



Project: Documenting COVID-19: Stony Brook University Experiences

Title: Interview with Lawrence Zicarese - Transcript

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Interviewer: Chris Kretz (CK)

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Summary: Lawrence “Larry” Zicarese is the Interim Chief of Police and Assistant Vice President for Campus Safety and the Senior Operations Director for Institutional Resiliency and Business Continuity. In this interview he discusses the steps taken to address COVID-19 at Stony Brook in early spring of 2020, including the isolation of SUNY study abroad students at the Southampton campus and working with local, state and federal agencies, particularly on the establishment of a field hospital on West Campus. He also describes his experience in the emergency management field and how that informed his reactions to the pandemic.

00:00:02

CK: Okay. Today is Tuesday, November 10, 2020. This is Chris Kretz for Stony Brook University Libraries’ Documenting COVID-19: Stony Brook University Experiences project, talking with Larry Zicarese over Zencastr.

Larry, first of all, thank you for sharing your experiences with us.

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LZ: Thanks for having me, Chris, I appreciate it.

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CK: And can you start off by telling us your position at the university and how long you've been at Stony Brook?

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LZ: Sure. I'm currently the Interim Chief of Police and Assistant Vice President for Campus Safety and the Senior Operations Director for Institutional Resiliency and Business Continuity.

I've been here in this capacity since 2009.

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CK: Okay. And, in broad strokes, what would you say you—what areas of campus do you interact with [in] your main duties?

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LZ: Primarily overseeing the police department, Emergency Management, the Office of Access Control, investigations, public safety in the hospital, busing, and parking enforcement.

Essentially the—say the professional law enforcement responsibilities as well as the safety and security for the campus, for the hospital, for the veterans home, [and] Southampton campus.

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CK: Okay. So basically all of that.

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LZ: All of that.

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CK: Take us back—when do you first remember being aware of the coronavirus?

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LZ: Well, I would say probably January or so. We began to see some trends, you know, nationally and throughout the world, but our pandemic response is something that we have always planned for.

Matter of fact, when I first arrived here on campus in 2009, H1N1 was the pandemic du jour at the time, so [I had] personal experience here on the campus as well as what I had brought to the table from my prior life in emergency management and emergency medical services. So we certainly always keep a close eye on it.

But very early on, January, we started to see some trends in Suffolk County and working with our colleagues in the hospital and Dr. Susan Donlon, who I've worked very closely with over the last fifteen-plus years, started to see some concerning things epidemiologically. And we started to, very early on, put our committee—our standing committees—together and just started to meet and to really keep a close eye on the surveillance that was happening at the time.

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CK: And so what were you most worried about at the beginning?

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LZ: Honestly, you know, the big difference between COVID and H1N1, at least preliminarily, was the lack of a vaccine. So planning a campus response to a pandemic that has a vaccine—your focus is on acquiring supplies of vaccine and then distributing it through PODs, or points of distribution.

Essentially, a flu clinic. And we're pretty good at that. We do it in the hospital every year, we do it on campus every year, and we certainly did it during H1N1. But the difference here was obviously, at the time, there was no vaccine.

And the concern was that there were really more questions than answers about, you know, what the virus looked like. How it was presenting. Where it was, where it was moving to. And as I think we all realized, very quickly, that the only thing that would be consistent was the inconsistency—both with information [and] with what the experts thought they knew about it. And just being nimble in response to it became the name of the game pretty quickly.

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CK: And you mentioned the meetings. So who were you meeting with? Who was the group that was in charge?

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LZ: So we have—I like to call it the “hub and spoke” model where our public health preparedness, for the campus anyway, really is run out of my Office of Emergency Management—where that's the hub. And then the various spokes between Student Health Services, the hospital, facilities, campus operations and maintenance, the campus ambulance, Environmental Health and Safety, the academic planning, the registrar's office, the provost's office, the Office of the President, Communications, you name it. I mean, there's essentially—every area of the campus was engaged, just from the planning standpoint.

We went from planning, to response, to now we're in what we call our recovery phase and almost about to re-enter a planning phase for the winter and into the spring semester. But a multidisciplinary team, that—we have traditional relationships where we work together on a regular basis, but this was with a specific focus on pandemic response.

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CK: So walk us through some of the early steps and decisions you had to make—talking about February into March, I guess.

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LZ: You know, in the first few weeks, it became apparent pretty quickly that we would be handling local guidance. So we work very closely with our local Suffolk County Health Department. But, as everyone knows, we're a SUNY [State University of New York] campus in a system that's the biggest in the country, one of sixty-four campuses. So we're in Stony Brook, in Brookhaven town, in Suffolk County, in the state. So there's a multitude of both regulatory agencies as well as just our partner agencies that we have to coordinate with. And having the campus and the university hospital intertwined, essentially, where there's a road that separates the two but [they are] inextricably linked in everything that we do—from personnel to just the mission, the mission of the university—it became apparent very, very quickly that we were going to be looked at as a resource from the medical perspective and our subject matter experts who, even to this day, continue to be tapped for interviews and for research.

And it became apparent pretty quickly—I'd say once we got into the middle of March, when discussions about shutdowns and the initial two-week pause to flatten the curve that everyone, I think, thought would be more effective than it was, really opened our eyes to—that this was not going to be a short duration event. It was going to be a long term—you know, the response itself will be very long term.

And then how quickly the hospital and the supply chain issues and getting personal protective equipment—it was almost like, overnight, we went from some preliminary planning, to recalling SUNY students from study abroad programs, to setting up isolation and quarantine spaces. And so it went from zero to 150 almost overnight.

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CK: And just to walk through some of those—what were some of the toughest challenges or decisions you had to make?

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LZ: You know, we went from essentially the middle of a semester—spring break was really happening. Ours, luckily, was a little bit later than some other colleges' and universities' around the country. And we started to see trends elsewhere—down south and out west—where students that were used to and that had plans to go to a traditional college spring break and in many cases, they didn't change those plans. And we started to see major up-ticks in the virus, and we started to see those local health care systems start to really be stressed.

And SUNY, to their credit, New York State, to their credit, knew that they had to take very quick and decisive action. So, the decision to de-densify and to decamp the campus in conjunction

with that—middle of March, around March 17. And I think locally for us, really, my eyes were open to how serious things were going to get when they canceled the St. Patrick's Day Parade.

You know, there's a planning paradigm, if you will, in the emergency management world—particularly related to hurricanes—where it's the Waffle House Index, whereby emergency managers throughout the country will gauge the seriousness of a hurricane or the trajectory of a hurricane based on whether Waffle Houses are opening or closing. Because they essentially have this model where they don't close.

So the Waffle House indicator, if you will, was, you know—my lights were definitely turned on and I knew pretty much then that we were going to be thrust directly into planning for the students that we have and trying to get them home safely, making accommodations for those that couldn't go home safely—whether out of state or international or with traditional housing challenges and things like that. Overnight, we became isolation and quarantine experts and then added to the growing list of things that we became involved in.

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CK: In terms of sources of help, what was the most unexpected source you found yourself drawing from?

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LZ: That's a great question. I think for us, you know, my personal networks and connections kind of really touch emergency management, hospital and healthcare, emergency medical services, the police community, local volunteer fire and rescue. So luckily I have worked and continue to work in those fields—being able to pick up the phone and be on a first name basis with my counterparts in local, state, and even federal government.

Many of my former colleagues from New York City that had been retired from previous positions had taken, whether temporary or permanent, positions with FEMA [Federal Emergency Management Agency]. And you know, in the few weeks after the de-densification, if you will, the decision to create alternate care facilities and the proverbial field hospitals—and Stony Brook being selected as a site for one of those—was really something that, you know, only [happened] in textbooks and only in theory and only really in places that have been impacted by weather events—hurricanes and floods and things like that.

Never in my wildest dreams did I think we would be in the midst of responding to a pandemic and having our hospital really be the focal point for Suffolk County as it related to—whether individual patients themselves, or patients being transported. And our ICU [intensive care unit] capacity being flexed overnight to 150 percent. And identifying spaces in the hospital that would be for surge capacity but then literally building a hospital in the middle of our campus was—it was surreal, honestly.

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CK: Can you say a little more about how that process—how they chose the site and what involvement you had in getting it running?

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LZ: So it's very interesting that I think New York State's—the notion of trying to build regional sites and, in our case, we were the Suffolk County regional site. SUNY Old Westbury was for Nassau County, and they were kind of partnered in some respects with Northwell and the Northwell Health System. And then New York City, and obviously the USS Comfort came up into New York Harbor and just—doing everything we could to try to build our capacity. Luckily, in many instances it was not necessarily used. Our facility was not used.

But it was just trying to plan for a lot of unexpected [things], you know, [we] really didn't know. The mountain of cases just kept increasing and just didn't show any signs of abating. While we were, at the same time, really battling supply chain issues for ventilators, for gowns, for gloves, for masks.

So while that was all happening, Stony Brook, again, was seen as a regional resource and as an important resource for—certainly for Suffolk County and the middle to the eastern end of Long Island. We were engaged with the governor's office. The Army Corps of Engineers served as the—I'll say the general contractor of sorts or the project manager. And then the construction was handled by a construction company.

And, over the course of fourteen days, the middle of our athletic fields went from green grass to five individual, ultimate care facility tents. But not tents in the traditional sense—actual structures with heating and ventilation systems and power and fire suppression systems, and there's infrastructure in those facilities that rivals some permanent structures.

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CK: And were they staffed? Were they ever up and functioning?

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LZ: No. So the plan always was—and actually still is, as of this recording—that within two weeks, if there's a need to do that, the New York State Office of General Services, OGS, is now responsible for the operation and maintenance of it. There are some National Guard troops that have been deployed the whole time—sort of handling the security and the day-to-day operations there. But the facility itself is on standby, and in the event it would be needed, then obviously other forces would be brought to bear. But [there was] a lot of planning and a lot of logistics and a lot of setup. Everything from, you know, temporary roads and parking areas and it just—again,

while it was happening, in the middle of it, it almost didn't feel—just the days were really long and it was a seven-day-a-week operation.

Because we still had students on campus, we still had plans. We had faculty and staff, we had, you know, complying with SUNY requirements to safely keep a campus running. Obviously, we're like a small city, but at the same time we were mindful of the cases and the ever-evolving face of the virus, which also seemed to change week by week.

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CK: Yeah, and just to stick on some of those—that experience during those busiest days—are there certain sights and sounds that stick out to you or that you find yourself remembering?

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LZ: We—and by “we” I mean, at the time, myself and Judy Greiman, who's the chief deputy to the President. We spent many, many hours—not that there [were] not other people there. There [were] certainly many others, but her and I [were] sort of like the dynamic duo. In the president's conference room from very early in the morning, you know, seven a.m., until sometimes seven, seven thirty, eight o'clock at night during the week and weekends, early morning conference calls, and contacts throughout the day. And that was March into April. I mean, probably a solid two months.

And there were times when she was like part leader, part cheerleader, part mom, part, you know, caretaker. There was always fresh granola and healthy snacks and certainly plenty of caffeine. But the professional and personal relationship that we forged actually allowed us to, I think, help steer the university into where we are today. That it's November 10 and despite many skeptics—and perhaps folks internally and externally who didn't think we'd be able to safely do what we did—but here we are. Winding down the fall semester, and our cases luckily remain, you know, manageable—while we're starting to see an uptick in the county and throughout the state and the nation.

So there [were] a lot of laughs and some tears probably along the way and certainly frustrations. But I think we as a university and as a senior leadership team have grown in leaps and bounds.

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CK: How did you take care of your own health?

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LZ: Umm—certainly a lot of energy drinks and a lot of coffee and tea.

Luckily, I was able to stay healthy the whole time. I think probably early on—maybe in December—you know, everyone says, I think I might have had COVID before we knew it was

COVID. I was pretty sick right around the holidays and right around the first of the year—maybe took a day or so off, had a fever, and then it went away. But luckily, you know, into later January and into February I made it through—I'm knocking on wood in the background here—made it through the winter and into the spring, and here I am now.

There was a challenge that gyms had closed. I spend probably five or six days a week in the gym under normal circumstances, and then once gyms shut down I definitely had some challenges. It's certainly my outlet, mentally and physically. So I couldn't get to the gym, and then you couldn't get gym equipment. And that was like the running joke—every day I would [be] like a mercenary trying to find kettlebells or weights or—anywhere, you know. People couldn't get them.

But eventually I did, and probably by May or June I wound up building a gym at home because I needed that—needed the stress relief. I needed the—you know, for my own health. So it's still there today and, fingers crossed, I'm back in the public gym. But it was definitely a rare commodity trying to find some dumbbells, that's for sure.

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CK: And how did all this affect your routine at home or [the] situation at home?

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LZ: You know, I have a wife and four kids. My older boys are grown and out of the house. One's in the Navy down in Virginia. My oldest is in chiropractic school out in California.

And then I have my younger ones that we call Zacaese 1.0 and 2.0. So my daughter's a high school freshman, and my little guy's in middle school. I've always been in the emergency service world for, you know, the last twenty-seven years so they're kind of used to the late hours, unpredictable nature of the work. But this was definitely next-level stuff. My wife is—she's a sainted woman. She works in the field as well. The first half of her career was in emergency medical services, and now she works in organ donation.

So the public service entity that is our family was aware of it. But the mental—I think the mental health pieces and the kids being locked away and not necessarily interacting with their friends and, you know, going right from the winter straight after the holidays into just a couple of weeks back at school, and then schools were shut down.

But we have a great relationship and great, strong family bonds, and they were very understanding. There were certainly days where they were less understanding than others. I mean, it was long, long days, every day of the week.

But you know, same thing there—I say a lot of laughs, a lot of tears, and a lot of FaceTime while just trying to stay in touch with everybody.

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CK: Just to circle back to something: what was the experience like having to coordinate—or coordinating—with state and even federal authorities?

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LZ: You know, it was a challenge. And I will say, thank goodness for the relationships that were forged in advance because trying to build a relationship in the middle of a crisis is always a challenge.

Any time we do incident management or incident command training, the old adage is: you should never be meeting the chiefs or the leaders of your partner organizations at the scene of the fire, at the scene of the car crash. You should be on a first-name basis, and you should know people in advance. And it's something I've always taken to heart.

And you know—an electronic Rolodex of the who's who of local, state, and federal contacts really served us well.

I'm proud of the networks that I've developed over the years and the relationships that we have. And many of us, sort of— you know, the cross pollination of industries. Emergency management really is just a cornucopia of all the different emergency service fields. So a lot of familiar faces, for sure.

But also, it didn't come—didn't remove the frustration that's associated with competing interests and competing priorities. Like I said, that's a lot of moving parts, and my job is to make sure that the university and all the people that were here—whether it was the normal, you know, forty to fifty thousand or a handful—we never really went down [to] less than a thousand students. We still, even at the height in between the semesters, we still have students that are here year round—international students, grad students.

So, their health and safety is a job I take very seriously. And it's—we were able to successfully navigate it, due to just partnership and teamwork and collaboration. And I think it's really important to highlight the fact that the campus members—students, faculty, and staff—were extremely resilient and extremely compliant.

With all of the crazy things that we kept throwing at them—staggered work schedules. And students, you know, Go away for spring break. No, come back and get your belongings. Oh, you have to move out by Tuesday. Oh, you have to move out by today.

I think I touched on this when we were kind of having our pre-meeting. We'd go into a conference call—at the time before Zoom was the communication preference, and it was the

old-fashioned conference call—and by the time we got off the call, you know, two or three things that we thought we had solidified from a planning perspective had changed. Because whether the state had changed its mandate or SUNY—you know, being a state entity in a very complex state with multiple organizations.

And again, I can't emphasize enough the dynamic of the hospital and then the Long Island Veterans Home and all the things that were happening in the news and elsewhere. And we were subjected to all of those different dynamics.

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CK: And you'd mentioned, or—I just wanted to touch on the study abroad students that came back. Was that something you were involved in having to accommodate?

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LZ: Yeah. Very much so. To the point where—because it was early on and people were still very, very nervous—I wound up actually meeting the bus of students out at the Southampton campus and I could say, [became] a sort of a COVID bellhop of sorts.

Just because there were, you know—it was late at night. They didn't arrive until ten thirty, eleven o'clock at night. There was a lot of coordination. There were twenty-six students all together, and most of them were actually FIT [Fashion Institute of Technology] students. Only two students were actually Stony Brook students in that program. So, you know, FIT is our SUNY partner and there was—we had a resource that they could utilize.

And I'll say that was the hallmark of this entire pandemic thus far, is that there was never real—no territorial, you know, battling. Everybody within the system and outside of the system, within the university and outside of the university, has been—there was no ego. I guess maybe some egos—it just comes with the territory—but everybody was willing to step up and help with it in any way. And in that case, you know, they weren't necessarily our students, but they were SUNY students, and we were going to rise to the occasion.

So we met the bus out there and had to identify spaces and get refrigerators and phones and snacks and welcome packages and ways to communicate and really stand up a—and it wasn't even a quarantine. It was an isolation. It was fourteen days of isolation.

Food Service and Laundry Service and, you know, Student Affairs and the Residential Life folks, both here on Main Campus and out in Southampton, were fantastic. To the point where, I had made contact with one student the night of. And over the course of the two week isolation there, I would text her a couple of times a day. And that was our—their—communication to the outside world.

And, you know, they—a couple of days in, being in a different place, being taken from your program unexpectedly in Europe, thrust back into New York, taken directly from the airport, put on a bus—in many cases driving past where you live and past your family—to the eastern end of Long Island, to a campus you've never been to. You don't even know where Southampton is, in many cases. To, off the bus, directly into a room and being told to lock the door and don't come out for two weeks.

So, really a traumatic experience. But I think, again, those students were enormously resilient. I remember we, within the first couple of days, were taking requests on, you know, what we can do to make their stay better. We had Student Affairs run out to the local Dick's store or Target, wherever they could get their hands on yoga mats. Because there was a request for yoga mats. And we'd set up virtual yoga sessions and telehealth and telemedicine.

And I would say we cut our teeth at Southampton, to then replicate that for here on the main campus where we went from being able to accommodate twenty-six students out there, to where we can accommodate well over three hundred here on main campus. So, everything was a learning and growing process. Like I said, if there were one word to describe what we needed, it was flexibility and just being nimble because you never knew what—every time the phone rang, and it was a 518 area code, I knew something else was coming. And I didn't know if we would be prepared for it or if it was gonna be some out-of-left-field request, and many of them were out-of-left-field requests, but—

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CK: And just to reframe that, or frame that a little better than I did—so just walk us through—that was late February—and just tell us what the situation was with those study abroad students that brought them here.

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LZ: I'd say the end of February—last week of February, beginning of March—and the governor, Governor Cuomo, had decided that, and rightfully so, as the virus was continuing to morph and spread in Eastern Europe, that all study abroad programs—all SUNY study abroad students would be recalled back to the United States.

There was a time, for a couple of days, where it was strongly recommended, and we were just trying to, you know, encourage people to do so. But it was very quickly realized—I remember, that was a long forty-eight hour to seventy-two hour period where we started to see flights being cancelled, and we started to see lockdowns happening.

And the last thing we wanted—the last thing anybody wanted, certainly the governor's office and then us as an entity for the academic connection—was to have our students be stuck, you know, overseas, where we wouldn't be able to really support them. So the decision was made to bring them back and—definitely the right call.

I know some people weren't happy about it at the time, especially because partner institutions were trying to reassure us, No, we can handle the students, they can stay—in Florence and in other places. But it was definitely the right call to get them back on our soil and where we could definitely directly support them. And we did. So that was, I'll say, a positive takeaway.

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CK: And are there other out-of-left-field things—those phone calls—that stand out to you? Requests or challenges?

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LZ: You know, we—I guess you become a victim of your own efficiencies and successes. So when we showed, I guess, SUNY—and then we showed similarly, locally—that we were just very resourceful, so people wanted to—the community wanted to help. And the outpouring of support came from everywhere. From alum, to local community members, through businesses, and everybody wanted to help. And that usually comes in the form of donations—whether it's monetary, whether it's, you know, items. Things like that.

I learned this during September 11th when I was still in the New York City Police Department—is that, two things you have to expect in a disaster are: spontaneous volunteers and spontaneous donations. And if you don't have a plan to manage both of them, you could actually have a crisis within the crisis. And I'll give you an example, just anecdotally. You know, 150,000 pairs of socks may seem like a helpful thing. The problem is if you have no place to store them, and then you get 250,000 shovels. And flashlights and batteries and blankets and tents and all things. And this is all things that had happened during September 11th.

So taking that experience back here—very quickly, the community stepped up. So face masks were coming from, you know, overseas. And 3D printers were being donated, or this 3D printer space was being donated by libraries and then ultimately library systems and entire school districts. Again, they were shut down. So, our iCreate folks in our Division of Information Technology created a 3D-printed mask because we couldn't get them. And then we went into the mass production of 3D printed masks. And then the face shields themselves, and the, you know, the holders for those.

And then we became a central depot for a five-day-a-week donation center. We stood up a donation center in the Wang Center and everything from food trains and local businesses that wanted to donate food and gift certificates and things like that, to clothing, to gowns, to masks, to gloves. You name it, that—energy drinks, to pallets of water. And whether it was to support, initially, our healthcare partners in the hospital, and then, ultimately, West Campus as we were starting to bring our researchers back and things like that.

So temporary isolation and quarantine in Southampton campus, temporary hospitals in the middle of our campus, and then a warehouse. And then not only just a warehouse for intake, a

distribution center. So, for us to take it there and then get it to places on campus that needed it—the hospital that needed [it]. We partnered with the vets home when masks and gowns and gloves were a commodity. We partnered with the Northport VA [Veterans Association].

It was just a tremendous effort by so many different people, and the benevolence was overflowing.

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CK: I'm just curious—you've mentioned a few times your background. So as someone who studies and prepares for these types of things, what emotions go through you when they're actually happening? When it becomes real?

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LZ: You know, my wife jokes around and says that, “It took eleven years and a pandemic for people to finally buy into what emergency management is all about.”

And it's sort of—that's tongue-in-cheek, because I—you know, my position was created back in 2009 as a result of, tragically, of the shooting at Virginia Tech in 2007 where higher ed and colleges and universities realized that there needed to be a dedicated resource for planning, response, recovery, communication—all things around what we consider the “all hazards” approach to emergency management. Especially on a campus this big. So everything from floods, to fires, to severe weather, to the doomsday scenario of an active shooter. And public health preparedness is part of that.

Luckily for me, having the background, the EMS [Emergency Medical Services] background—I've been a paramedic for going on twenty-seven years. So that's really, you know, my love in healthcare and my love for the emergency aspects of disaster and crisis is—that's really where all my experience comes from. I was a paramedic before I was a police officer, before I got into emergency management. So yeah, eleven years and a pandemic.

But the university has embraced the importance of it. From my arrival to 2014. During Superstorm Sandy and realizing what—the role that we played during that. And building out our emergency operations center and, you know, we've always had—senior leadership and this university has always been supportive.

And I'm on my third president or fourth president, counting some interims in there, and there's never been a time when they have not realized the value that emergency management and emergency planning brings to the university.

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CK: And, like you said, we're not out of this yet. So, not to say that you can look back at the final results, but—when you look back at the last couple of months, was there anything that you thought would be a bigger problem that turned out to be not so?

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LZ: My biggest concern, and it seems kind of silly, but I was just trying to think of the logistics involved.

I was worried about mask-wearing compliance. You know, we had a mandate from the state to provide facial coverings for every student, faculty, and staff member as we were preparing—after the spring semester and preparing for fall. So we did a, you know, a mask purchase of well over 150,000 masks—branded face masks and non-branded face masks and all sorts of different things. So we would have—be prepared for that. And hand sanitizer, as we were getting ready for the safe, healthy return.

And I fully expected, especially at a time when there was some challenging things happening throughout the nation with law enforcement and with police departments and, obviously, a couple of very high-profile incidents and the resulting, you know, social justice and protests associated with those.

I did not want our police department to be in the mask-enforcement business, if you will. I thought it was a bad optic for a lot of reasons, and it was not how I was going to approach it. In fact, we flipped the entire narrative to [be] less about enforcement, regardless of who is going to be doing it, and more about community.

You know, the—"I wear a mask for you, you wear a mask for me." "Safe Seawolves." "Coming back safe and strong." And our marketing communication folks did a brilliant job, partnering with—certainly my office, and Student Affairs, and really the entire campus where the exact opposite of what I expected is true.

Our students, faculty, and staff wear facial coverings everywhere. Even people—I see them walking by themselves on the path late at night and when I'm leaving, or early morning when I'm coming into work.

So, what I thought would be problematic here, and even elsewhere in the community, has not been the case at all. And I'll just highlight it again that the Stony Brook campus community has itself to thank for the success. I'm, you know, one person who's trying to [be] the glue that's trying to hold all the pieces together. But it is a very broad team of talented, dedicated individuals at this university and our students, faculty, and staff should pat themselves on the back for getting us to where we are. And I'm confident that, regardless of what may happen over the next couple of weeks and then, you know, in the eight weeks between Thanksgiving and February 1st, the start of the spring semester.

Whatever it is, we'll continue to be resilient. We'll continue to be flexible. And we'll rise to the occasion as one campus.

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CK: And this is something I've asked you before, but what are you looking forward to in the moment right now?

00:38:15

LZ: I'm looking forward to Thanksgiving break. You know, I've been—both because the regulations say so, but also just from a public health standpoint—watching our numbers, watching our infectivity rate. Doing the best we can to vastly increase how we're testing and who we're testing and the frequency of testing while watching, overall, the number of cases on campus—where they're coming from.

And we're starting to see that uptick, as I mentioned. But it'll be a personal achievement, and I'll be able to really take a collective sigh of relief—and maybe a day off, haven't had one of those in a while—to get us into those days leading up to Thanksgiving. We have a requirement now where we have to get all of our students tested right before they leave—that ten-day period before they leave. So that's my next goal post is that, you know, just want to make it to Thanksgiving with a big smile and maybe a mini celebration.

00:39:17

CK: Larry, thank you for sharing all that with us, and we appreciate all the hard work, and thank you for talking with us today.

00:39:23

LZ: It's absolutely my pleasure. Thanks for having me.

[end of interview]