Ken White
From William & Mary in Williamsburg, Virginia, this is Leadership & Business. The podcast that brings you the latest and best thinking from today's business leaders from across the world. We share the strategies, tactics, and information that can make you a more effective leader, communicator, and professional. I'm your host, Ken White. Thanks for listening. Well, after several weeks of social distancing, virtual meetings, and shelter in place, most people are ready to go back, back to work, back to their favorite restaurant, and back to normal. But while we’re ready, we don’t know how long it’ll take and what it will take before we can return to normal. Rajiv Kohli is the John N. Dalton Professor of Business at William & Mary. He’s a leading scholar in health information technology and a health care expert. For over 15 years, he's worked and consulted with several health care organizations. Kohli says before we can return to our pre-pandemic lives, certain events must take place. He joins us on the podcast to discuss what needs to happen in order for us to return to life as we knew it. Here’s our conversation with Dr. Rajiv Kohli.

Ken White
Rajiv, thanks for taking time to join us. I hope you’re well and hope your family’s well.

Rajiv Kohli
Thank you, Ken. Everything is going well. Thank you for having me.

Ken White
Yeah, well, you know, if we all agree to be conscientious citizens and I know a lot of people are. Wearing the masks, staying at home, washing our hands, practicing social distancing, that's great. But it's not enough. You say a number of things have to take place in order for us to get back to normal—things like testing.

Rajiv Kohli
Yes, testing is really the first step. That is what tells us where we are. That's like the inventory of the disease itself. So testing is very important for a number of reasons. First, we have to know who needs help. Second, testing helps us understand where the disease is located and who do we have to isolate. Or we have to self-isolate. It also is a measure of
making sure that people who need help get help where they need help. And then it also
gives confidence to other people saying that I know where the disease is and where it's
not, and then I can continue with my normal routine. So, I see testing is really the first step
to know what is going on.

Ken White
Right now, we’re using 14-day isolation that that’s just not cutting it right.

Rajiv Kohli
No, 14-day isolation is NATO’s test, if you will, where we are saying we don’t have a
proper test. We’ll let the nature tell us who has the disease, who does not. The trouble
with that Ken is that thirty percent or so of the people who have the COVID-19 are
asymptomatic, meaning they do not show symptoms, and they are walking around without
knowing that they have the disease, and they may be spreading. So, by the time you find
out up the 14-day period, they may have already spread that.

Ken White
You say we need to treat people who are very sick nationally and hot spots. Are we able to
do that as a nation now?

Rajiv Kohli
Yeah, so that’s really the second step along with the testing part is that after we find out
that who has the coronavirus, they need help. Unfortunately, a percentage of those will be
very sick and they will need help. Hospitals are prepping themselves for taking care of
these patients with ventilators, ICU’s and train staff I might add, in addition to the
equipment, we need people who are able to provide care and use that equipment to
answer your question. That’s kind of spotty. Some places are saying that their numbers are
manageable, meaning that they’re not seeing a big surge. But we know other places like
New York or Washington State, and increasingly a few other places in the country are
seeing the kind of surge that they were worried about. Also, as of now, I think we are still
kind of behind the eight ball in terms of having proper equipment, and that includes
ventilators, personal protective equipment, things like sanitizers, masks, which is for the
common public, a very important piece of this puzzle that helps us stay safe.

Ken White
Yeah, you said that was sort of step three was making sure that the public has preventative
equipment. That’s a bit of an issue, isn’t it?
Rajiv Kohli
That’s correct. So, step three is the public being protected, knowing who has the coronavirus, who does not, and then making sure that if we do come in touch with them or do, we interact with them, that we are protected. And the simplest and perhaps the most effective way is for everyone to have a personal mask, a disposable one, many of them. Each time they go out, they should have a new mask that they use, so and we don’t have enough of those. On Amazon, the delivery period could be anywhere from three to four weeks, and they should be easily accessible. So, when I talk about the testing and the masks and PPE, what I also am implying in that is that not only are they available, but they’re easily accessible to people. They don’t have to go hunt for it. They don’t have to go wait for it. So, can I get my mask, have them delivered tomorrow morning? If they are available, then we are in good shape.

Ken White
Yeah. You and I were talking the other day. We ordered masks in our family several weeks ago. They’re supposed to come today. We’re recording on Friday. Right before you and I logged on. I looked out the window, and a FedEx truck rolled up. And I’m really hoping it’s that and not another delivery from Ulta or something that my daughter has ordered. So, fingers crossed.

Rajiv Kohli
How long-ago Ken did you order those?

Ken White
Ten days.

Rajiv Kohli
Okay, so that’s not too bad.

Ken White
No.

Rajiv Kohli
But I would like it to be available overnight if I wanted them.

Ken White
Right. And like a lot of families, we created our own homemade masks, not knowing if they’re any good. So, we’re looking forward to the actual medical masks that we’d like to use for sure. You say the next step is social distancing must continue.
Rajiv Kohli
Yes. Social distancing is something that we’ve been practicing in a number of ways by self-quarantine. And when we do come face to face with someone, we stand across the street and have a conversation. It should continue because that is really our way of defending us and others that we are working with. That in case I am one of the 30 percent asymptomatic individuals who has COVID-19 but does not show any symptoms. So, we are protecting ourselves, each other from that disease. So that will continue and will have to continue. And I think it will become part of our day to day interactive behavior when we meet with other sort of like, you know, when you and I have a cold and I see you in a meeting, I said, Ken, I’m not going to shake your hand because I have you know, I have the sniffles. I think that will become more ingrained in our day to day lives, at least in the near future, where we will say just to be safe, let’s keep this distance.

Ken White
Yeah, it was I just read a piece this morning on the Office of the Future, and everything was spread out, no doubt. Desks were spread out, doorways, and so forth.

Ken White
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Ken White
Yeah, the next step you said, we’ll probably see a rolling return to work.

Rajiv Kohli
Yes. The way I see the question is always, when will this be over?

Ken White
Hmm-mmm.

Rajiv Kohli
And then when we get back to work or the things that we were doing in our normal lives. I see this as a rolling return to work in the sense that there will be. Let’s say if you were divided into four weeks, the first week, there will be essential people who need to be at
work, will be at work, who are probably going to work once or twice a week right now, but they'll go on a daily basis and then followed by those individuals who have the option to work from home or would be more effective if they're at their desk. So that'd be the second wave. The third way will be people who were working from home could work from home, but they missed the interaction, and they are needed. And then finally, I think it will be the last quartile will be people who are a little bit more cautious who could do without being physically at work. And they will probably see three-quarters of their colleagues that say it's working for them. I'll get back to work too. I miss the interaction?

Ken White
Interesting. So, we need a 24-hour turnaround testing. We have to be able to treat people who are sick. We need the preventative equipment. Social distancing must continue when work returns. We'll do it on a rolling basis. But when you and I were talking the other day, you were saying the goal still remains we need a vaccine.

Rajiv Kohli
Absolutely. That is the final goal. But we know that in the best of cases, the vaccine is about twelve months away, and that is when everything goes well. Some of the previous experiences of vaccines had been years before they were properly tested and the trials were done, and they were deemed to be safe because one of the things that the medical community is very worried about is in the rush, as serious as this is, to get the vaccine to the public. They don't do more harm than they prevent the disease from spreading. Also, they will be absolutely sure before they will release that. And that estimate is about a year. Until that time, all the things that you described Ken are things that we will have to practice at different levels of our daily routines until we have the vaccine. And then it will be sort of like dealing with the annual flu.

Ken White
Yeah, so even when we all do go back, it will still be a very different place. And different interaction with one another.

Rajiv Kohli
It will be and one of the things that will determine that is what I call social confidence. Social confidence is a level of assurance that an individual must-have. And it's a kind of a conversation we have with ourselves by absorbing all the information around us. And we say to ourselves; I'm looking around, I'm not seeing any really bad cases. I'm seeing people actually leave the hospital. I had the conversation with my physician, and she's beginning to see patients. Life is kind of getting back to normal. And then that will give me the confidence to say, yeah, I can now interact in my social circle. But it also has the possibility that can swing the other way. If something comes on the news, you hear something in your local community, something bad happened. You know, somebody was
didn’t fit the profile of a high-risk patient had a serious illness and had to be in ICU. People will regress a little bit, and it will take a toll on their confidence. So that is not so much based on the resources of testing and PPE and masks, and things like that we talked about that is more of a confidence that comes from inside, and that is dependent on what’s happening around us.

**Ken White**
You see, a generation is playing a role in social confidence. I’m guessing younger folks might have a little more confidence then say someone who’s older.

**Rajiv Kohli**
Yes, I see that already in my two kids who are in their 20s, they are a little more confident than us. They are a little more antsy and itchy to get out to see their friends. But I’m also seeing something that is very positive among the younger generation is that while they want to go out and they feel more confident from all the news reports that this is something that affects people who have underlying conditions, I’m very pleased that they are also very considerate. As I was talking to one of my colleagues who has two sons in their 20s on East Coast and West Coast, and I was asking them, are they home? And he said, no. They wanted to come home. We wanted them to come home. But they said, for your sake, mom and dad, we have got to stay where we are.

**Ken White**
Wow.

**Rajiv Kohli**
So that is also a good thing among the younger generation that while they are confident, they are being very considerate for other people who may not be at such a low risk as they are.

**Ken White**
Yeah, that’s fantastic. You know you touched on one of the issues. There’s so much conflicting information out there. Did you have any suggestions, any recommendations? Where in the world do people go?

**Rajiv Kohli**
Yeah. So that is one of my pet peeves. And each time I see something on TV or somebody in my own family talking about, I saw this on Facebook or I saw that on WhatsApp. And unfortunately, some of our leaders as well give us conflicting information. I squirm every time I see that because this sounds like an exaggeration Ken that the bad information that we tell someone that oh I read this on Facebook or what’s happened and I saw this, I
heard somebody say this. Is almost as bad as the contagion itself. So, the virus spreads. But we are also spreading misinformation, oftentimes not purposefully, but just because we read something. So, I tell the people that share or try to share misinformation, what I consider misinformation without a proper attribution from a good source

Ken White
Hmm-mmm.

Rajiv Kohli
not to talk about it, not to spread it, because it's very difficult to reel it back in once you spread that information. So, to answer your question, yes, we don't have one reliable source that people all people go to. Yes, we do have reliable sources like the CDC and the scientists. But there is also conflicting information coming from our politicians among people that we should trust otherwise. I would like people to be very careful about information that they consume and information that they share with others unless they can be sure that it came from a reliable source. And then, too, I would say, well, this is what I read at this source so they can verify it.

Ken White
So, all in all, if the steps you had talked about take place and we get there, we it'll end, so to speak, we'll get back it'll just a little bit different.

Rajiv Kohli
Yes, it will be quite different. And we are not even talking about the business side and the sociological side that will be different, there will be a lot of new changes, that we will see new developments. Many of them will be positive developments. We will see a greater use of technology. We will see different processes of how we interact. So, for example, I become a big fan of Instacart. So, I think we are going to keep it after all of this is over, because I think that's a great service. And I can use that time to be more productive in other ways. And I think similarly, people are going to discover new ways of doing things. I'm imagining a lot of telehealth, or mobile health will be people will be more comfortable with that. Yes, there are issues we'll have to address of security and privacy and all of that. So, yes, there will be a lot of changes, but I think we'll come through this. We will get back to life as we knew it slightly different. But we will be able to continue to do what we were doing and be more productive. I just worry about people who are trying to short circuit the process by jumping these steps that we just talked about.

Ken White
That's our conversation with Professor Rajiv Kohli, and that's our podcast for this week. Leadership & Business is brought to you by the William & Mary School of Business. If
you're thinking about pursuing an MBA, pursue one that offers a transformational experience. Check out the MBA programs at William & Mary, the Full-Time, the Flex, the Online, and the Executive. Finally, we'd love to hear from you regarding the podcast. We invite you to share your ideas, questions, and thoughts with us by emailing us at podcast@wm.edu. Thanks to our guest Rajiv Kohli, and thanks to you for joining us. I’m Ken White, wishing you a safe, happy, and productive week.