

Dear Dr. Kellermann,

On January 1st VCU medical students learned they were being pulled out of clinical duties for 60-90 days. At first, this was explained as a public health precaution in expectation of the third wave of COVID. However as the meeting continued it was revealed VCU Health System (VCUHS) is experiencing a recent rapid increase in employee COVID+ cases. We were also informed that there is no clear timeline for our vaccination. Unlike the [CDC who declared medical students essential personnel](#), it appears that VCUHS disagrees, valuing employees who can telework and have no patient contact, over clinical students who are promised and expect patient interaction for their training.

As a result, medical students are being denied promised clinical training for two reasons:

1. Recent spike in COVID+ cases among VCUHS employees.
2. No planned vaccines for students within 60-90 days.

We, students at VCU School of Medicine (VCU SOM), chose to become physicians because we deeply care about the health of our community. Though students pay the cost of this decision initially, we know that ultimately those hurt most will be our future patients, and we cannot accept that.

Below we have further outlined why this decision is so concerning to us:

❖ **Apparent ineffective execution of COVID precautions:**

- Students are being removed from clinical opportunities due to a recent rapid increase in cases among VCUHS employees which was attributed to “complacency” among its staff accelerating the issue.
- We’ve observed the following in clinical settings outside of VCUHS:
  - Temperature checks for all personnel upon arrival
  - Uniform PPE requirements
  - Weekly screening tests
  - Non-essential travel restrictions for students and employees
- Therefore, this leads us to question the efficacy of VCUHS’ management of internal COVID precautions on the front end.

❖ **Inadequate vaccine distribution:**

- VCUHS received their first 4000 doses of the Pfizer COVID-19 vaccine on [12/15](#) and began vaccinating frontline workers the next day. They received an additional 3300 doses of the Moderna vaccine on [12/23](#). Per an email sent to employees on 1/4 by Dr. Ralph Clark, 6700 employees have been vaccinated. The discrepancy between the number of vaccine doses received and the number of employees vaccinated indicates that employees may have been refusing vaccines, but medical students have still not been considered to receive these refused doses. We are concerned that these doses are instead being given preferentially to non-clinical staff whose duties do not require them to be in

clinical settings. In its own press releases, VCUHS states that it is “[committed to an equitable distribution of the vaccine](#)”. We ask for greater transparency regarding students’ standing in the distribution of the vaccine.

- VCUHS’ statement that they are following the recommended CDC guidelines is incongruent to the fact that all health system employees have access to the vaccine (which includes the non-clinical environments). Meanwhile, students who work in all of these areas have not received any information about when they are eligible to receive the vaccine. In comparison, medical schools across the country and state have been vaccinating their students since December 2020, including UVA, VTC, GWU, INOVA, UMichigan, Rush Medical College, NYU, UCSD, UC-Irvine, Maryland, and Albany Med. If these heavily populated medical centers can provide vaccines to their students in a timely manner, surely VCUHS should be able to do the same.
- Though students are not allowed to work in VCU hospital or affiliated sites, students are allowed to continue working in partner locations and community sites where they continue to be patient-facing yet may be the only members of the health care staff who have not been offered the vaccine.

❖ **Inequitable power dynamics between students and VCUHS places students in a precarious position:**

- Medical students are uniquely positioned because they pay tuition to be learners in the hospital, an essential and promised component of their training. In fact many of us chose to go to VCU SOM because of their reputation as a top institution for clinical training. At the same time, due to the competitive nature of medical school applications, students are conditioned to view their position with both great respect and delicacy, fearing any action deemed “unprofessional” could jeopardize their future career. Taken together, medical students are a vulnerable population among healthcare personnel. VCUHS holds immense power over students because they are so beholden to them and at the same time, [easy to replace](#). This inequity of power between students and the health system allows them to easily dismiss student’s concerns and in this case, their careers.

❖ **Would you trust a Zoom trained physician?:**

- During normal circumstances, medical students are active members of medical teams. They are often the first people to interview a patient, perform their physical exam, create a treatment plan, and assist with hands-on procedures- all essential components in learning how to become a physician. However, as they are being pulled out of the clinical environment, VCU SOM now must educate students virtually, a plan that is in no way comparable to in-person learning and a plan decided upon without the input of the already busy medical teams who will be the ones forced to accommodate this change.
- The value of an online medical education is NOT comparable or equitable to clinical experience. [Cost breakdowns of our tuition](#) indicate that clinical experiences are the brunt of the expenses students’ tuition goes towards; yet there is no refund, tuition reimbursement or tuition reduction discussed to reflect

the decreased costs associated with virtual medical school. Paying approximately \$30,000 for this semester, as a third or fourth year medical student, for a decreased value of education is unacceptable and unfair.

- Additionally, virtual learning will have deleterious effects on students' careers. When COVID began, students accepted and understood their role in the response to the unprecedented pandemic and adapted to 6 months of online curriculum. They recognized they lost time that other graduating classes had, including: assisting in operating rooms, delivering babies, and perfecting physical exam skills. Students' future careers as MDs depend on how competitive they are as applicants to residency programs, a strength typically exemplified by VCU SOM. Denying VCU SOM students these opportunities a second time, when a third wave was already predicted, the PPE supply is more stabilized, other medical schools continue to provide their students with in-person clinical training and a vaccine is being rolled out is unacceptable. Without proper training as medical students, how can residency programs trust VCU SOM students to be ready to start their new role as MDs?

❖ **Public health and Richmond community implications:**

- In a year where the value and necessity of healthcare workers mattered more than ever, it feels short-sighted to take away additional key clinical training from students. In order to provide for the community and become the best healthcare workers possible, students must be trained.
- VCUHS is a significant part of the Richmond community who hold the institution with great reverence. With this 60-90 day hiatus, VCU medical students will be unique amongst other medical schools in that we are missing a period of clinical training that no other school is due to an internal health system issue. This incident demonstrates VCUHS' lack of value placed on medical students and trainees. Not only could this poorly impact future clinical placements for its students, but it also does not bode well for future applicants choosing VCU over another school that values its students as essential team members.

We recognize the sacrifices that must be made in the current pandemic and that we are not privy to the innermost decisions and problems faced by the hospital administration of a large medical system, a medical system which we are part of. Our intent with sharing this with you is to advocate on behalf of our patients and our community. On the first day of medical school, we took an oath to "do no harm." We believe that VCUHS' decision is inherently harmful to our future patients, and we cannot accept that.

As students, we were encouraged by your comments and remarks when you first began as CEO. You stated VCU was attractive to you because you saw it as the university that "[gives everybody a chance](#)", including students, patients, faculty, and staff. You began your duties "[excited to work with the high caliber of students](#)" at VCU. You often repeated that you see medical students as integral players on the healthcare team. Yet, this decision surrounding vaccine distribution draws these comments into question. From our perspective, we expect the

CEO of the health system to be an advocate for the protection, education and well-being of all persons who interact with the VCUHS, including the next generation of providers.

Therefore, an actionable solution is imperative to return students to the clinical setting sooner than 60-90 days.

Signed,

A Concerned Group of VCU Medical Students