



CALL TO MEETING AND AGENDA

Date: December 9, 2021

Time: 2:30 PM

Location: Senate Chambers & Zoom

1. CALL TO ORDER
 - a. Welcome introduction and recognition of guests
2. APPROVAL OF MINUTES:
 - a. Approved as read
3. OPEN COMMENT PERIOD
4. SPECIAL ORDERS OF THE DAY
 - a. Staff Service and Milestones Recognition
 - b. Brian O'Rourke – Development & Fundraising Update
 - i. Campaign for Clemson (1987 – 1992)
 - ii. University Clemson Commitment (1996 – 2001)
 - iii. Will to Lead (2006 – 2016)
 - iv. Fiercely Forward (2019 – 2027)
 1. Pillars
 - a. Students (scholarships)
 - b. Clemson Experience
 - c. Exceptional Faculty
 - d. Graduate education
 - e. State of the Art Facilities
 - f. Clemson's Future
 2. FY22 Goals and Objectives
 - a. Exceed FY22 Goal
 - b. College/Unit cases for support
 - c. College/Unit goal setting
 - d. Strategic communications launch
 - e. Campaign launch planning
 - f. Volunteer engagement planning
 - i. Committee on philanthropy
 - ii. Order of the Oak
 - iii. College/Unit Cabinet launch
 - c. Dr. Lior Rennert – COVID Updates
 - i. Provided updates about current COVID variants and vaccine effectiveness and safety.
5. REPORTS
 - a. Treasurer's Report – Holly Stone
 - i. Vending: \$ 8,135.00



- ii. Operating: \$ 4,914.64
- iii. Travel: \$ 100.00
- b. Standing Committees
 - i. Activities – Co-chairs: Jake Anderson, Donnie Lloyd
 - Downshifting after a busy semester
 - Delivered appreciation bags to Redfern and Sullivan Center (thanks to Cassi for helping to coordinate)
 - Degree Attainment lunch: early February
 - Staff Senate Blood drive will be on Valentine’s Day
 - ii. Communications – Co-Chair: Ryan Real, Victoria Roberts
 - Intake form is up on our website (submit feedback to the Senate or submit items for the newsletter.) Feedback can be submitted anonymously.
 - Met with Amy Smith from University Relations; talked through strategic communications and creating clearer, quicker lines of communication
 - Next newsletter will be in February
 - Asking Senators to share items of success that we can share through the newsletter
 - iii. Membership – Co-chairs: Kristen Lawson, Melinda Fischer
 - Completed annual review of bylaws; finalizing some changes that will go before Executive Committee in January
 - Spring 2022 elections are coming up – working on finalizing numbers within each Budget Center
 - Reminder for in-person attendees, please use the sign-in sheets to record their attendance; Zoom attendees will be recorded through their login
 - iv. Policy and Welfare – Co-chairs: Jeff Anthony, Alisha Johnson
 - Gaining some traction on Child Tuition Assistance/Discounts; working with Faculty Senate on drafting a proposal
 - Mary Erin is working with Jamie Byrne and Monique Everroad on the firefighter leave policy
 - Juneteenth Resolution draft (created with help of Faculty Senate) has been sent to the Commission on the Black Experience will be sent to Executive Committee before voting on this in the Full Senate.
 - Retirement benefits update
 - a. Michelle Cato (HR) looked into this. We will be sharing full details in an upcoming Newsletter
 - v. Scholarship – Co-chairs: Janeen Putman, Holly Stone



STAFF SENATE

- 27 new payroll deductions as of our campaign letter in October
 - We have 6 images to pick from to create a collectible for a fundraiser
- vi. JEDI Committee – Co-chairs: Melinda Fischer, Sue Whorton
- Have pulled out all goals and action steps. These have been sent to Altheia and will tweak once we have her feedback. Following that, it will go to the Executive Committee and then Full Senate.
- c. University Committees/Commissions:
- i. Committee on Committees – CJ Smith/Sue Whorton/Melinda Fischer/Jeff Anthony
- No report
- ii. Library Advisory Board – Kristi Baker
- No report
- iii. Parking Review Board – Jeff Anthony
- No report
- iv. Bookstore Advisory Committee – Lili Klar
- Wanted instructors to upload required textbooks before students enroll in classes
- v. Accident Review Board – Ross Phillips (Michael Atkins)
- No report
- vi. Ombuds Committee – Sue Whorton/C.J. Smith/Melinda Fischer/Christy Babb
- Have 4 Staff Senators on this committee in addition to Alesia Smith from Title IX
 - Updated on outreach/promotion/communications pieces she has been involved in
 - Shared plan about getting the word out about the Ombuds Office
 - Shared general information about numbers visiting the office and general topics of those discussions
- vii. Commission on the Black Experience – Mary Erin Morrissey
- No report (meeting tomorrow)
- viii. Commission on Women – Stacey Miller
- No report
- ix. Accessibility Commission – Beth Newton
- No report
- x. Veterans Commission – Alisha Johnson/Michael Atkins/Janeen Putman
- No report
- xi. LGBTQ+ Commission – John Kozlowski
- No report
- xii. Commission on Latino Affairs – Harolynn Williams



- No report
- d. President's Report – CJ Smith
 - i. Remote Work Taskforce
 - Pilot starting soon (University announcement forthcoming)
 - ii. Staff Climate Survey
 - Committee is working to launch in the Spring
 - Meeting next week
 - Will need approval from ELT prior to launching
- 6. UNFINISHED BUSINESS AND GENERAL ORDERS
- 7. NEW BUSINESS
- 8. ADJOURN at 4:02pm

ANNOUNCEMENTS:

1. December Executive Committee meeting: Canceled
2. Full Senate meeting: January 13th in the Senate Chambers and Zoom



ADVANCEMENT

Staff Senate

December 9, 2021

We are a team that enhances Clemson's reputation and builds relationships to yield philanthropic resources to Clemson.



Advancement Responsibilities



Responsibility of
a culture of
philanthropy
around campus



Resources back to
the University in
cash, in growing the
endowment, the real
estate foundation
portfolio and
securing future gifts

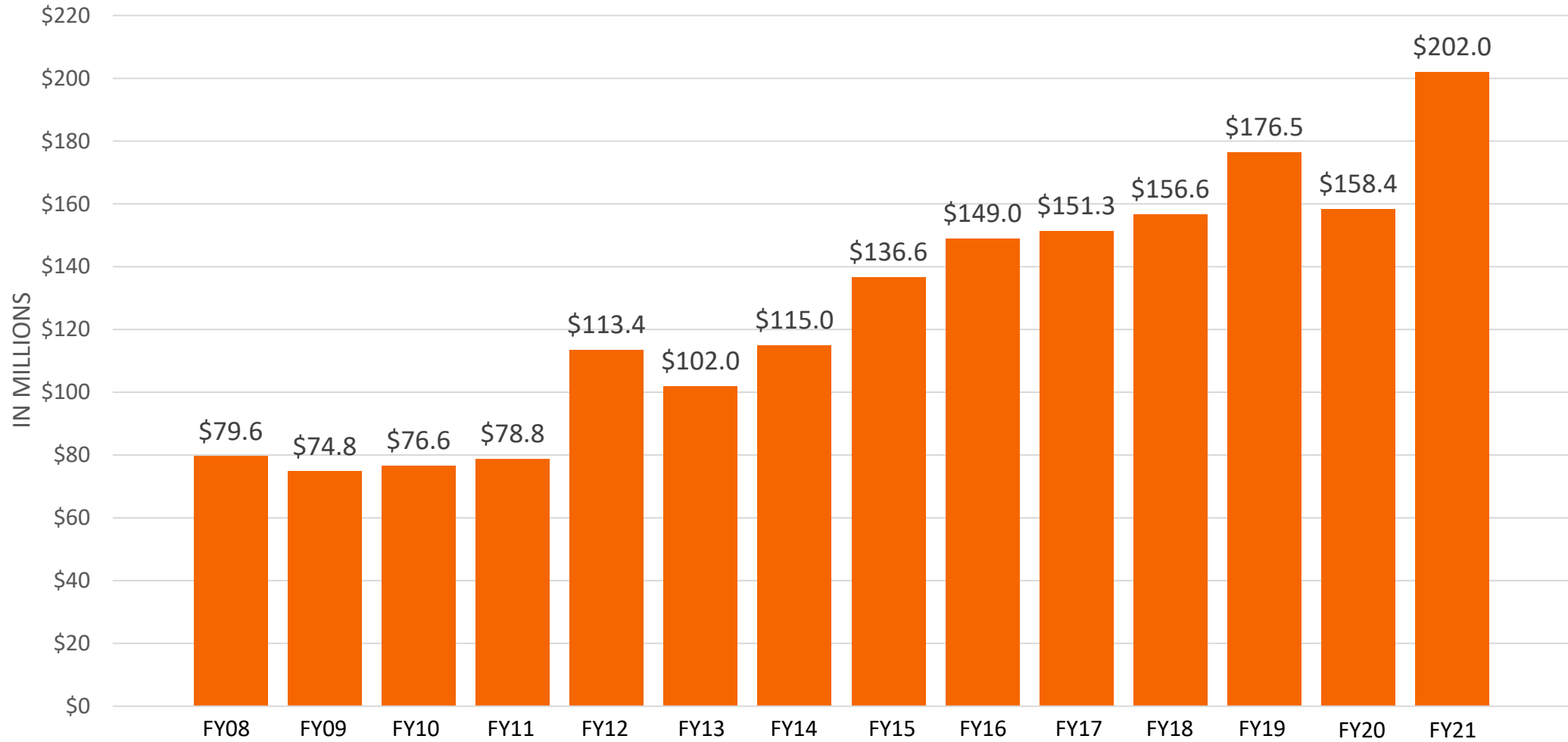


Relationships
with our
35,000+ donors

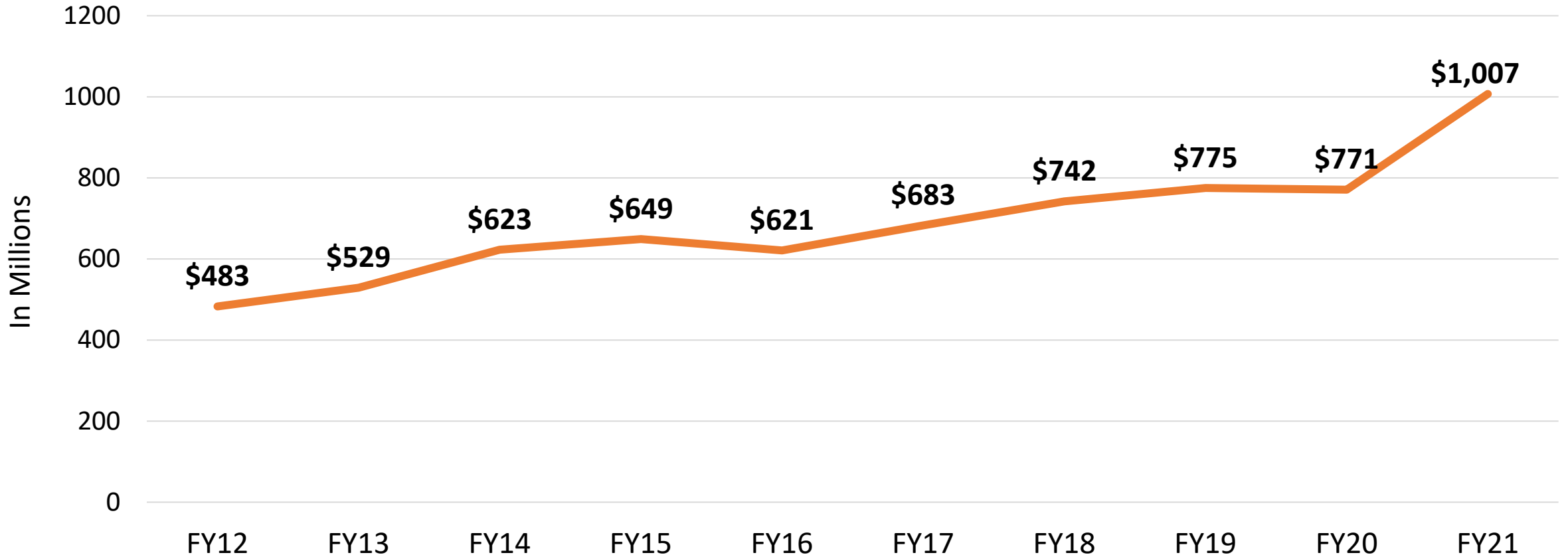


Relationships
with our
164,000 living
alumni

Total Philanthropic Support



Market Value of the Endowment



From FY12-FY21, \$170 million was paid out from Endowment to support university initiatives.

A History of Philanthropy at Clemson



The Campaign for
Clemson
1987 – 1992



\$101M



The Clemson
Commitment
1996 – 2001



\$296M



The Will to Lead
Campaign for Clemson
2006 – 2016



\$1.06B



Fiercely
Forward
2019 -



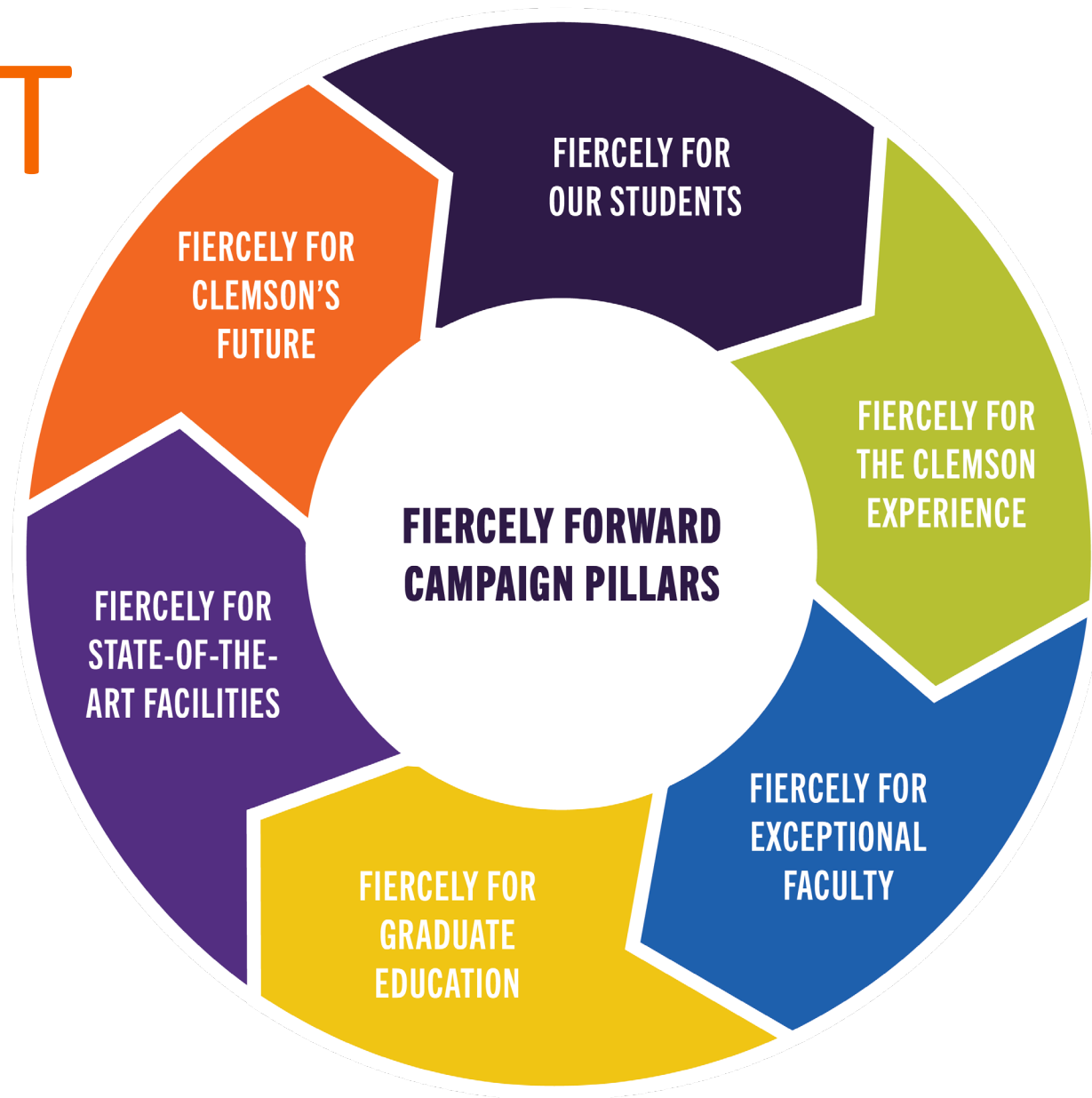
\$1.5B

FIERCELY *FORWARD* 

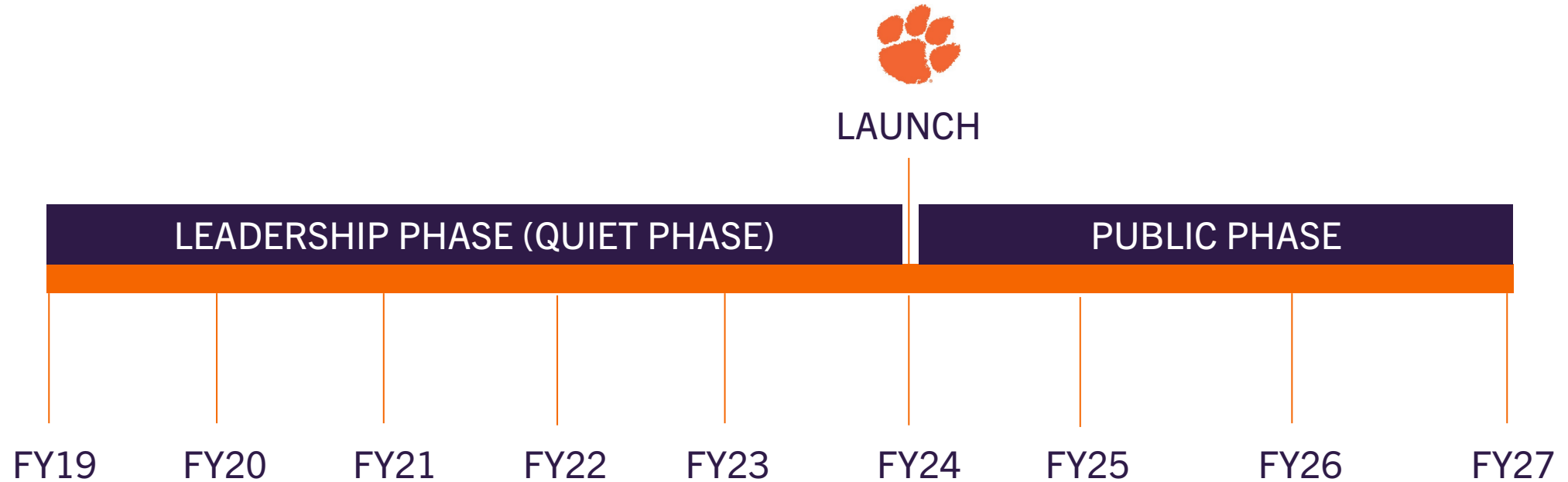


CLEMSON 
forever

IMPACT



Current Campaign Timeline



Overall Campaign Progress

Overall Goal	\$1,500,000,000
Total Raised	\$467,793,675
Progress toward Goal	31.19%

FY22 Goals and Objectives

- Exceed FY22 Fundraising Goal
- College/Unit Cases for Support
- College/Unit Goal Setting
- Strategic Communications Launch
- Campaign Launch Planning
- Volunteer Engagement Planning
 - Committee on Philanthropy
 - Order of the Oak
 - College/Unit Cabinet Launch



Staff Senate Endowed Scholarship

- Since your solicitation on 10/12/21,
 - 31 on new payroll deductions that started with 10/29/21 paycheck
 - 27 designated for the Staff Senate Endowed Scholarship
 - Dollars added to the scholarship for this first deduction totaled \$97.67. Payroll deduction is posted twice a month.
 - 4 designated for unrestricted funds at the University and College level



\$35,000 awarded to 15 students
(2020-2021 and 2021-2022)



\$16,332 Endowment Payout (2020-2021)
\$17,402 Endowment Payout (2021-2022)
\$747,596 Endowment Value



COVID-19 Vaccine Safety and Effectiveness

Lior Rennert, PhD

- Assistant Professor, Public Health Sciences
- Lead Public Health Strategist & Biostatistician, Clemson University



Severe acute respiratory syndrome coronavirus (SARS-CoV)

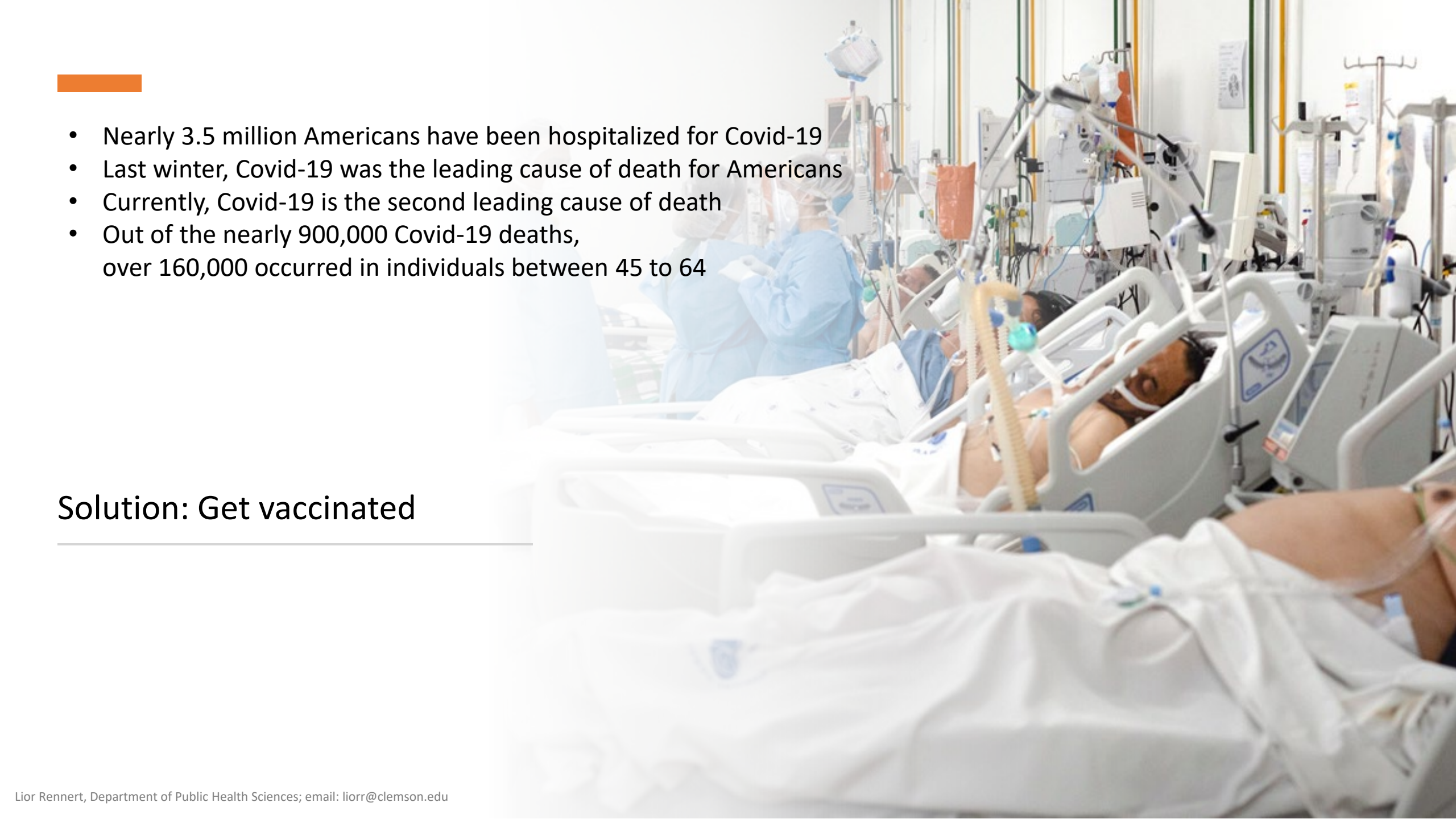
- The 2003 SARS-CoV (or SARS) outbreak infected 8,098 people across the world, killing 774 (almost 10%)
- SARS is an airborne virus, spreading through small droplets of saliva
 - If you inhale these droplets, you can get infected
 - This is why we have/had 6-foot social distancing and mask guidelines
- SARS-CoV-2 (**severe acute respiratory syndrome coronavirus 2**) is the *virus that causes COVID-19*
 - Estimated to have infected > 267 million with > 5 million deaths (approx. 2% death rate)
 - True death rate likely closer to 1% due to underreporting
 - Nearly 900,000 deaths in US



Source: Georgia Department of Public Health

COVID-19

- Very contagious: Every infected person exposes approximately 4 to 8 others to the disease in absence of mitigation measures ($R_0 = 4$ to 8)
 - Suspected to be higher for Omicron
- Peak infectiousness occurs early in disease course (and generally before symptoms show)
- 80% of people only show mild to no symptoms, but are responsible for majority of disease spread
- However, in severe cases, infected patients have developed pneumonia in both lungs, in some cases leading to death
- Furthermore, risk of developing long COVID symptoms (that is, symptoms that don't go away)

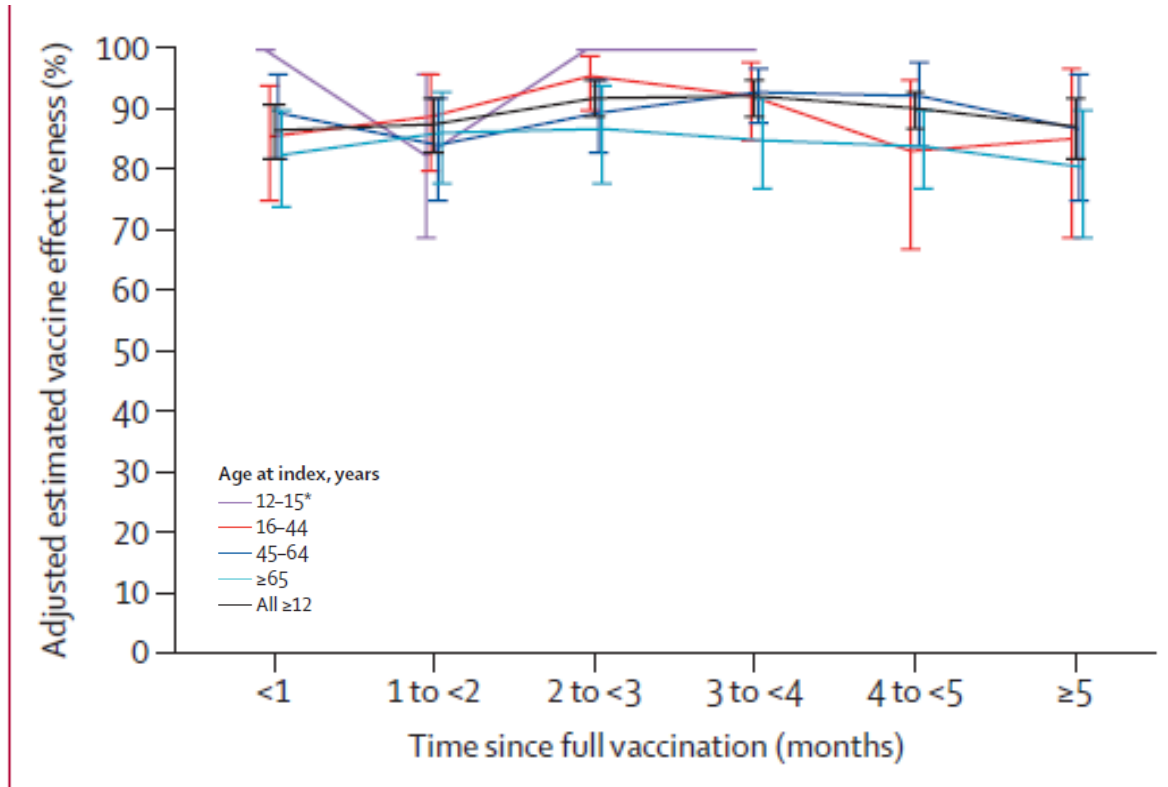
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- Nearly 3.5 million Americans have been hospitalized for Covid-19
 - Last winter, Covid-19 was the leading cause of death for Americans
 - Currently, Covid-19 is the second leading cause of death
 - Out of the nearly 900,000 Covid-19 deaths, over 160,000 occurred in individuals between 45 to 64

Solution: Get vaccinated

Best Prevention Strategies?

- **Vaccines!** Highly effective, and very safe!
- All 3 COVID-19 vaccines, including Pfizer, Moderna, and Jansen/Johnson & Johnson, are extremely safe, and highly effective in preventing serious disease, hospitalization, and death from COVID-19
 - Booster shots now available!
 - Recommend mRNA vaccines (Moderna or Pfizer), since these are most effective
- **Risk of dying from Covid 20 times greater among unvaccinated individuals**
 - Very, very low risk of any long-term side effects from vaccine
 - In fact, risk of long-term side effects much higher from contracting Covid-19
- Among previously infected individuals, vaccine offers substantial increase in protection
 - So even if you've been infected, get the vaccine
- Note: Typically takes 1-2 weeks after final dose for protection to build

Vaccine Effectiveness Against Hospitalization



Vaccines are highly effective against severe Covid-19!

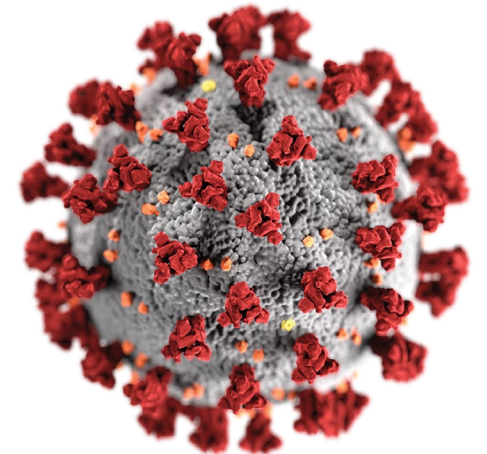
Effectiveness of mRNA BNT162b2 COVID-19 vaccine up to 6 months in a large integrated health system in the USA: a retrospective cohort study



Sara Y Tartof, Jeff M Slezak, Heidi Fischer, Vennis Hong, Bradley K Ackerson, Omesh N Ranasinghe, Timothy B Frankland, Oluwaseye A Ogun, Joann M Zamparo, Sharon Gray, Srinivas RValluri, Kaijie Pan, Frederick J Angulo, Luis Jodar, John M McLaughlin

How do mRNA vaccines work?

- When infected with SARS-CoV-2, the virus that causes COVID-19, our body eventually generates special cells that recognize virus and fight it off
- While these special cells may be ready fight future infection, they can't help with initial infection since it takes body weeks to generate them
- mRNA vaccines cause body to generate these special cells without having to actually get SARS-CoV-2
- Work by producing a *harmless* protein unique to SARS-CoV-2
- This protein does not enter cell's nucleus and has no possibility of infecting us or altering our DNA in any way
- However, our body recognizes protein as foreign object and begins to generate these same special cells that are trained to fight the infection
- If we get infected in future, these trained cells will be ready to immediately fight off SARS-CoV-2 before it has chance to replicate in our body and make us very sick



Common Misconceptions about Vaccines



The vaccine will give me COVID-19.	None of the vaccines contain the live virus causing COVID-19.
I do not need to get the vaccine, I already had COVID-19.	People can be infected more than once – vaccines offer better protection without risk of serious illness.
The vaccine will change my DNA.	The vaccine does not contain microchips, it cannot alter your DNA or enter the nucleus of the cell where DNA is.
The COVID-19 vaccine causes infertility.	There is no evidence the vaccine affects reproduction, causing infertility or difficulty with pregnancy.
The COVID-19 vaccine isn't safe.	The vaccines are safe and effective. They have been developed under the most intense safety monitoring in U.S. history.

WHY GET VACCINATED?

- Create an immune response in your body against the virus.
- Prevent yourself from getting infected and/or severely ill.
- Protect your family, friends and coworkers.

198M

Americans fully vaccinated against COVID-19.



90%

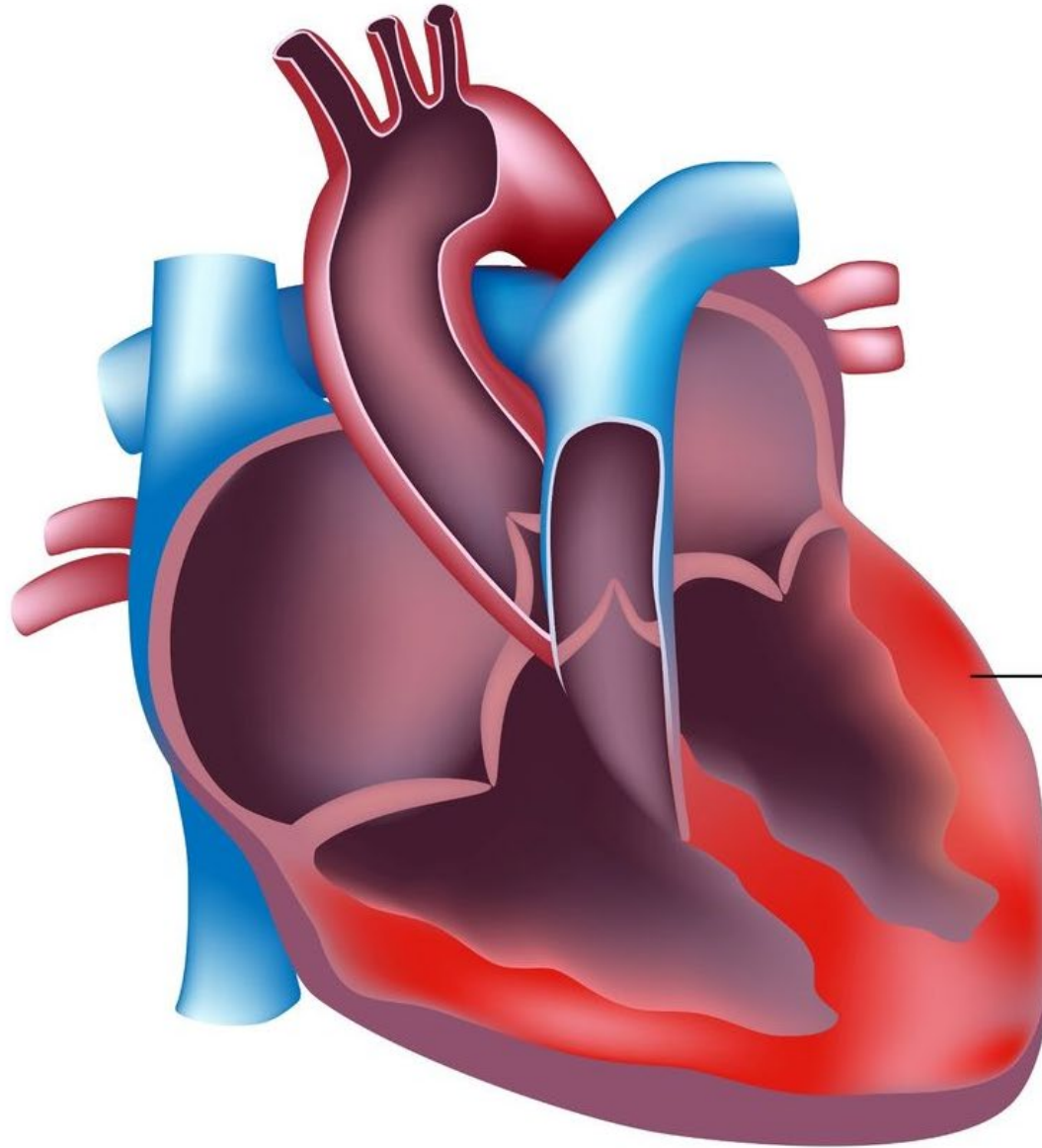
Vaccines are approx. 90% protective against infection, and 95% protective against hospitalization.



>10x

Young adults who are unvaccinated are 10x more likely to be hospitalized from COVID.





Myocarditis

**Risk varies with
sex and age**

Inflammation of
heart muscle

**Zero deaths
associated from
vaccine-
associated
myocarditis with
COVID vaccine**

**Risk of myocarditis is higher
with COVID disease than
vaccination**

ORIGINAL ARTICLE

Safety of the BNT162b2 mRNA Covid-19 Vaccine in a Nationwide Setting

- Vaccinated and control groups 884,828 persons
- Vaccination associated with an elevated risk of myocarditis (risk ratio, 3.24; 95% confidence interval [CI], 1.55 to 12.44)
- SARS-CoV-2 infection associated with substantially increased risk of myocarditis (risk ratio, 18.28; 95% CI, 3.95 to 25.12) and of additional serious adverse events, including deep-vein thrombosis, pulmonary embolism, myocardial infarction, intracranial hemorrhage, and thrombocytopenia

Boosters

- Vaccine protection against infection wanes over time

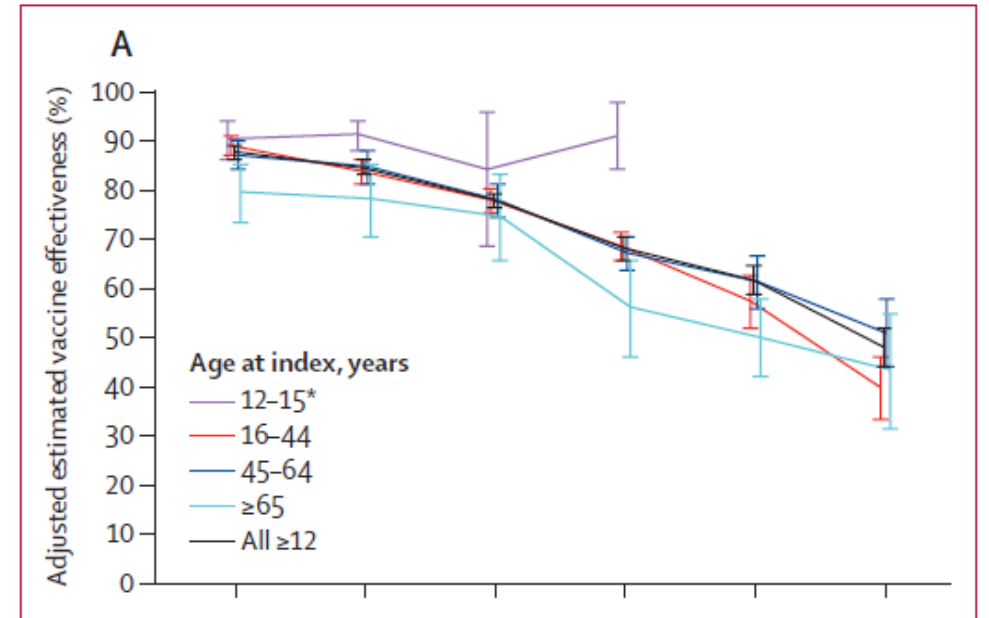
Booster doses highly effective

Eligibility:

- 6 months past 2nd dose of Pfizer or Moderna
- 2 months past first dose of J&J

Recommendation: Get one of the mRNA boosters (Moderna or Pfizer)

- Stronger protection
- NEJM Study: Booster lowered rate of severe illness by factor of 20



Protection of BNT162b2 Vaccine Booster against Covid-19 in Israel

Vaccinations and Booster Available at LittleJohn

- Vax Clinic offering free first doses, second doses, and booster doses at LittleJohn
 - Right next to testing
 - In an out in 2 minutes
- Tuesdays: 9 am to 1 pm
- Fridays: 9 am to 2 pm



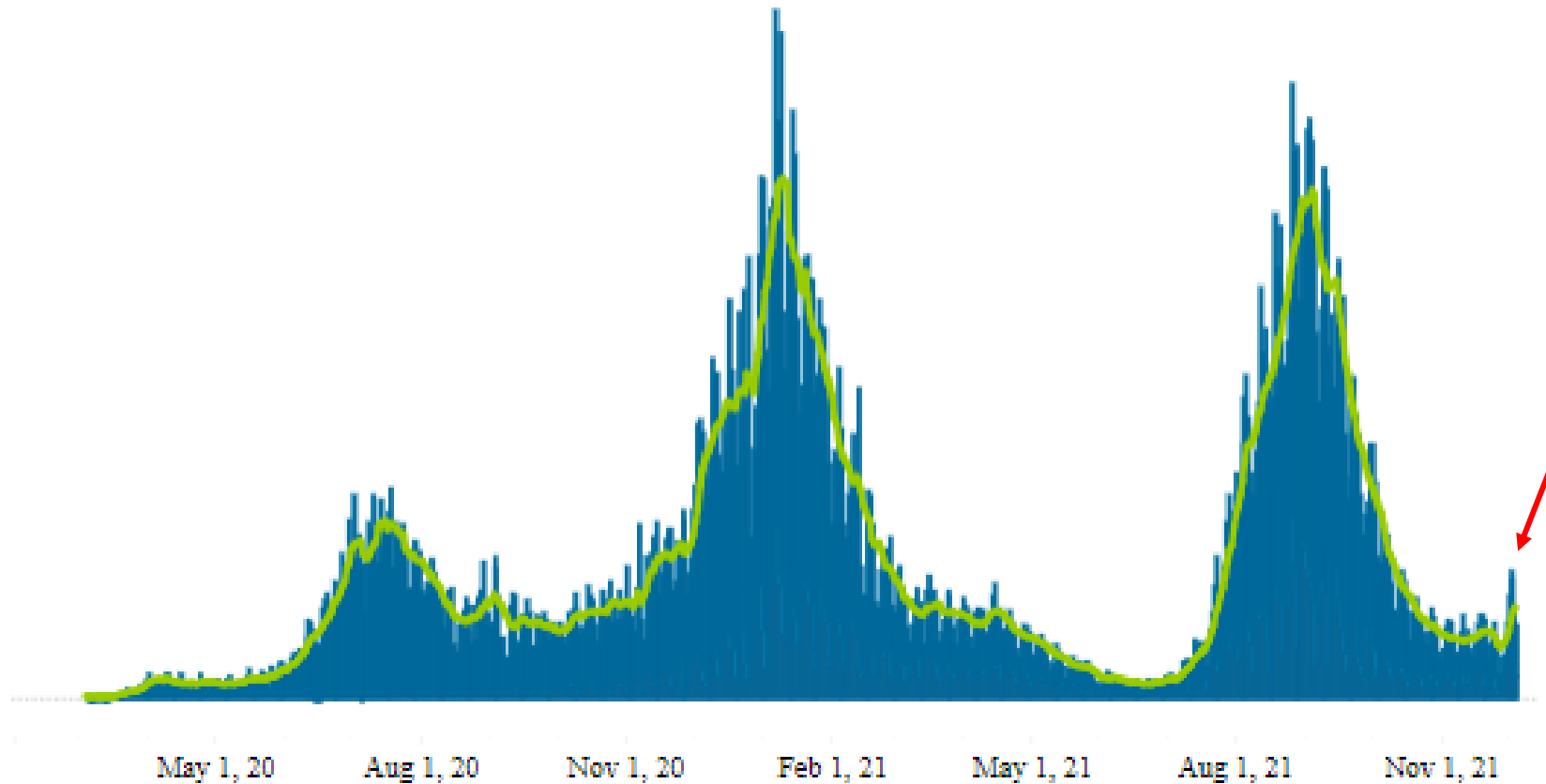
More information can be found here:

<https://www.clemson.edu/covid-19/medical-guidance/vaccine-information.html>

South Carolina Cases

COVID-19 Cases per Day
County Displayed:*

- Count of Confirmed Cases
- Count of Probable Cases
- Moving Average 7 day



Conclusions

1. Vaccines HIGHLY protective against severe SARS-CoV-2 infection, including Delta and Omicron
 - Early evidence suggests vaccines effective against Omicron, especially after the booster
 - All vaccines are extremely safe
2. Get vaccinated regardless of whether you've been previously infected
 - Studies show drastic increase in protection
3. Get a booster if you are eligible
 - For both yourself and loved ones over the holidays