September 1, 2009

Faculty Senate

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I. **Call to order by Chair John Pommier at 2:00pm.** (Booth Library Conference Room)  
Guests: S. Baker (Health Service), C. Bruner (DEN), L. Drake (Health Service) B. Lord (VPAA), J. Lynch (Dean of CAH)

II. **Approval of the Minutes of 25 August 2009.**  
Approval of the minutes of 25 August (Van Gunten/Brownson)—Yes: Brownson, Coit, Fero, Methven, Mulvaney, Murray, Padmaraju, Pommier, Russell, Van Gunten, Viertel, White, Worthington.

III. **Announcements:** none

IV. **Communications**  
A. Email from CAA Chair Darren Hendrickson re: CAA representative at Senate meetings.
B. Email from John Martone re: scheduling of Faculty Appreciation Day during Rosh Hashanah.

V. **Old Business**  
A. **Committee Reports**  
1. Executive Committee: no report  
2. Nominations Committee: no report  
3. Elections Committee: Chair Pommier reported regarding the provision in the Faculty Senate Constitution requiring distribution of Constitutional amendments via campus mail. Senator Murray (Fero) moved to amend the Article XI, Section 1. a. from “A copy of the proposed amendment shall be distributed through the campus mail to each faculty member at least two weeks before a vote is taken” by inserting, “via electronic mail or”; the new section would read: “A copy of the proposed amendment shall be distributed via electronic mail or through the campus mail to each faculty member at least two weeks before a vote is taken.” Motion passed unanimously.
4. Faculty—Student Relations Committee: no report  
5. Faculty—Staff Relations Committee: no report  
6. Faculty Forum Committee: no report  
7. Other Reports  
   a. Provost’s Report: Lord noted a Board of Trustees meeting was scheduled for Friday, 9/4, and the same day ribbon cutting and open house was scheduled for the new Student Success Center. The Publishing Scholars reception is October 7 in the University Ballroom.  
   Re: H1N1 virus and sick leave policies: Lord was asked if the University should amend its sick policies given the CDC recommendations for those afflicted to stay at home for, typically, seven days. Lord stated that current policies were sufficiently flexible to handle everything short of a quarantine.
   b. Budget Transparency Committee: no report  
   c. Bylaws Committee: no report  
   d. Awards Committee: Senator Russell reported that the call for nominations for the Luis Clay Mendez Distinguished Service Award was ready to go out. The deadline for nominations is October 16, 2009, and the committee will report their recommendation at the October 27 Senate meeting.

VI. **New Business**
A. Dean of CAH Lynch informed the Senate regarding the EIU Classical Music Artist Series endowed by a former EIU professor. Lynch asked the Senate to elect three members to the committee that will select artists for the series. Nominations should go to Nomination Committee Chair Marjorie Worthington, mgworthington@eiu.edu.

B. H1N1 virus. Guests Sheila Baker (Health Services Medical Director) and Lynette Drake (Health Services Director). Baker stated that concern about the H1N1 virus began in March 2009, and the virus persisted throughout the summer, an unusual characteristic for flu viruses. This makes the virus apparently similar to the virus which caused the 1919 flu pandemic, although it is too early to say the H1N1 virus will cause a pandemic.

A important difference between H1N1 and the typical seasonal flu is the age of its victims; half the cases of the seasonal flu occur in people age 65 and older, while half the cases of H1N1 occur in people age 49 and younger.

There have been one million cases of H1N1 in the U.S., and most have not required medical treatment.

The World Health Organization has raised its pandemic alert level (see http://www.who.int/csr/disease/avian_influenza/phase/en/index.html) to level 6, because the flu is easily spread from human to human. Typically 5-20% of the population contract the seasonal flu. Estimates for H1N1 range between 20-40%, with some experts predicting 50%. Sharing a household with a victim of the H1N1 virus raises one’s chance of contracting it 17-37%. Of those who contract H1N1, 15% of people under 25 years old need intensive care treatment. Pregnant women who have contracted H1N1 have a 17% death rate. There will be an estimated 90,000 deaths from H1N1 this flu season, three times the national average.

Baker referred Senators to the the Centers for Disease Control guidelines to prepare for flu and help prevent its spread (see http://www.cdc.gov/h1n1flu/institutions/).

The CDC recommends vaccinations both against the seasonal flu and H1N1, as infection by both viruses is one means by which H1N1 may mutate into a stronger virus. Senator Fero asked if there will be elongated times to get vaccines. Drake said that the Illinois Department of Central Management Services has the contract to administer vaccines to employees throughout the state. CMS will be on campus administering free seasonal flu vaccines Tuesday, October 20, from 9:30am to 2pm, and Thursday, October 22, from 1-4pm, at the Bridge Lounge in the MLK union. Up to 500 vaccinations will be available each day. Baker noted students may already receive seasonal flu vaccinations now. CDC believes seasonal flu will protect from infection for 8-12 months.

Additional guidelines to prevent infection include frequent hand washing, frequently cleaning commonly-touched surfaces, and isolating the sick. Anyone falling ill should remain at home until they have been free of fever for 24 hours; this could last seven days. Students and faculty should be under no pressure to return to class or work before they are no longer contagious. Visitors with flu symptoms should be discouraged from visiting. Professors with symptoms are encouraged to cancel class.

Production of the H1N1 vaccine will be ongoing. High-risk groups include: pregnant women, health care workers, emergency services personnel, and anyone working with infants; everyone 6 months to 24 years old, and anyone aged 25-49 with high-risk medical conditions.

Coit asked if others in infected households should also isolate. Baker suggested that if one person in the household comes down with the flu, another person in the house should serve as a contact person, and the sick person be kept in a room alone until fever-free for 24 hours.

Baker stated that the H1N1 vaccine will not help the current wave, but will help deal with the next wave of H1N1 cases. “Waves” last between 8 and 12 weeks. Brownson asked if there are diagnosed cases of H1N1 on the EIU campus. Baker replied, it is here. Worthington asked if H1N1 had different symptoms from the typical flu. Baker replied that it has similar symptoms as the seasonal flu (fever, usually over 100 degrees, cough, sore throat, body aches, headaches, chill, nausea, vomiting, diarrhea), although the gastrointestinal symptoms may be more pronounced. She noted that there is no other flu virus active right now, and so any cases now are H1N1.

Fero asked if H1N1 is related at all to the swine flu in the 1970s. Baker said it was similar in that the term “swine flu” signifies that the virus originated in pigs, but this is being called “novel” H1N1 because it is a different virus.

Worthington asked if someone gets H1N1 in this wave of cases, would they be more likely to get the flu in later waves? Baker said they would probably develop an immunity, although that immunity
would be less effective if the suffer had other serious health conditions. Baker raised the question of whether Health Services would vaccinate students who have already had H1N1. She stated that Health Services has already started a list of students with serious medical conditions and more than one risk factor. These students would be given priority for vaccinations.

Baker stated that there is no consensus about why young people are affected more severely by H1N1. It is believed that people 65 and older may have seen this virus before, and it may be genetically similar to a previous strain, because they do not contract H1N1. Young people can mount such a strong immune response that they can develop Adult Respiratory Distress Syndrome, which puts them at risk of developing other infections (such as respiratory pneumonia) and require hospitalization. Older people may not be able to mount such a strong response.

Drake stated that EIU is a sentinel site, sending samples of flu virus to the Illinois Department of Health. She noted that Health Services has already begun an extensive marketing and promotion campaign to raise awareness of the dangers of H1N1. Central Stores is stocked with hand sanitizers, and Drake suggested departments not wait until they are out of sanitizer to order more. Sanitizers should be placed in highly trafficked spaces. Faculty may order jugs of sanitizer for their offices from the office catalog. Event staff have been asked to place sanitizer at events, and anyone hosting a social gathering should provide sanitizer. Keyboards in computer labs should be regularly disinfected. Baker suggested "wash-in, wash-out" as an approach to keeping clean hands, and also recommended carrying personal hand sanitizer, which is being distributed for free at Health Services and the MLK Union.

White asked if there are contingency plans for a campus-wide quarantine. Baker responded that Health Services and CDC are only recommending self-isolation, and that H1N1 has not been declared a quarantineable disease by President Perry or Governor Quinn. Health Services urges any student returning home to convalesce use private transportation. Drake noted that some students will leave to convalesce and suggested asking parents to pick them up from campus.

Health Services workers will be wearing personal protective equipment including goggles, respirator, gown, and gloves. Half of health care workers contract H1N1 because they did not wear personal protective gear. Drake noted that sneezers and coughers at Health Services are given a flu pack while they wait.

Baker suggested again that faculty and students plan to change their policies and routines to minimize transmission.

White asked how long H1N1 would persist. Baker said flu infections occur in one to three waves, each wave lasting 8-12 weeks. It is unclear if the current wave of H1N1 infections is the first
or second, and noted the virus could mutate. Drake said it was hoped the H1N1 vaccine would reduce the length of the second wave.

VII. Adjournment at 3:40pm

Future Agenda items:
Enrollment, MAP grants, President’s Council

Respectfully submitted,

Jonathan Coit
September 13, 2009