Testimony of
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Hearing on H1N1
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Chairwoman Stavisky and members of the Senate Higher Education Committee:

thank you for inviting The City University of New York to testify before you today. I am Allan Dobrin, CUNY’s Executive Vice Chancellor and Chief Operating Officer, and I am pleased to lead the University’s testimony at this hearing. I am joined by Peter Jordan, CUNY’s Interim Vice Chancellor for Student Affairs; Howard Apsan, CUNY’s Director of Environmental, Health, Safety and Risk Management; Katharine Cobb, Vice President for Finance and Administration at Queens College; and John Holloway, Associate Dean for Student Affairs at Lehman College.

CUNY is the largest urban higher education institution in the United States. Our 23 institutions—all of which are located within New York City’s 5 boroughs—include 11 senior colleges, 6 community colleges, and graduate and professional
schools. We have over 260,000 degree seeking students, 270,000 non-degree seeking students, and 38,000 employees. Our primary concern regarding H1N1 is to protect members of the CUNY community and their families.

My colleagues and I will try to present a full picture of CUNY’s H1N1 response, but before we do that, let me share some highlights of what we’ve done thus far:

- We have developed a comprehensive Influenza Response Plan for Avian Flu more than two years ago and we updated it last spring for H1N1;
- We have disseminated information on infection prevention on campus, placing “Cover Your Cough/Wash Your Hands” posters in prominent places and in every bathroom;
- We have created a CUNY “Hot Button” on our homepage that takes users to the CUNY Flu page which includes information on infection prevention, H1N1 updates from the Centers for Disease Control and Prevention and the New York City Department of Health and Mental Hygiene, and a flu vaccine locator of vaccination sites in all five boroughs, and campus resources;
- We monitor H1N1 trends with the Health Department;
- We work closely with our residence halls and child care centers;
- We have regular meetings with NYC DOHMH and OEM;
- We have developed a CUNY-specific PSA through CUNY-TV;
• We have asked campuses to make sure that commonly touched surfaces receive extra-cleaning and that hand sanitizers are readily available;
• We have e-mailed updates to the entire University community;
• We have asked each campus to use its Environmental Health and Safety Officers to spot-check its campus H1N1 program;
• And we have weekly stakeholders meetings through the Campus Risk Management Committee.

If this sounds like we’re taking flu prevention seriously, it’s because we are. Now, if I may, I’d like to give you an overview of how we get to this point. The CUNY H1N1 program has three key elements—coordination, preparation and communication—and I would like to share them with you now and then invite my colleagues to speak about these elements as they apply to their respective areas of responsibility.

Coordination. CUNY acknowledges the leadership role of the New York State Department of Health, the New York City Department of Health and Mental Hygiene, and the Centers for Disease Control and Prevention in assessing health risks and setting health policy. There are many sources of information and guidance on H1N1, but because all CUNY campuses are in New York City, we
follow the New York City Department of Health’s lead most directly in pursuing a consistent and coordinated program to minimize the spread of influenza.

In addressing H1N1, we coordinate our efforts with the Health Department, which in turn works closely with the CDC and other research institutions to obtain, evaluate and share evolving epidemiological data. We are also part of the City-wide coordination effort that includes the Mayor’s Office, the Office of Emergency Management, the Health and Hospitals Corporation, the Department of Citywide Administrative Services, and other agencies, and we participate actively in regular conference calls, meetings, and training sessions.

During last spring’s H1N1 outbreak, CUNY participated in daily conference calls with the Health Department and OEM to obtain up-to-date surveillance and monitoring data and to discuss infection-control strategy. We then conducted daily internal conference calls to distribute the information with the CUNY community. Campuses have been asked to create Flu Committees as an offshoot of their Risk Management Committees to coordinate, implement and communicate their flu response programs to their campus community.
Preparation. To quote Tom Ridge, America’s first Secretary of Homeland Security, “Hope is not a risk management strategy.” We at CUNY have been very fortunate that we have not had a significant outbreak, but we will continue to prepare for any contingency so that we can minimize our future risks.

Our preparation includes an Influenza Response Plan that offers University-wide, campus-specific, and departmental guidance. The Plan was distributed throughout the University, and administrators—centrally and on the campuses—have been asked to implement the plan in their areas of responsibility.

We have also taken steps to foster a culture of infection control throughout the University. We have posted “Cover Your Cough/Wash Your Hands” flyers throughout our buildings; we have asked our Environmental Health and Safety Officers to spot-check every bathroom to make sure that these flyers are posted and that there is ample soap available; we are trying to clean more often and more carefully giving commonly-touched surfaces extra-attention; hand sanitizers have been placed in many high-traffic areas and distributed widely; and we are encouraging everyone in the CUNY community to stay home if they are sick and to stay there until their fever has been gone for at least 24 hours without the use of fever-reducing medication.
Communication. An effective flu prevention program depends on effective communication. To implement the CUNY H1N1 program, we will continue to communicate a uniform message throughout the University. We have briefed our campus presidents, our senior executives, our union leaders, and our managers to ensure that they understand the scope and importance of CUNY’s H1N1 preparedness efforts.

For the wider CUNY community, we send e-mail blasts to the entire CUNY community to share flu information and provide web-based updates. In fact, for the foreseeable future, we have decided to maintain a permanent H1N1 “hot button” on the CUNY home page (www.cuny.edu) that provides the latest H1N1 updates and a link to the CUNY Flu Page (www.cuny.edu/flu). We ask our campuses to maintain up-to-date flu information in prominent positions on their home pages, and to link to the CUNY Flu Page as well. This will minimize potential for confusion and ensure that we are providing a uniform message throughout the University.

In closing, like everyone in this room, we hope that any recurrence of H1N1 in New York City will be mild and limited. But as I mentioned, we are responsible
for the well-being of the CUNY community, and we can’t afford to let hope be our risk management strategy. Thank you.