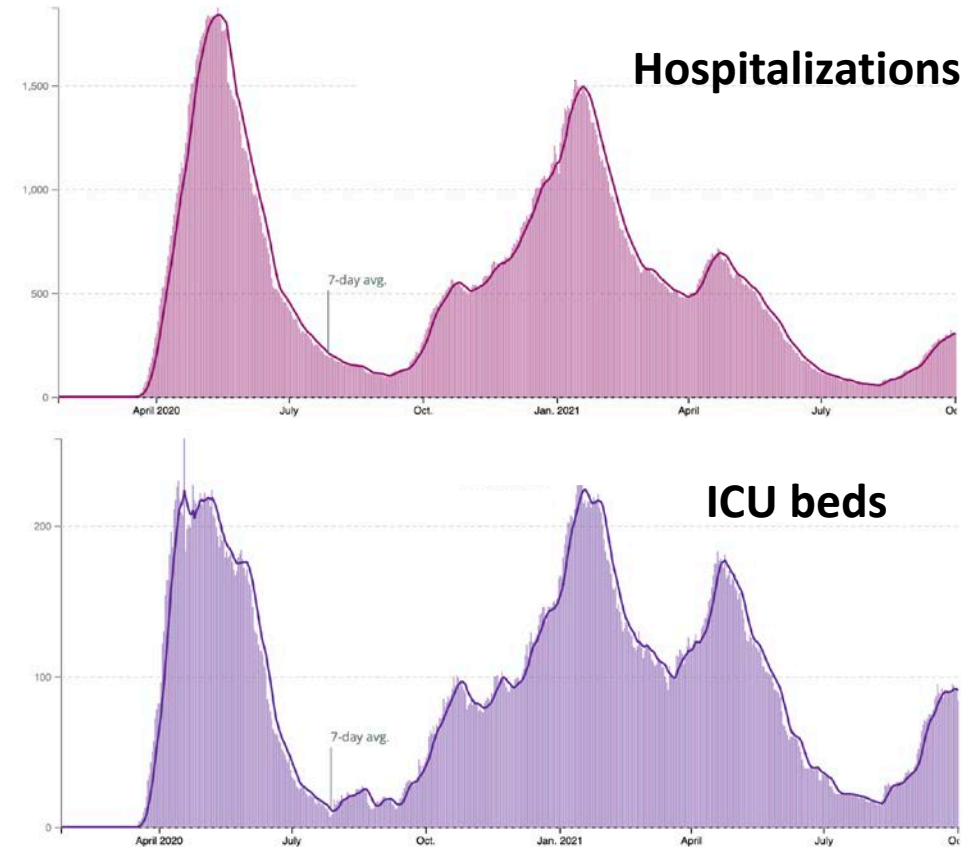


UK Hospital Admissions

A note of caution: ICU beds

Compared with 2nd wave

- Daily cases are 1/3 of 2nd wave peak
- In infected individuals:
 - Hospitalization rates in infected individuals are 25% lower
 - **ICU admission rates in infected individuals are higher**
 - Strong signal that delta is more virulent than alpha



What comes next....

- Boosters
 - Immunocompromised and CHSLD/RPA ongoing
 - No evidence yet of declining immunity in Qc community-dwelling adults
- Vaccines in pediatric population
 - Pfizer vaccine safe and immunogenic in >5 yr, no cases of myocarditis
 - Under Health Canada review
- New antivirals
 - Merck/Ridgeback oral agent – 50% reduction in hospitalization
 - Pfizer agent in Phase II trials
- Re-learning to balance risk
 - What is tolerable at a personal and health system level?



**Questions and
suggestions are
welcome!**

