

## Planning for AY 2021

#### Thank You to Many People

#### Planning committees

- Research Re-activation
   Underway: controlled workforce reentry
- Teaching Reactivation Options
- Preparation for Online Teaching

#### Public health analyses

- Epidemiological modeling
- Engagement with Cayuga Medical Center and Tompkins County Health Department

#### **Government Engagement**

- New York Forward Committee
- NYF Committee CICU Subcommittee
- Southern Tier Regional Control Board

#### **Financial Modeling**

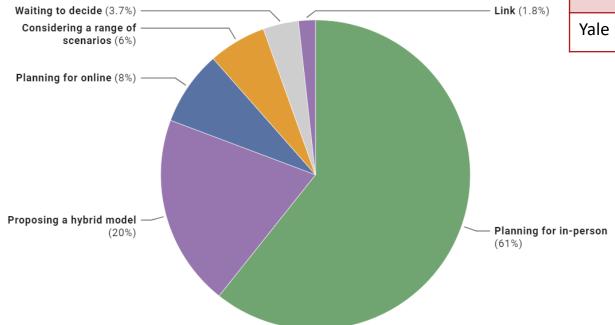
 Central budgeting with input from Administrative and Cost Control Committee

#### **Community Outreach**

- Faculty, student, and staff surveys
- Town halls
- Employee assembly and faculty senate meetings

# **Reopening Plans**

CHE 1060 colleges/universities As of 6/30



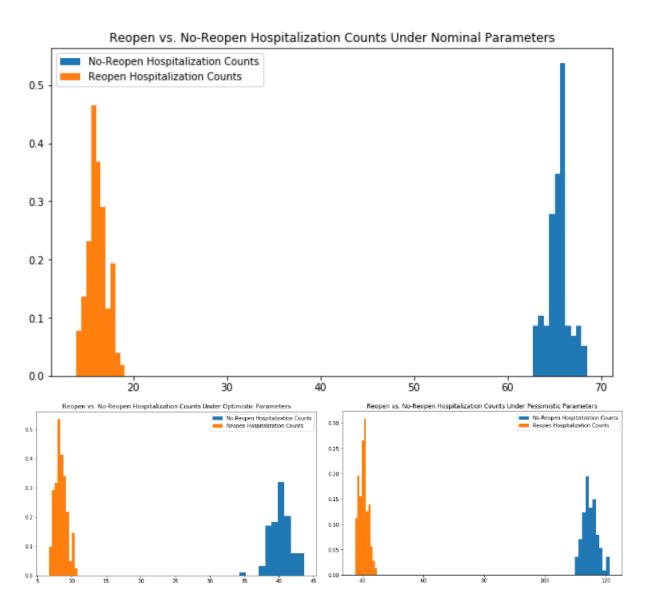
Brown	75%	Hybrid
Columbia	60%	Hybrid
Dartmouth	>50%	Hybrid/online
Harvard	40%	Online
Penn	100%	Hybrid
Princeton	50%	Hybrid/online
Yale	60%	Hybrid/online

## **Guiding Principles**

- Public health and safety!
  - Reliance on science and data

- Caring for our students
- Safeguarding our future as a world-class academic institution
- Maintaining our staffing
- Seeking new knowledge

## Cornell: Data-Driven Decision



## Aggressive Virus Testing Program

- Robust and expansive viral testing program, to include
  - Gateway testing prior to students' return (where possible) as well as on return, with initial quarantine in local hotels
  - Mandatory student testing every 5-7 days
  - Frequent faculty and staff testing (period TBD) encouraged and potentially required, depending on conditions
  - Contact tracing through Tompkins County Health Department
  - Supportive quarantine and isolation
- Being developed in cooperation with Cayuga Medical Center; also uses College of Veterinary Medicine laboratory facilities
- Anticipate buccal, sublingual, or anterior nares tests
- Pooled testing drives down costs substantially
- The key difference between not reopening and reopening is our ability to do extensive surveillance testing of, and take associated health compliance measures for, the student population living in Ithaca
- Test, trace, quarantine!!

# Key Decision: Re-open for instruction

- Significantly influenced by regional public health considerations
- Key secondary decisions:
  - Invite back all students, with options for those who cannot return
  - Modified calendar
    - Start fall one week later to provide preparation time and longer move-in period
    - Students go home at Thanksgiving and complete semester online
    - Start spring one week later to reduce time in residence during flu season
  - Hybrid teaching
  - In-person courses will have remote access, e.g., for students in quarantine or isolation

## Many Additional Recommendations

#### **Categories**

- Individual Health Monitoring (Including Daily Check)
- Viral Testing Program
- Coordinated Approach to Isolation, Quarantine, and Contact Tracing
- Addressing the Needs of those with Medical Conditions
- Modifications to Academic Activities
- Modifications to Student Life
- Modifications to Residential Life
- Mental Health Considerations
- De-densification of Campus (including policies around visitors and travel)
- Campaign for Public Health and Behavioral Influence Strategies
- Comprehensive Monitoring Strategy

(including facilities modifications)

# Recommendations for Best Practices in Online Teaching

#### **Categories**

- Curriculum and modes of delivery
  - Eg: grading policies; academic integrity in the online environment
- Effective online delivery
  - Eg: training and resource needs for faculty; accessibility for students with vision and hearing disabilities
- Student experience
  - Eg: creation of online experiential components
- International students and instruction

## Key Risks

- Implementation logistics
  - Will especially need to focus on ensuring we have mechanisms for virus testing including sampling infrastructure, as well as contact tracing (done in collaboration with Tompkins County)
- Unreasonable expectations about the extent to which we can modify student behavior, particularly in students off-campus

- The emergence of a more serious outbreak than we anticipate, stressing the local health care system.
  - Will do careful monitoring of health conditions, and react and readjust quickly if needed
- Cannot have zero risk: will likely be some serious illness, including hospitalization.
   But even more likely without reopening.

## **Budgetary Implications**

#### Ithaca and Cornell Tech

FY20: \$ 45M FY21: \$ 210M

#### Main Causes:

- Extra financial aid need
- Extra operating costs associated with Covid19
- Housing and dining (rebates in FY20; shorter semesters in FY21)
- Reduced enrollment, especially of int'l. masters students

FY20 budget balanced through initial steps taken (eg hiring pause, restrictions on travel and discretionary spending, suspension of capital projects)

#### Weill Cornell Medicine

FY20 and FY21: > \$200M

#### Main Cause:

Temporary cessation of non-Covid19 related clinical services

## **FY21 Cost Reductions**

Action	\$ Value (millions)
Hiring Pause	\$20
Travel Pause / Discretionary Spending Restrictions	\$20
Capital Spending Reductions	\$35
Voluntary Salary Reductions: Leadership, Faculty, Staff	\$1
Other Reductions / Use of Reserves	\$10
No Salary Increase	\$25
Reductions in Common Support Functions	\$25
Increase Endowment Payout Ithaca (out of total of \$15M)	<mark>\$12</mark>
Shift Philanthropy to Current Use	<mark>\$15</mark>
Reduce Retirement Contributions (Endowed) / Phased Salary Reductions (Contract)	\$42
Total	\$205

## FY21 Budget

- Other actions include
  - Voluntary reduction in appointments/hours
  - Voluntary retirement incentive program
- Budget posted online: <a href="https://covid.cornell.edu/">https://covid.cornell.edu/</a> assets/files/financial-announcement.pdf
- Will track budget performance, and report to the EA and the Faculty Senate in 6 months
  - If possible, will restore as much of the retirement contributions and salary reductions as possible

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