

HIGHER EDUCATION GUIDANCE

IN RESPONSE TO COVID-19

Updated September 29, 2020

As lowa colleges and universities plan to bring students back to campus this fall, school administrators are encouraged to consider the following.

ENSURE COVID-19 PLANS AND PROCEDURES ARE IN PLACE

- Designate a COVID-19 contact (this could be a person(s) or an office) to be responsible for responding to COVID-19 concerns 24 hours a day and seven days a week. All students, faculty and staff should know how to reach the COVID-19 contact.
- Identify isolation rooms or floors (for on-campus housing) to separate anyone who has COVID-19 symptoms or tests positive and does not have symptoms.
 - It would be preferable for these rooms to have access to private restrooms.
 - Close off areas used by a sick person and do not use these areas until after cleaning and disinfecting. Wait at least 24 hours before cleaning and disinfecting. If 24 hours is not feasible, wait as long as possible.
 - Develop plans to provide food and other support for students in self-isolation, for the duration of their isolation period.
 - Offer virtual learning and telework options for students in self-isolation, if feasible.
- Identify quarantine rooms or floors (for on-campus housing) where COVID-19 exposed persons can self-quarantine. The designated quarantine rooms and floors should be separate from the designated isolation rooms or floors.
 - It would be preferable for these rooms to have access to private restrooms.
 - If institutions do not have adequate space to designate quarantine rooms or floors, plans should be established to separate COVID-19 exposed persons from non-exposed roommates. COVID-19 exposed students should not use shared areas (i.e., kitchens or restrooms).
 - Develop plans to provide food and other support for students in quarantine, for the duration of their quarantine period.
 - Offer virtual learning and telework options for students in self-quarantine, if feasible.
- Develop policies that encourage sick students, faculty, and staff to stay at home. Leave and excused absence policies should also account for employees and students who need to stay home with their children if there are school or childcare closures, or to care for sick family members.
- Monitor absenteeism of employees and students, cross-train staff, and create a roster of trained back-up staff.
- If feasible, conduct daily health checks (health checks should be done safely and respectfully, and in accordance with any applicable privacy and confidentiality laws and regulations) or ask faculty, staff, and students to conduct self-checks (e.g., temperature screening and/or symptom checking).

Develop procedures for notifying faculty, staff, students, families, and the public of closures and restrictions that have been put in place to limit COVID-19 exposure (e.g., limited hours of operation).



TESTING FOR COVID-19

Public health does not recommend campus wide testing. If institutions of higher learning chose to pursue campus-wide testing, coordination of testing and testing related expenses are the responsibility of the institution.

- Symptomatic students, faculty and staff should be evaluated for testing for COVID-19.
 - Close contacts of persons testing positive for COVID-19 should also be tested.
 - Testing for symptomatic students, faculty, and staff (and their close contacts) can be performed (at no cost) through the <u>State Hygienic Laboratory</u>.
 - Testing will also be made available through the Test Iowa system at certain area clinics and will be accessed by taking the assessment through a designated link and selecting the appropriate college or university.

BE PREPARED FOR INDIVIDUALS TO GET ILL

Have a plan for where ill students can be tested for COVID-19.

Students ill with COVID-19 symptoms should be isolated in accordance with guidance below.

Persons with symptoms of COVID-19 should self-isolate (this includes persons who test positive via diagnostic test (e.g., PCR, antigen), symptomatic persons who are not tested, and symptomatic persons waiting for their test results) until after the following three things have happened:

- They have had no fever for at least 24 hours (that is one full day of no fever without the use of medicine that reduces fevers) AND
- Their other symptoms have improved (for example, when your cough or shortness of breath
- has improved) AND
- At least 10 days have passed since their symptoms first appeared

Persons with symptoms of COVID-19 who are diagnostic tested and test negative AND who ARE a close contact of a person who tested positive for COVID-19, should continue to selfquarantine until 14 days after their last exposure to the confirmed case.

Persons with symptoms of COVID-19 who are diagnostic tested and test negative AND who ARE NOT a close contact of a person who tested positive for COVID-19, can go back to daily activities 24 hours after their fever and other symptoms resolve.

Persons who have a positive diagnostic test for COVID-19 but do not experience symptoms should self-isolate until:

- At least 10 days have passed since the date of the first positive test AND
- They continue to have no symptoms (no cough or shortness of breath) since the test.

People with severe, advanced immunosuppression who have a positive diagnostic test for COVID-19 should stay home until:

- They have had no fever for at least 24 hours (without the use of fever-reducing medicine) AND
- Symptoms have improved (for example, cough or shortness of breath has improved) AND
- At least 20 days have passed since symptoms first appeared (or from positive test if they never had symptoms)
- OR until they have had 2 negative tests in a row, 24 hours apart

Persons without symptoms and who have not been identified as a close contact of a confirmed case, being tested for surveillance purposes, are not required to be isolated while results are pending.

Persons who test positive for COVID-19 on serologic testing should not be excluded, unless they also test positive for COVID-19 on diangostic testing or are sick with COVID-19 symptoms and have not yet met the isolation release guidance described above.

Retesting is not currently recommended for a previously diagnosed person (unless immunosuppressed as above) if it has been less than three months after the date of symptom onset (or date of test if asymptomatic person) for the initial COVID-19 infection.

Plan to immediately separate faculty, staff, and students with COVID-19 symptoms (such as fever, cough, or shortness of breath). Establish procedures for safely transporting anyone who is sick to their home or to a healthcare facility. If you are calling an ambulance or bringing someone to the hospital, try to call first to alert them that the person may have COVID-19.

COOPERATE WITH PUBLIC HEALTH WHEN THEY CONDUCT CASE INVESTIGATIONS AND CONTACT TRACING

- Positive and negative COVID-19 laboratory results are mandated to be reported to public health.
- Public health will conduct a case investigation and identify close contacts.
 - Public health investigates cases by calling the person who tests positive for COVID-19 infection to direct them to isolate in accordance with the guidance above and asking them a series of questions about their illness, risk factors, and most importantly who they have been in close contact with (persons within 6 feet of the case for more than 15 consecutive minutes) during the time in which they could have spread illness to others.
 - People with symptoms of COVID-19 can spread the virus from 2 days before symptoms started until 10 days after their symptoms started.
 - People without symptoms of COVID-19 (who test positive for COVID-19 infection) can spread the virus from 2 days before they are tested until 10 days after they are tested.
 - Public health investigators then call the identified close contacts to direct them to selfquarantine for 14 days after their last exposure to the COVID-19 infected person.
 - Quarantine is NOT recommended for exposed close contacts, if the close contact was diagnosed with COVID-19 infection during the previous three month time period, as long as close contact remains asymptomatic (i.e., has not developed symptoms of a new illness).
 - Roommates of COVID-19 infected persons should be considered close contacts, irrespective of face covering use in the home.
 - If the COVID-19 infected person and the close contact are NOT roommates, and BOTH the COVID-19 infected person and the close contact wore appropriate face coverings (as described at: <u>https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/about-face-coverings.html</u>) during the interaction, quarantine is NOT recommended for the exposed close contact.

Public health will notify the COVID-19 Contact at the institution to provide names of students, faculty or staff testing positive for COVID-19 and the names of those who have been identified as close contacts of confirmed cases, so that housing and/or continuity of education assistance can be provided.

• Public health may ask for assistance from the COVID-19 Contact at the institution to identify contacts on campus in special situations (e.g., if a positive case is identified in an athlete who may have been in close contact with other teams).

FACE-COVERING USE

Public health encourages the use of cloth face-coverings either with or without a shield when able to do so safely and correctly.

- A cloth face-covering may not protect the wearer, but it may keep the wearer from spreading the virus to others. COVID-19 mainly spreads from person to person through respiratory droplets that can travel about 6 feet.
- Children under age two, people who have trouble breathing, unconscious or incapacitated people, and people unable to remove the mask without assistance should not wear cloth face-coverings.

• Education should be provided to all students, faculty, and staff on proper use, removal, and washing of cloth face coverings.

PRIORITIZE CLEANING AND DISINFECTING

- Clean and disinfect frequently touched surfaces (e.g., door handles, sink handles, drinking fountains, grab bars, hand railings, bathroom stalls, dining hall tables) at least daily or between each use as much as possible. Develop a schedule for increased, routine cleaning and disinfection.
- Encourage students, faculty, and staff to keep their personal items (e.g., cell phones, other electronics) and personal work and living spaces clean.

ENSURE HAND HYGIENE SUPPLIES ARE READILY AVAILABLE

Support healthy hygiene behaviors by providing adequate supplies, including soap, paper towels, tissues, no-touch/foot pedal trash cans, and hand sanitizer containing at least 60 percent alcohol.

REDUCE RISK ASSOCIATED WITH COMMUNAL SPACES AND FOOD SERVICE

- Consider opening residence halls at lower capacity.
- Stagger use and restrict the number of people allowed in communal spaces (i.e., dining halls, game rooms, exercise rooms, and lounges) at one time to ensure everyone can stay at least 6 feet apart, and clean and disinfect often.
- If possible, provide grab-and-go options for meals.
- Consider serving individually plated meals (versus buffet or any self-serve stations) in cafeterias and group dining facilities.
- When feasible, use disposable food service items (e.g., utensils, dishes).
- The lowa Department of Inspections and Appeals regulates licensed food establishments, for additional food service guidance visit:

https://dia.iowa.gov/document/covid-19-frequently-asked-questions-food-lodging-businesses https://dia.iowa.gov/about/novel-coronavirus-covid-19

CONSIDER MODIFYING CLASS FORMATS

- If possible, consider holding small in-person classes, activities, and events. Individuals should remain spaced at least 6 feet apart when feasible (e.g., hybrid virtual and in-person class structures or staggered/rotated scheduling to accommodate smaller class sizes).
- Host smaller classes in larger rooms.
- Space seating/desks at least 6 feet apart when feasible. Seating/desks should be facing the same way and staggered to the extent possible so students are not sitting immediately in front of each other.
- For lecture halls, consider taping off seats and rows to ensure six-foot distance between seats.
- When feasible, provide at least 6 feet of distance between individuals engaged in experiential learning opportunities (e.g., labs, vocational skill building activities).



CONSIDER IMPLEMENTING PHYSICAL BARRIERS AND GUIDES

- If feasible, consider physical barriers, such as sneeze guards and partitions, particularly in areas where it is difficult for individuals to remain at least 6 feet apart (e.g., cash registers).
- If feasible, provide physical guides, such as tape on floors or sidewalks and signs on walls to ensure that individuals remain at least 6 feet apart in lines and at other times.

DISCOURAGE SHARING OBJECTS

Ensure adequate supplies to minimize sharing of high-touch materials to the extent possible (e.g., assigning each student their own art supplies, lab equipment, computers) or limit use of supplies and equipment by one group of students at a time and clean and disinfect between use.

- Encourage students, faculty, and staff to use disinfectant wipes to wipe down shared desks, lab equipment, and other shared objects and surfaces before use.
- As feasible, position disinfectant wipes in locations where sharing will occur (i.e., shareduse computers in libraries or hands-on laboratories).

PROMOTE SOCIAL DISTANCING AT ALL GATHERINGS

- Pursue virtual group events, gatherings, or meetings, if possible, and promote social distancing of at least 6 feet between people if events are held. Limit group size to the extent possible.
- Pursue options for sporting events and participation in sporting activities in ways that reduce the risk of transmission of COVID-19 for players, families, coaches, and communities.
- Limit any nonessential visitors, volunteers, and activities involving external groups or organizations as much as possible – especially with individuals who are not from the local geographic area (e.g., community, town, city, or county).

CONSIDER VIRTUAL MEETINGS

- Encourage telework when possible for faculty and staff, especially employees at higher risk for severe illness from COVID-19.
- Replace in-person meetings with video- or tele-conference calls when possible.
- Provide student support services virtually, as feasible.

TAKE PRECAUTIONS WITH TRAVEL AND TRANSIT

- If transport vehicles (e.g., buses) are used, drivers should practice all safety actions and protocols as indicated for other staff (e.g., hand hygiene, cloth face coverings).
- To clean and disinfect uses, vans, or other vehicles, see guidance for bus transit operators.
- Encourage students, faculty and staff who use public transportation or ride sharing to use forms of transportation that minimize close contact with others (e.g., biking, walking, driving or riding by car either alone or with household members).
- Encourage students, faculty and staff who use public transportation or ride sharing to follow <u>CDC guidance on how to protect yourself when using transportation</u>. Additionally, encourage them to commute during less busy times and clean their hands as soon as possible after their trip.

SUPPORT COPING AND RESILIENCE

- Encourage employees and students to take breaks from watching, reading, or listening to news stories, including social media if they are feeling overwhelmed or distressed.
- Promote employees and students eating healthy, exercising, getting sleep and finding time to unwind.
- Encourage employees and students to talk with people they trust about their concerns and how they are feeling.
- Consider posting signage for Your Life Iowa: <u>https://yourlifeiowa.org/</u>

EDUCATE, POST SIGNS, AND CIRCULATE MESSAGES

Educate on the importance of self-isolating when sick with COVID-19 symptoms or if tested positive for COVID-19.

- Educate on the importance of self-quarantining if a close contact (within 6 feet of the infected person for more than 15 minutes) of someone with COVID-19.
- Recommend and reinforce handwashing with soap and water for at least 20 seconds. If soap and water are not readily available, use a hand sanitizer that contains at least 60% alcohol.
- Encourage students, faculty, and staff to cover coughs and sneezes with a tissue or use the inside of your elbow. Throw used tissues in the trash and wash hands immediately with soap and water for at least 20 seconds.
- Post signs in highly visible locations (e.g., building entrances, restrooms, and dining areas) that promote everyday protective measures and describe how to stop the spread of germs (such as by properly washing hands and properly wearing a cloth face covering).
- Include messages (for example, videos) about behaviors that prevent spread of COVID-19 when communicating with faculty, staff, and students (such as on websites, in emails, and on social media accounts).

OFFER PROTECTIONS FOR STUDENTS, FACULTY, AND STAFF AT HIGHER RISK FOR SEVERE ILLNESS FROM COVID-19

- Offer options for faculty and staff at higher risk for severe illness (including older adults and people of all ages with certain underlying medical conditions) that limit their exposure risk (e.g., telework and modified job responsibilities).
- Offer options for students at higher risk for severe illness that limit their exposure risk (e.g. virtual learning opportunities).
- Consistent with applicable law, put in place policies to protect the privacy of people at higher risk for severe illness regarding underlying medical conditions in compliance with applicable federal and state privacy and confidentiality laws.

RECOMMEND 14-DAY QUARANTINES FOR INTERNATIONAL TRAVELERS

Students, faculty & staff who travel internationally should self-quarantine for 14-days upon their return to or arrival in the U.S. (this includes international students coming to campus at the start of the school year).

INSPECT VENTILATION AND WATER SYSTEMS

- Ensure ventilation systems operate properly and increase circulation of outdoor air as much as possible, for example by opening windows and doors.
- Do not open windows and doors if doing so poses a safety or health risk (e.g., risk of falling, triggering asthma symptoms) to students, faculty, or staff using the facility.
- To <u>minimize the risk of Legionnaires' disease and other diseases associated with water</u>, take steps to ensure that all water systems and features (e.g., sink faucets, drinking fountains, and decorative fountains) are safe to use after a prolonged facility shutdown.
- Drinking fountains should be cleaned and disinfected, but encourage faculty, staff and students to bring their own water to minimize use and touching of water fountains. Install touchless water bottle refilling stations if possible.

IMPLEMENT SAFETY PRACTICES IF COVID-19 EXPOSED CRITICAL INFRASTRUCTURE WORKERS WILL BE ALLOWED TO CONTINUE WORKING

CDC defines critical infrastructure workers as:

- Federal, state, & local law enforcement
- > 911 call center employees
- Fusion Center employees
- Hazardous material responders from government and the private sector
- Janitorial staff and other custodial staff
- Workers including contracted vendors in food and agriculture, critical manufacturing, informational technology, transportation, energy and government facilities

CDC guidance describes procedures to allow critical infrastructure workers to continue working if they are exposed to COVID-19.

If colleges and universities choose to allow their critical infrastructure staff to continue working, clear protocols should be established to address the recommended safety measures described in the <u>CDC guidance</u>.

FOLLOW RECOMMENDATIONS OF THE APPROPRIATE ATHLETIC ASSOCIATION

Please follow the appropriate athletic association guidance related COVID-19 procedures for athletic teams. If additional questions arise, contact your local health department or the lowa Department of Public Health.

For additional information visit:

https://www.cdc.gov/coronavirus/2019-ncov/community/colleges-universities/considerations.html https://idph.iowa.gov/Emerging-Health-Issues/Novel-Coronavirus https://coronavirus.iowa.gov/

STUDENT HEALTH RESOURCES

Instructional specimen collection videos for student health offices:

https://www.youtube.com/watch?v=J7ILZEZ6u_w